

Evaluation of the Health and Wellbeing Fund

A Report for NHS Highland



Social Research



Service Design & Innovation



Strategy & Collaboration



Evaluation Support



Social Impact Measurement

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This report has been prepared by Social Value Lab on behalf of NHS Highland.

The report presents the findings from the evaluation of NHS Highland's Health and Wellbeing Fund.

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1: Introduction

This report describes the impact of NHS Highland’s Health and Wellbeing Fund (HWF) created to offer support to various local organisations and community projects.

NHS Highland

NHS Highland is one of Scotland’s 14 regional health boards. NHS Highland covers an area of 32,500 square kilometres and services a population of 320,000. This makes it one of the largest and most sparsely populated Health Boards in the UK.

NHS Highland is responsible for the provision of healthcare in the area through the provision integrated health and social care, there is a focus on prevention, anticipation and supported self-management.

The Health and Wellbeing Fund

NHS Highland has established the Health and Wellbeing Fund (HWF) in Argyll and Bute Community Health Partnership (CHP), a fund for small grants to support community-based initiatives.

The HWF provides small grants up to £3,000 to community-based projects in Argyll and Bute for upstream preventative health improvement activities to support the Strategic Priorities of the Argyll and Bute Joint Health Improvement Plan.

Study Objectives

NHS Highland has commissioned Social Value Lab to undertake an evaluation of the Health and Wellbeing Fund in the

period covering the financial years 2012/13 and 2013/14.

The principal aim of this study is to help NHS Highland and partners to understand the impact of the HWF on the funded organisations and the local communities in Argyll and Bute.

NHS Highland will use this evaluation to:

- Assess whether the fund has achieved its intended outcomes.
- Evidence the wider impact of the Fund on the communities in Argyll and Bute.
- Explore the contribution of the Fund to the longer-term sustainability of the funded projects.
- Prove the value for money of the Fund.

Study Method

The study was carried out by Social Value Lab between June and September 2014. It was based on a qualitative research design that involved a number of main stages.

- Desk-based review of the HWF monitoring information.
- Desk-based review of the 37 case studies produced by

funded projects as part of their end-of-grant report.

-
- Focus group discussion and face-to face interviews with the Network Co-ordinators and NHS Highland/Argyll & Bute CHP Health Improvement Principal.
-
- Survey of the Local Health and Wellbeing Network members with 57 responses, including those that have received funding (42) and those who have not (15).
-

The findings of the evaluation are set out in the following pages.

2: The Health and Wellbeing Fund

This Section describes the Health and Wellbeing Fund and analyses some of its characteristics.

The HWF is established to resource community based upstream preventative health improvement activities. It is funded by NHS Highland and delivered by the Argyll and Bute Community Health Partnership through the Health and Wellbeing Partnership.

The Fund aims to address the eight Strategic Priorities¹ as outlined in the Joint Health Improvement Plan 2013 – 2016²:

- **Health Inequalities** - reducing inequalities in social, economic and environmental determinants on health
- **Alcohol & Drugs** – reducing the harm caused by alcohol and drugs misuse, incl. prevention
- **Healthy Weight** – reducing illness due to obesity and promoting a healthy lifestyle
- **Mental Health** - improving mental health and wellbeing

- **Smoking Prevention** – reducing the smoking population
- **Early Years** - ensuring the healthy development of young children and their parents/carers
- **Teenage Transition** – supporting young people with their transition from childhood into adulthood
- **Older People** – supporting older people to live longer in their community

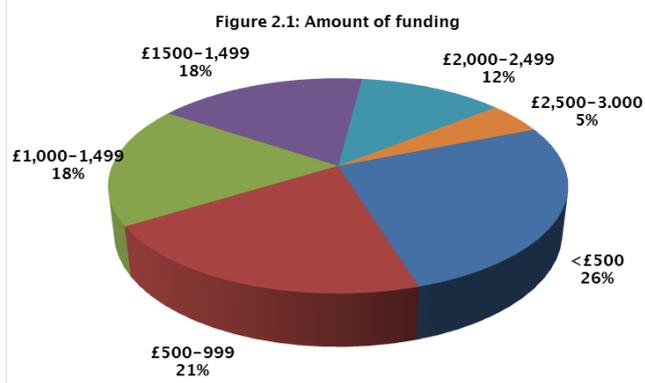
The Fund is administered by the Health and Wellbeing Partnership who distributes the grant across the seven Health and Wellbeing Networks using a formula based on the NHS National Resource Allocation Committee (NRAC) resource allocation formula.

In the period covered by this evaluation, the years 2012/13 and 2013/14 a total amount of £163,581 was distributed across 148 projects.

¹ The last two Strategic Priorities (Teenage Transition and Older People) have been added in 2012/13

² Being the healthiest we can be in Argyll and Bute, Joint Health Improvement Plan 2013 – 2016, Argyll and Bute Health and Wellbeing Network.

Figure 2.1 shows the distribution of the amount of funding



The average grant was £1,105. The largest amount was £3,000 and the smallest £84.

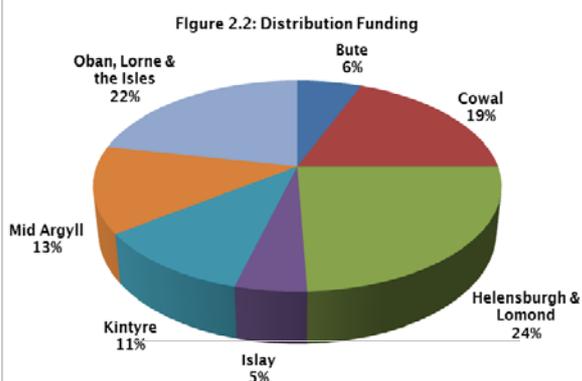
Figure 2.1 shows that just over a quarter (26%) of the grants was under £500, and almost half (47%) under £1,000.

Table 2.1 shows the distribution of funding across the seven areas.

TABLE 2.1: DISTRIBUTION OF FUNDING

	2012/13	2013/14	Total
Bute	£5,700	£4,275	£9,975
Cowal	£18,500	£12,420	£30,920
Helensburgh & Lomond	£23,625	£16,213	£39,838
Islay	£4,421	£3,390	£7,811
Kintyre	£10,694	£6,973	£17,667
Mid Argyll	£13,736	£7,970	£21,707
Oban, Lorne & the Isles	£20,502	£15,162	£35,664
Total³	£97,178	£66,403	£163,581

Figure 2.2 shows the distribution of the total funding across the seven areas.



³ The normal amount of funding available for the HWF is around £71k per year. Financial arrangements in Argyll and Bute, however, affected the actual allocations (budget underspent in other areas was re-allocated to HWF in 2012/13 and 2013/14 budget was cut to meet with overall budget savings).

Each of the seven areas has a Local Health and Wellbeing Network, supported by a Health and Wellbeing Network Co-ordinator, who have a remit to support community groups and initiatives with applying for the HWF and implementing the funded projects.

The grant decisions are made by the Local Health and Wellbeing Networks. The proposals are scored by a Scoring Panel consisting of at least three Network members that are not applying for funds, based on six criteria:

- Priority – the link with one or more of the Strategic priorities.
- Rationale – evidence of need for the project.
- Value for money – ensuring the best use of the resources.
- Evaluation – having a method to demonstrate the success of the project.
- Sustainability – can the project be sustainable in the long term.
- Partnership working – links with other partners.

The ultimate funding decision is made in an open Local Health and Wellbeing Network meeting, where the proposal is discussed and local knowledge can be applied.

“I think that the way the funding is spread out is the way forward, I feel it’s good to get to the meetings to hear from each of the individual groups, what they are spending the money.”

Administration

The administration of the HWF involves the NHS Highland's Health Improvement Principal, the Public Health Administrator and its Finance Team, as well as the seven Local Network Co-ordinators.

It is estimated that approximately one day per month of the time of the Health Improvement Principal is spent on the administration and monitoring of the Fund, one day per week of the Public Health Administrator's time and one day per month of the Financial team. This amounts to a financial cost of up to £5,000 per year.

The Network Co-ordinators spend most of their time on HWF-related activity in three distinct roles: application support, support with the implementation of funded projects and administration such as scoring panels and meetings. The Fund is estimated to take up at least 50% of their time, amounting to a cost of at least £17,500 per year.

There are also unquantifiable costs for recipients in completing the application form and monitoring requirements.

In total the minimum administration cost of the Fund is estimated to be in the region of £22,500 per year, which seems disproportionate to the grant amount (£66k in 2013/14). This was also commented on by some of the funded projects.

Less accountability and more trust in the applicants for the grants.

3: Impact on Communities

This Section draws on the impact data from the end-of grant reports and the result of the survey of funded projects and reports on the impact of the HWF on the communities in Argyll and Bute.

Strategic Priorities

The HWF addressed the strategic priorities set out in the Joint Health Improvement Plan. Table 3.1 shows the distribution of projects across the priorities. Most projects addressed more than one strategic priority.

TABLE 3.1: STRATEGIC PRIORITIES

Strategic Priority	No. Projects	%
Health Inequalities	126	85%
Mental Health	122	82%
Healthy Weight	79	53%
Early Years	59	40%
Alcohol & Drugs	28	19%
Older People ⁴	25	17%
Smoking Prevention	17	11%
Teenage Transition ³	17	11%

Table 3.1 shows that the HWF achieved outcomes under all strategic priorities. However, the impact of the Fund has been greatest in addressing Health Inequalities (85%), Mental Health (82%) and Healthy Weight (53%).

⁴ Older People and Teenage Transition have been introduced as a strategic priority for the HWF in 2013/14, therefore there are no projects identified under these priorities for 2012/13.

Evidence from Project Monitoring Data

As part of the ongoing project monitoring of the HWF, case studies have been prepared by the projects as part of their end-of-grant report. We have analysed the 37 case studies completed so far (25% of the total projects).

Naturally, the content, level of information and focus on impact varies widely across the 37 case studies. We have analysed these case studies to provide evidence of impact on the community. Table 3.2 shows the outcomes achieved by the projects emerging from the case studies.

TABLE 3.2: OUTCOMES FROM END-OF-GRANT REPORTS

Outcome	%
Increased skills/knowledge	43%
More activities for young people	41%
Increased confidence	32%
Increased social interaction/ less isolation	32%
Increased fitness	32%
Improved mental health	30%
More activities for community members	19%
More volunteering opportunities	16%
Improved physical health	14%
Healthier eating	14%
Improved the lives of families	14%
More arts, music and cultural activities	14%

Outcome	%
More activities for elderly people	14%
Reduced alcohol misuse	11%
Reduced inequalities	8%
Increase quality of life for people with physical disabilities	8%
Improved the natural environment	8%
Reduced drug misuse	5%
Healthier development of babies and young children	5%
Elderly people living longer at their own home	5%
Reduced smoking	3%
Weight loss	3%
Supported people from ethnic minority background	3%
Improved the physical environment	3%
Brought visitors into the area	3%
Made people more safe in the community	3%
Improved fire safety	3%
Helped people accessing health services	3%

Table 3.2 shows that the relatively small amounts of the HWF grant has had a wide range of impacts on the communities of Argyll and Bute, achieving health benefits and addressing health inequalities. The following pages will expand on the most frequently occurring outcomes.

The most frequently emerging outcome is the **transfer of skills and knowledge** (43%).

For some projects this was the main aim, such as for the production of a short film on the dangers of smoking to oral health, the Health Tent providing health information at the Islay Show, or the Waverley Silver Surfers project that taught IT skills to elderly people.

“People have had a whale of a time on the IT course and many are now confidently using Skype, Facebook and surfing the net.”

For other projects skills and knowledge transfer was just a part of the project. This was the case for example for Tarbert Community Woodland, where the HWF provided the fencing enabling school children to do tree planting and creating a pond.

Another example is Positive Eating for a Healthy Life in Kintyre, where the increased cooking and budgeting skills were subordinate to the health benefits of eating healthy.

Activities for **young people** came up in 41% of the projects. This included diversionary activities such as the Green Gym project in and around Dunoon for young people who are homeless or have addiction issues, or providing activities for young people in remote, rural places, such as the Family Fun Days on the Isle of Mull.

“This is a really good idea for something to do in the holidays.”

Around a third of the projects (32%) have led to an **increase in confidence** of the beneficiaries. An example of this is the Everyday mindfulness project, where the HWF enabled four Mindfulness Based Stress Reduction sessions for a group of twelve carers in Cowal and Bute, which made them more confident to cope with their caring responsibilities.

“Fantastic in relation to being a carer, I feel more able to cope with daily challenges.”

Another example is the swimming lessons for adults with physical disabilities in the Mid Argyll Community Pool.

“I need to use compression sleeves on both arms for my

Lymphedema and before this class I did not have the confidence to go into the pool without them."

"I feel the benefit of the advice and the equipment available, great for building up my confidence."

Also around a third of the projects (32%) enabled isolated people to enjoy **increased social interaction**.

This was the case for the Cowal Elderly Befriending Scheme that provided activities for people living with dementia, or the Parent's Craft Group in Oban that culminated in selling the produced arts and crafts at the Craft Fair in Corran Halls.

"I'm glad [friend's name] got me to come, I've made real friends."

Also approximately a third of the projects (32%) **increased the fitness** of the participants.

In some cases fitness was the main objective of the HWF funded project, such as the Dance Mania project that offered contemporary dance classes (street dance, urban, hip-hop) to involve young people in exercise, the Girls on the Go project in Lochgilphead that provided swimming lessons for girls, or the HWF funded treadmill for the An Cridhe Gym on the Isle of Coll.

"For years I've always said I wasn't built for exercise and running, but I'm delighted to say this attitude has changed. I have signed up for the 5k race at the Coll Half Marathon."

In other cases increased fitness was one of the objectives among others. For example the Achievement Bute Sensory

garden project that enabled children to be active in gardening and woodwork.

Just under a third of the projects (30%) resulted in an **improved mental health**.

This was the case for the crèche places at the Home-Start soft play area in Campbeltown that allowed parents with substance misuse issues some time away from their children to assist their own mental health and other issues.

Another example is the Mental Health Arts & Film Festival throughout Argyll and Bute that allowed local groups the opportunity to showcase their work and discuss mental health issues.

"There is no doubt that being creative and joining in with groups and activities has a positive influence on your mental health and wellbeing."

Evidence from Survey of Projects

The survey specifically asked the projects about what outcome they achieved and how many people have benefited. Table 3.3 displays the result.

TABLE 3.3: PROJECT OUTCOMES

Outcome	No. people	No. projects
Increased fitness	5,395	12
Increased social interaction/less isolation	1,491	23
More activities for elderly people	1,368	11
More activities for young people	1,307	12
More activities for community members	1,271	8
More arts, music and cultural activities	1,056	3
Improved access health services	535	8

Outcome	No. people	No. projects
Reduced anxiety/stress or depression	521	14
Increased skills/knowledge	467	16
More volunteering opportunities	462	12
Elderly people living longer at their own home	291	6
Reduced poverty	221	3
Improved community/home safety	220	3
Reduced visits to medical services (GP, hospital etc.)	171	5
Improved the lives of families	141	2
More activities for disabled people	141	5
Healthier eating	119	6
Better quality of life for people with learning disabilities	66	5
Improved natural/physical environment	63	3
Reduced substance use	43	5
Weight loss	36	5
Healthier development of babies and young children	31	3
Supported lone parents	11	4
Supported vulnerable group ⁵	10	3

Source: SVL Survey, n=29

Table 3.3 provides evidence of the broad reach of the HWF and the number of community members reached. The figures in Table 3.3 represent around one fifth of the funded projects ⁶.

⁵ Vulnerable groups = abused women, ethnic minority, LGBT, asylum seekers.

⁶ These data are insufficient to extrapolate to the total number of projects in a reliable way.

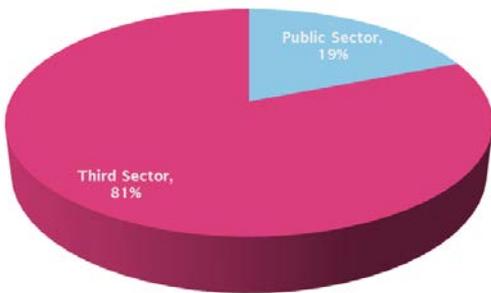
4: Impact on Organisations

This Section explores the impact of the HWF on the funded organisations.

Sector

Figure 4.1 shows the sector that respondents belong to.

Figure 4.1: What sector are you from?

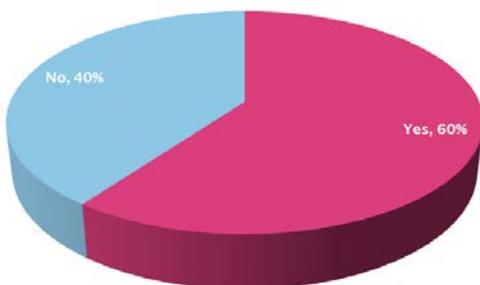


The majority of respondents (81%) of the funded projects were third sector organisations, varying from small local voluntary groups to larger incorporated charities and social enterprises. The remaining (19%) were from the public sector.

Staffing

Figure 4.2 shows that 60% of the respondents employ staff and 40% of the respondents are solely made up of volunteers.

Figure 4.2: Does your group or organisation employ paid staff?

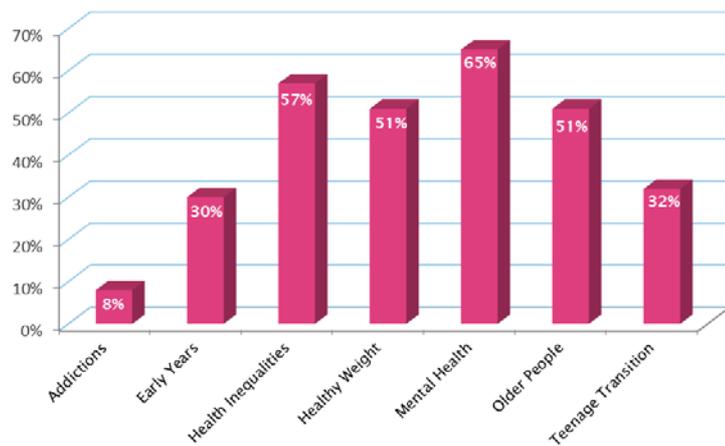


The relatively high percentage of 40% small voluntary organisations without paid staff shows that the HWF was able to reach the grassroots community organisations in Argyll and Bute and is testimony to the low threshold for a wide variety of projects to apply for and be awarded funds.

Strategic Priorities

Figure 4.3 provides an overview of the Strategic Priorities reported by the survey respondents.

Figure 4.3: Which strategic health priorities did your project address?



Mental Health (65%), Health Inequalities (57%), Older People (51%) and Healthy Weight (51%) are the most reported strategic priorities. Smoking Prevention is not selected at all.

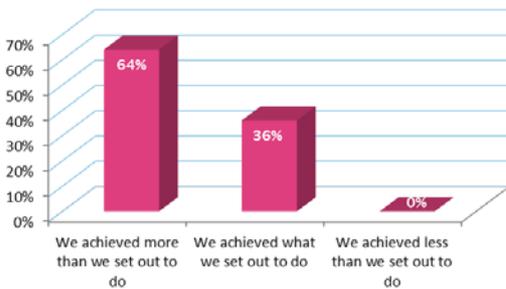
Compared with the general distribution of the projects across the strategic priorities as shown in Table 3.1 the priority Older People seems to be overrepresented. This is likely caused by the fact that this priority was only introduced as a strategic priority for the HWF in the second year under review. In reality projects in 2012/13 also addressed Older People issues.

This shows that there may be a difference between the predicted impact at the start of a project and the perceived impact at completion of the projects⁷.

Impact HWF on Funded Organisations

Figure 4.4 displays the extent to which projects thought they have achieved what they set out to do with the HWF grant.

Figure 4.4: Did your project achieve what it set out to do?

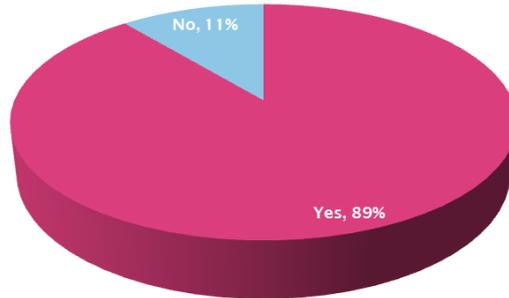


All surveyed projects reported that they have achieved what they intended to do. Two-thirds even reported that what they achieved with the HWF grant exceeded their expectations.

"We think having a fund like this that is simple to apply for, is

⁷ Differences can further be explained by the sample of Table 3.1 being all 148 funded projects and for Figure 4.3 the 43 projects that responded to the survey.

Figure 4.5: Do you think your organisation has become stronger (more sustainable) because of the grant?



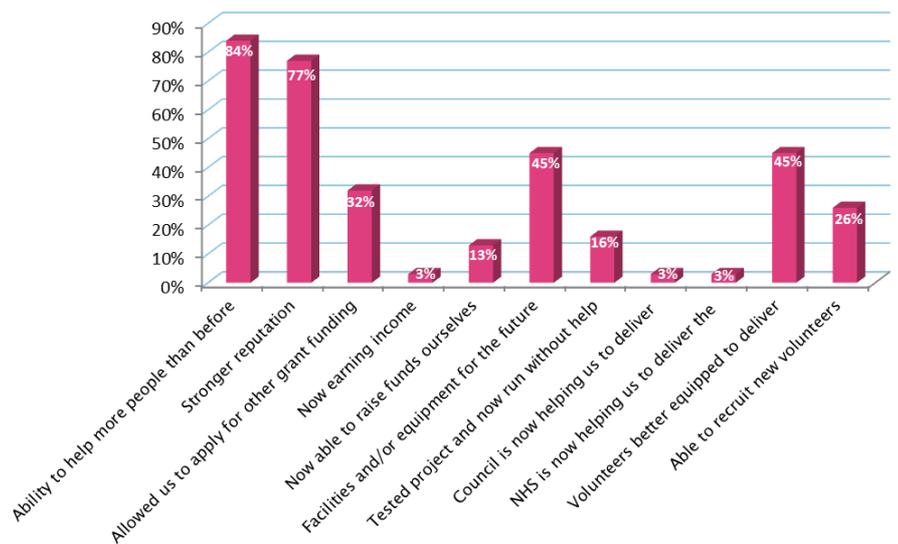
local money used locally and have a straightforward monitoring process makes it very accessible and user friendly for small groups like ours."

Sustainability

The HWF grant has had a positive impact on the organisations that received it, as shown in Figure 4.5.

Figure 4.6 details how the HWF grant has had a positive effect on the funded organisations.

Figure 4.6: Positive effect HWF grant on organisations



The HWF grant helped projects to increase their capacity (84%), helped to build a stronger reputation (77%), provided organisations with facilities and equipment to increase and approve their activities (45%) developed volunteers (45%) and helped recruiting new ones (26%), gave projects the skills and confidence to apply for other funding (32%) and/or raise the funds themselves (13%), allowed groups to pilot new activities (16%) and in a few cases allowed them to earn income (3%) or mainstream the activity through Argyll and Bute Council (3%) or the NHS (3%).

The following quotes illustrate the effect of the grant on the groups.

"The grant doubled the size of our project and increased numbers involved x5, so it was a step change."

"This was one of the first grants we applied for that we received. It gave us the confidence to apply for more grants."

"The project allowed us to reach individuals who through engagement now also receive other support from the organisation."

"It has brought our residents together more than before and families are now in touch via Skype, tablets, and emails etc."

5: Perceptions of the HWF

This Section reports on the opinions of Health and Wellbeing Network members and the Network Co-ordinators on the HWF.

The Network Co-ordinators' Perceptions

From consultation with the Network Co-ordinators the following main messages arose.

The HWF is an essential resource for small community groups in mainly rural areas.

"In many cases the HWF is the only place to go for money."

For many small voluntary groups, the HWF is their first experience with grant funding. The easy and open process and the support available give groups the skills and confidence to apply to other funders.

"We think it is an excellent fund. This fund allowed us to get up and running and to seek funding from other places".

The public meetings in which decisions are made add value to the process, by applying local knowledge to the funding process thus assuring the money will go the projects that need it most, by providing opportunities for groups and projects to co-operate and add value to each other's projects and by creating local support for decisions, as well as making negative funding decisions more palatable.

"It's a local budget for local needs, decided by local people".

The HWF builds local capacity, helps local groups to become more sustainable, stimulates partnership working, provides the necessary tools and equipment to get things started and enables groups to recruit new volunteers, avoiding the risk of 'volunteer burn-out'.

"Sometimes an urn and two tables is all that is needed to set up a service."

The HWF addresses health inequalities at a grassroots level. The Fund is instrumental in providing access to services in rural areas and helps addressing issues of rural isolation.

"Many services would not be there, if not for the HWF."

The HWF is crucial to the work of the Local Health and Wellbeing Networks. The availability of the HWF gets local people interested in the meetings. The funding applications sometimes bring wider issues to the table that the Network Co-ordinator then can take forward. Finally, because of the open process, the HWF stimulates sharing of knowledge and experiences among local groups and facilitates learning.

“Money brings people to the table.”

The Health and Wellbeing Network Member’s Views

The survey asked respondents to rate the various elements of the Fund on a scale from 1 to 10 (1=very bad, 10=excellent). Table 5.1 shows the average score of each element.

Table 5.1: Rating of the Fund

	Average Rating
The support provided by the Network Co-ordinator	8.8
The fact that funding decisions are made in a public meeting	8.8
The funding criteria	8.5
The fairness of the funding decisions	8.4
The guidance document	8.2
The way the applications are assessed	8.2
The flexibility of the fund	8.2
The monitoring requirements for the grant	8.1
The ease of understanding the application form	8.0
The end of grant report	8.0
The case study that applicants have to provide at the end of the grant	8.0
The questions asked on the application form	7.9
Additional support that is provided after the grant is approved	7.9
The support provided to unsuccessful applicants	7.4
The amount of funding available	7.1
The way the fund is publicised	6.6

Source: SVL Survey, n=53

Table 5.1 provides evidence that the HWF is very well perceived by the Health and Wellbeing Network members. The lowest average score is 6.6, still a positive rating, for the

publicity of the Fund. Even the amount of funding available, where a low score could be expected, still scored a respectable 7.1.

“Small voluntary organisations run by volunteers only know about the fund through hearsay - It needs to be publicly advertised otherwise the grants are loaded towards those ‘in the know’.”

“It took us 3 attempts to find the route through to getting a grant. We knew that the fund existed because about 3 years ago it was advertised/in an editorial in the Argyllshire Advertiser.”

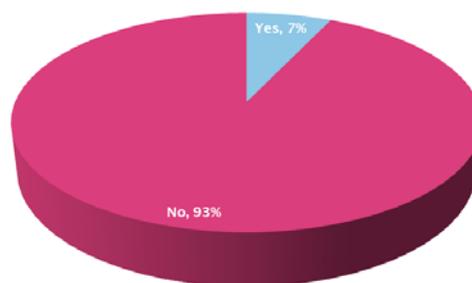
The most valued elements of the HWF were the support of the Network Co-ordinators and the public meetings to make funding decisions (both 8.8).

“The process was simple and clear, as was the criteria by which the fund was awarded by. The support from the Network co-ordinator was excellent.”

“I was pleased to see that application focused more heavily on the effects the group would bring about with funding rather than focusing on a lot of financial information and breakdowns etc.”

Only a tiny minority could identify any barriers to apply to the HWF, as shown in Figure 5.1.

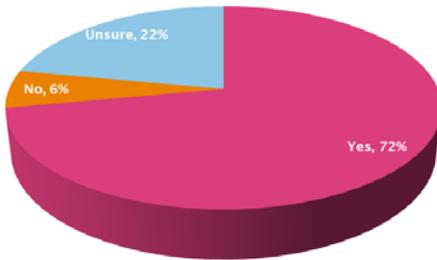
Figure 5.1: Were there any barriers for you to apply to the Fund?



The barriers identified included the insufficient publicity for the Fund and one respondent thought that the time and effort required was disproportionate to the amount of funding.

Figure 5.2 shows that almost three-quarters (72%) of respondents think that the fund has had a positive impact on the financial sustainability of the voluntary sector.

Figure 5.2: Do you think that the fund has made the local voluntary sector more financially sustainable?



Almost nine out of ten Network members (87%) believe that the HWF has a positive impact on local communities, as shown in Figure 5.3.

Figure 5.3: Do you think that because of the funded activities your community has become stronger?

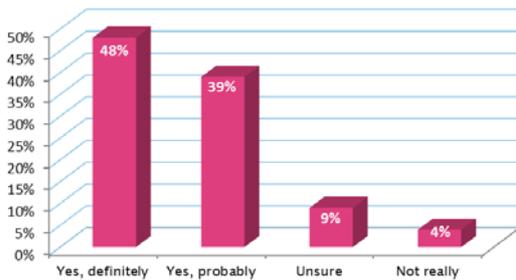
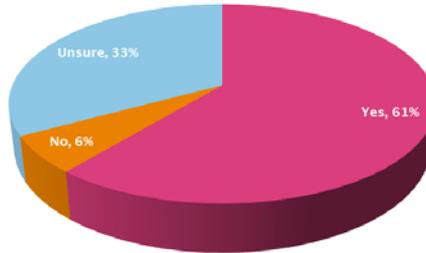


Figure 5.4 demonstrates that the majority of Network members (61%) also think that the fund has increased the capacity of the voluntary sector in Argyll and Bute.

Figure 5.4: Do you think that the fund has increased the capacity of the voluntary sector in Argyll and Bute?



Suggestions to Improve the HWF

The survey also asked for Network member’s suggestions to improve the Fund in the future.

The main recommendations and suggestions include:

- Increase the amount of funding available – this is an obvious recommendation from the perspective of the local groups.
- Improve the publicity for the Fund – as highlighted elsewhere in this evaluation publicity could be better.
- There were some respondents that questioned the decision making in a public meeting - this suggestion came from members that had not received funding.
- Create a central account that can pay project cost directly – thus avoiding the need for small voluntary projects to manage and administer money.
- Open the fund for individuals as well as groups.

Community Planning

The HWF objectives and the outcomes the Fund is achieving for communities and third sector organisations in Argyll and Bute are closely aligned to those of the Community Planning Partnership as expressed in the Argyll and Bute Community Plan and Single Outcome Agreement 2013-23 (SOA).

The document identifies six main long-term outcomes. The HWF contributes to three of these long-term outcomes:

Outcome 5: People live active, healthier and independent lives – the HWF has made significant impacts on the health and wellbeing of the people of Argyll and Bute, including those specifically mentioned in the SOA: reducing health inequalities, independent living for vulnerable and elderly people, and increasing healthy life expectancy (e.g. smoking, substance abuse, healthy weight).

More specifically the HWF funded projects contribute to the following identified focus areas:

-
- Everyone has the opportunity to be active members of their community.
-
- People are enabled to live independently, with meaning and purpose, within their own community.
-
- People are empowered to lead the healthiest lives possible.
-
- Healthier choices regarding alcohol and drugs and recovery from substance misuse.
-
- Mental health improvement strategies are promoted by the CPP.
-

Outcome 4: Children and young people have the best possible start –one of the aims of the SOA is to make children more active through increased opportunities in play, recreation and sport.

The HWF has two strategic priorities particularly aimed at children and young people: Early Years and Teenage Transition and under the remaining priorities there is a range of funded projects that work with and benefit children and young people.

The HWF funded projects help achieving outcomes in the following focus areas:

-
- Children and young people are more active and have more opportunities to participate in play, recreation and sport
-
- Children and young people have the highest possible standards of physical and mental health
-
- Children and young people can access to positive learning environments and opportunities to develop skills
-
- Children and young people have their voices heard and are encouraged to play an active and responsible role in communities.
-

Outcome 6: People live in safer and stronger communities – under this outcome Community Planning partners aim for thriving and sustainable communities participating in and contributing to the economic, social and fiscal health of the area. People should be confident in the services which support quality of life through their own design and delivery of these services.

The HWF projects support community planning partners achieving the following focus areas:

-
- Supporting communities to become strong, resilient and self-reliant.

 - Increased culture and heritage activity.

The SOA further introduces equality as a cross-cutting theme, stating that equality, diversity and inclusiveness are at the centre of all services and actions, with one of the key areas Health Inequality, one of the main priorities of the HWF.

The Community Planning partnership is committed to prevention, through strengthening the third sector and increased joint working and co-production with the third sector. The HWF helps strengthening the third sector organisations and stimulates and provides opportunities to test and pilot for co-production.

6: Case Studies

This Section provides seven case study examples of how the HWF has impacted on communities and the funded organisations.

Oban Winter Festival - The Oban Community Choir

The Issue

There are a number of choirs and musical groups active in Oban for specific groups, such as people with dementia, Gaelic speakers and school pupils. However, here was nothing for the general population of adults and elderly people.

The Project

Since 2011 the Oban Winter Festival is an annual recurring 10-day festival with a range of activities for the community and visitors, including a Reindeer parade, a Victorian Market, an Ice Rink, a Lantern Parade and fireworks.

For the 2012 festival, the Committee established the Oban Community Choir and successfully applied for a grant of £500 to pay for a conductor, a venue and refreshments.

After a three month rehearsal period, the Choir performed during the fireworks at the finale of the festival, to great acclaim of the thousands watching.

The Beneficiaries

Attendance to the Choir was open to everybody, but attracted mainly elderly and retired people. In total the Choir had 36 people that regularly attended the rehearsals and performed at the festival.

Health and Wellbeing

The Choir had a number of positive effects on the health and wellbeing of its members and the community. The main ones include:

-
- **Reduced isolation:** for the 36 mainly elderly members, who are not in contact with other services, the Choir performed an important social function that introduced them to new likeminded people.
-
- **Increased confidence and self-esteem:** being part of a project and learning new skills helped the members grow their confidence and self-esteem. The well-received performances for an audience of thousands of

community members added to that.

- **Improved mental health and wellbeing:** being part of the Choir and related social activities has helped to reduce the stress and feelings of depression for the members.
- **Cultural activities for the community:** the Choir has contributed to the success of the festival and provided cultural activities for a large group of the community. Giving something to the community and making other people happy was an important outcome for the members and the community alike.

Impact on the Organisation

The Oban Winter Festival Committee had spotted a gap in activities for elderly people that would have a considerable positive effect on their health and wellbeing. The HWF grant allowed them to try and test this new idea, which would otherwise not have happened.

After the Festival the Choir members decided to constitute themselves as an independent organisation.

New Partnerships

Once constituted the Oban Community Choir went from strength to strength, and are performing regularly, for example the Oban Community Singers participated in the Big Song Relay in July 2014.

Since the 2012 festival the Choir has collaborated with other choirs, such as their performance at the 2013 festival together with the Sequence Lady Choir,

consisting of young people, stimulating intergenerational contacts.

For the 2014 Oban Winter Festival there are plans to perform together with a newly formed samba-band, another ensemble of young people.

Sustainability

After the successful initial performance and the subsequent constitution of the group, it is now self-sustainable. The Choir raises its funds for the conductor, the venue and refreshments through a weekly contribution from its members.

Although the project does seem to have achieved sustainability relatively easy, without the initial HWF grant to test the idea and establish a demand, none of this would likely have happened.

The Oban Winter Festival Committee is currently trying to repeat the model by accessing grant funding for the samba-band.

Inverloch Transport - Prescriptions for the People

The Issue

Public transport is inaccessible, infrequent or not available in large parts of rural Cowal. In Argyll and Bute around a quarter of the population (24.6%) does not have access to a car.

In the rural area of Cowal, this is a serious issue for people that are housebound, ill or have mobility issues, who have difficulty collecting their prescriptions.

The Project

Inverloch Transport, a local community transport organisation got regular requests from its members to pick up prescriptions.

Therefore they applied to the HWF and were awarded £2,800 to set up Prescriptions for the People, a service that picks up prescriptions for people who are unable to do so themselves.

The Beneficiaries

During the project period the service was used by 27 of Inverloch Transport's elderly members, which equates to a fifth (20.8%) of their membership.

Some used the service weekly, others fortnightly or monthly, and a few used it only once or twice, when they were temporarily housebound through illness.

Health and Wellbeing

The Prescriptions for the People project had a number of clear health and wellbeing outcomes for its members:

- **Improved health:** people with a prescription have a medical condition that requires medication. Not being able to get that medication will keep them unwell or even worsen their condition.
- **Reduced mental health and wellbeing:** not been able to collect your prescription can cause a lot of stress.
- **Independence older people:** the prescription delivery service allows older people to stay in their own home longer

Impact on the Organisation

Inverloch Transport started the service because there was a growing demand for it among its members. Without the HWF grant Inverloch Transport would not have been able to establish and test the service.

Now that the pilot was successful, the service is integrated in Inverloch Transport's standard services.

Inverloch Transport's membership is growing steadily. Although not directly quantifiable and attributable to the Prescription for the People service, the ability to provide a prescription delivery

service for medication has no doubt contributed to this growth

The successful piloting of a new, innovative service has given Inverloch Transport the confidence that they are able to expand their services and shown that it is able to develop and deliver new services to potential funders.

Since then the organisation has been awarded a substantial grant from the BIG Lottery Fund and successfully piloting and introducing a new service has helped to install confidence in the BIG Lottery that Inverloch Transport had the capacity to deliver on its planned activity.

New Partnerships

The Prescription for the People service has strengthened the relationships with the Council's Social Work department and the health services, who both refer clients who need the prescription delivery service, to Inverloch Transport.

Sustainability

Once the service had been established and the need evidenced, Inverloch Transport integrated the prescription delivery service in its core services.

Most of the prescriptions are picked up and delivered as part of the normal community transport services, when drivers pass medical facilities and the member's home.

When pick-up and delivery cannot be integrated in other routes, a small fee is charged.

Helensburgh & Lomond Carers - Carers Chorus

The Issue

In general it is very difficult for carers to get respite from their caring responsibilities. Therefore they do not have a lot of opportunities to socialise with others.

Also, in modern society the older and younger generations do not mix naturally, which is even more prominent with carers.

The Project

Helensburgh and Lomond Carers established Carers Chorus, a choir that brings together and provides respite to young carers and elderly carers.

The Choir practices under the guidance of a professional singing company, the Singer Station, and performed a Christmas show for more than 200 people in the Denny Civic Theatre.

Through its core services, Helensburgh and Lomond Carers provided transport and respite care for the rehearsal sessions and the performance.

The Beneficiaries

A total of 22 carers, 5 adults and 17 young people, participated in Carers Chorus, 15 of which took part in the performance (2 adults and 13 young people).

The family of the young carers frequently have feelings of guilt because their child cannot go out and

socialise with their peers because off their caring responsibilities.

Health and Wellbeing

The Carers Chorus had a number of impacts on the health and wellbeing of the participating carers, including:

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- **Reduced isolation:** being part of carers Chorus helped carers to break the cycle of isolation many carers experience. Three young carers became best friends through the Choir.
-
- **Age appropriate activities:** by attending the Choir rehearsals and performance, the young carers were provided a rare opportunity to interact with their peers outside school.
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- **Increased confidence and self-esteem:** learning new skills and performing for a large audience had a positive effect on the carers.
-
- **Increased intergenerational understanding:** by working intensively together young carers and elderly carers got to know each other which created greater mutual understanding
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The project also affected the family of the carers:

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- **Reduced guilt:** the people cared for could reduce the guilt they are feeling towards their carers,

in particular in the case of young carers (some as young as 10 years old), by giving them the opportunity to enjoy themselves.

Impact on the Organisation

It is important for Helensburgh and Lomond Carers to continuously develop new activities and services. The HWF grant allowed them to do so.

The publicity coming from Carers Chorus and in particular the main performance for the general public has generated new interest in the organisation and its services and activities and has led to new referrals.

Based on the success of Carers Chorus Helensburgh and Lomond Carers have developed a new similar project: a fire safety project for young carers, in co-operation with Fire Scotland.

New Partnerships

Helensburgh and Lomond Carers now have a relationship with the Singer Station, who now provide their services free of charge occasionally.

Sustainability

The HWF grant has delivered additional value to Helensburgh and Lomond Carers core services (respite for carers).

Bute Advice Centre - Assisting People in Need

The Issue

It is often very difficult for those without specific financial knowledge to be wholly self-reliant regarding their financial situation and many need assistance in this area.

This is particularly true for vulnerable individuals; those with learning disabilities, mental health challenges, substance and addiction issues or poorer pensioners.

The Project

Based in Rothesay on the Isle of Bute, the Bute Advice Centre offers generalist and specialist independent advice and information on a wide range of topics, including: financial advice, welfare and benefit maximisation, consumer rights, housing problems, including homelessness, tenancy and landlord issues, and rent issues.

The Bute Advice Centre has been operating for thirty years and is uniquely placed to react to local issues.

The Advice and Assistance Project educate and assist customers so that they become able to manage their financial relationships and budgets as well as their mental and emotional wellbeing.

The Beneficiaries

It is estimated that the project has collectively helped approximately 400 customers, a huge proportion (80%) of whom are vulnerable; have learning

difficulties, substance/addiction issues, or mental health difficulties.

Health and Wellbeing

The financial knowledge and skills level of most of their customers is very poor and this ultimately results in financial **stress** and a lack of confidence.

Where realistic, the Advice and Assistance Project promotes self-efficacy and many customers receive the skills to develop and learn to look after their own finances as well as other issues. Due to their personal situation, some customers will never be wholly self-sufficient and will always need additional support but many can learn and become educated and financially self-reliant.

Since the project began, customers have reported: increased confidence; reduced stress, reduced anxiety, the ability to stand on their own two feet, self-sufficiency, and improved general mental health. Also, many poorer pensioners are assisted to understand the processes around disability benefits among others. As such, there has been a dramatic turn-around for many.

Impact on the Organisation

The Bute Advice Centre reports a higher footfall since the grant from the HWF. The organisation use the other services they offer (such as the Foodbank) to promote the Advice and Assistance Project.

It was reported that receiving the HWF grant vindicates the work that they engage in.

New Partnerships

Having to report back to the Network and attending Network meetings has been hugely beneficial to the Bute Advice Centre.

It has led to informative peer group discussion, referrals from partners and the development of close relationships with three other funded projects.

Networking at the meetings was said to be one of the most important reasons for attending since it allows the exploration of potential collaborations. Attendance at the Health and Wellbeing

Network Meetings was always prioritised because of the opportunity to network and learn about other organisations and projects.

Sustainability

The HWF grant has helped the sustainability of The Bute Advice Centre.

It also allowed them to continue collecting customer data to track improvements and good working practices.

The HWF grant also allowed them to look for match funding from elsewhere which had an impact on the overall sustainability of the organisation.

Islay Link Club – Peer Support Group

The Issue

For those Islay residents experiencing mental health difficulties, there is a gap in provision.

Living in a small community can amplify and intensify the stigma attached to mental health issues and before the Link Club, there was no other service that catered for this group outwith a clinical setting.

Based on clinical mental health referrals on Islay (97), there is clearly a need for the Peer Support group.

The Project

Islay Link Club is a social activities club based in The Columba Centre on Islay, part of the Gaelic College.

The inclusive Peer Support group attempts to lessen the stigma attached to mental health difficulties and provide a safe forum for discussion as well as diversionary and socialisation activities for members. The group runs on a Monday as a drop-in service from 10am to 4pm.

The Beneficiaries

With four regulars and a few other attendees the start of the group has been slow, but it is expected the forthcoming open day will significantly boost numbers.

Health and Wellbeing

The Link Club will have a number of positive impacts on the health and wellbeing of the members, including:

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- **Improved mental health and wellbeing:** being part of the peer support group and related social activities has reduced the anxiety, stress or depression of members.
-
- **Increased social interaction/reduced isolation:** experiencing mental health issues can be a very isolating experience and attending The Link Club helps break that cycle.
-
- **Increased confidence and self-esteem:** sharing their experiences with peers and offering group social diversionary activities helps the members grow their confidence and self-esteem.
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Impact on the Organisation

The organisation has been trying to establish the peer support groups for a few years now with no success. The service only exists due to the grant from the HWF.

In addition to their voluntary three board members, they now have a co-ordinator working 12hrs a week to properly organise and push the service forward and the forthcoming open day will complement this.

New Partnerships

The Link Club has forged new partnerships with a number of local organisations, including: mental health charities; MS Argyll and Long Term Conditions; Dochas Carers Centre in Lochgilphead; and Survive and Thrive (domestic abuse). Many will be attending the open day and will potentially be involved in joined up working in the future.

Sustainability

Once the attendee numbers have increased and the need for the Peer Support Groups has been proven, The Link Club is confident to access other funds.

MAYDS - Dance Mania

The Issue

In rural areas the only available option for girls interested in dancing is usually limited to ballet, which is unattractive for many.

All other sport activities in the area are traditionally male dominated (football, rugby, shinty).

The Project

On request from some local girls, Dance Mania started dance classes for girls in modern dance styles, such as hip hop and street dance three times a week.

Dance Mania has shown off their progress in public displays and performances and went on a trip to see Street Dance group Diversity.

The Beneficiaries

The classes were attended by 30 young people (9-16 years old), mainly girls, with a core of 18 young people regularly attending.

Four of the young people were trained up as dance leaders through Youth Scotland.

Health and Wellbeing

Dance Mania had a number of health impact on the participating girls, including:

-
- **Increased fitness:** by taking part in dance practices three times a

week the girls increased their fitness.

-
- **More activities for young people:** Dance Mania gave girls the opportunity to take part in a regular activity.

 - **Increased social interaction:** Dance Mania allowed girls to meet their peers.

 - **Increased confidence and self-esteem:** performing in public increased the confidence of the girls. Also being trained up as dance leaders gave a huge boost to the confidence of the four leaders.
-

Impact on the Organisation

The HWF funded the pilot-phase and allowed the group to test their ideas. After the initial pilot, Dance Mania is now established as a regular group. The group is still growing in membership.

New Partnerships

Through the HWF and the Health and Wellbeing Network meeting Dance Mania has come into contact with many other local organisations.

Sustainability

The participants pay a small fee for the classes. The group is growing and new faces means that they can keep the costs down which will help sustainability. Now that the need for the service is established, the group has been able to access to other funding.

Kintyre Youth Café – Kintyre Late Night Football

The Issue

There is very little for young people in Campbeltown to do on Friday nights. Therefore young people are hanging around the streets, drinking and getting involved in anti-social behaviour.

The Project

The Kintyre Youth Cafe is a group run by young people for young people and the wider community.

To create diversionary activities for young people who might potentially be engaging in risky behaviours on Friday nights Kintyre Youth café ran 20 football sessions from 7-10pm.

After the football sessions the young people relax in the café.

The local football association agreed to provide qualified coaches and the local police are involved as referees.

The Beneficiaries

The football sessions are attended by an average of 40 young people each week, 4 police officers and 6 local FA representatives.

Health and Wellbeing

The Late Night Football achieves a range of health benefits, including:

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- **Increased fitness:** playing regular football increases the

fitness of the young people. It also stimulates the young people to play more football on other days.

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- **Healthy Weight:** being physically more active had a positive effect on their weight.

 - **Increased confidence and self-esteem:** playing games and working together as a team increased their confidence and self-esteem.

 - **Reduced substance use:** when playing football and going back to the cafe afterwards young people were not drinking. After the game they were too tired and went home. The football also had a positive effect on their general alcohol intake.

 - **Positive relations with the Police:** playing regularly with members of the Police force broke down barriers and established positive relationships.
-

Impact on the Organisation

Without the HWF the Late Night Football would not have happened and young people would still be more involved in harmful activities.

Due to the football project some of the parents come to the café and get involved.

New Partnerships

Through the project closer links have been formed with the local FA and the local Police.

Through the Local Health and Wellbeing Network the Kintyre Youth Café keeps up to date with what other local activity is going on in their area.

Sustainability

Now that the need and benefits for the project have been established, the Kintyre Youth Café is confident that they can access other funds to continue.

7. Conclusions

This Section draws conclusions from the research and makes recommendations for the improvement of the HWF in the future.

The HWF distributed £163k over 148 projects in Argyll and Bute over the period 2012/13 and 2013/14, with an average grant of just over £1,100.

The grants are spread around the seven Health and Wellbeing Network areas, according to a formula based on the NRAC resource allocation.

Impact on Communities

Despite the relatively small amounts of grant funding, the HWF has had a significant impact on local communities.

The Fund has delivered across the eight Strategic Priorities of the Joint Health Improvement Plan.

Although at first instance the focus seems to be on Health Inequalities, Mental Health, Healthy Weight and Early Years, this is not necessarily the case. Projects are qualified under more than one priority (up to 7 priorities for one single project), and it is impossible to determine the relative weight of the priorities.

The Fund has achieved a great number of outcomes for local communities. In total we identified 33 different outcomes, of which the most common are:

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- Increased fitness
 - Increased social interaction/less isolation
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- More activities for elderly people
 - More activities for young people
 - More activities for community members
 - More arts, music and cultural activities
 - Improved access health services
 - Reduced anxiety/stress or depression
 - Increased skills
 - More volunteering opportunities
-

Impact on Organisations

The HWF has reached a mixture of organisations, including grassroots voluntary organisations. The survey reveals that 40% of funded organisations are voluntary groups that do not employ staff. We believe that the more developed organisations with professional staff may be overrepresented in this survey.

The HWF also has had a significant impact on the funded organisations. All projects achieved what they set out to do; two-thirds even exceeded their objectives.

The Fund had a positive effect on the sustainability of the groups. It increased the capacity of groups to deliver services and activities in the future; improved their reputation;

allowed them to recruit and develop volunteers; provided facilities and equipment needed to establish services and activities; and opened up access to additional grant funding.

Perceptions of the HWF

The HWF was very well received by the funded projects and the other members of the Health and Wellbeing Networks alike.

The various aspects of the fund and the application process were rated 6.6-8.8 on a scale of 1 to 10, with an average rating of 8.

The HWF plays a pivotal role in addressing health inequalities, access to local services and reducing rural isolation.

The HWF is seen to deliver essential resources for grassroots organisations, for many of whom it is the only realistic source of funding.

The public meetings to decide grant allocations add value to the Fund.

The role of the Network Co-ordinators has been valuable and well appreciated.

The HWF helps building the capacity of the local voluntary sector.

The Fund is pivotal to the success of the Local Health and Wellbeing Networks. Without the fund the meetings are less attractive to local people.

"My whole experience with funding from the H&WB network has been absolutely positive."

Research Questions

1. Assess whether the fund has achieved its intended outcomes.

The HWF has fully achieved its initial objectives of supporting preventative health activities and addressing health inequalities

2. Evidence the wider impact of the Fund on the communities in Argyll and Bute.

There is ample evidence that the relatively small HWF has had a significant impact on local communities.

3. Explore the contribution of the Fund to the longer-term sustainability of the funded projects.

The HWF has had a positive impact on the sustainability of the funded projects.

4. Prove the value for money of the Fund

It is clear from the research that the HWF is providing excellent value for money.

"Great stuff, keep up the good work!"

Recommendations

For the future development of the HWF we would make the following recommendations:

1. Improve the publicity of the Fund. It is recommended to set aside a budget to advertise the Fund widely in local media and not rely on word-of-mouth and on-line media only.

2. Continue the existing application and allocation process, including the funding decisions in public meetings.
3. The current grant amount of maximum £3,000 is right. Increasing this will only increase competition to grassroots groups from more established third sector and public sector organisations, who have other funding routes available.
4. The HWF grants are relatively small (maximum £3,000, average £1,105). All HWF grants go to local grassroots organisations that are often well known by the Network Co-ordinators for very specific activities. The Network Co-ordinators are involved with the groups throughout the HWF funded activities and naturally keep a finger at the pulse and intervene when things go wrong. There is very limited opportunity or incentive for groups to mismanage funds as grant recipients are accountable to their local network

We therefore recommend changing the monitoring procedure in order to cut down on administration time:
 - a) Limit monitoring and end-of-grant reporting to financial accountancy (evidence that the money spend on what it was provide for).
 - b) Cease the routine End-of-grant Case Study requirement for all recipients. Only a quarter of the projects completed the case studies and the content and quality varies.
- c) Network co-ordinators should take on more of a role for showcasing the impact of their fund locally in conjunction with their recipients.
- d) Evaluate the impact of the Fund by an annual on-line survey for which the survey administered for this evaluation could be used as a template.
- e) Review the investment of co-ordinator time in the application process; for example, investigate the possibility of previous fund recipients taking on a mentoring role for new applicants to free up the co-ordinators time.
5. In order to better assess the health impact of the Fund, it would be advisable to ask applicants to select 1 Strategic Priority as their main objective, but allow them to also choose a limited number of other Strategic Priorities.
6. The HWF is contributing to the community planning aims and objectives as stated in the Argyll and Bute Community Plan and Single Outcome Agreement 2013-23. It would make sense to work closely together with other Community Planning partners and, where possible, pool resources. We therefore recommend to start discussions with Argyll and Bute Council and other Community Planning partners to with a view to seek a contribution to the HWF or join up funds (e.g. Third Sector Grants).

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