

Building Healthier & Happier Communities

**Outcomes evaluation report on the
East Dunbartonshire pathfinder**

October 2015

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Executive summary

The purpose

Building Healthier and Happier Communities (BHHC) aims to evidence the proposition that a strategic investment in the capacity of the third sector can manage demand for statutory services arising and improve the quality of life for people in their own communities. BHHC is a national programme, delivered locally.

The pathfinder (pilot) for the national programme took place in East Dunbartonshire between October 2013 and March 2015, seeking to understand how a change in community capacity can enable prevention at a locality and primary care level.

The learning and experience of our pathfinder work in East Dunbartonshire is documented in a suite of reports focused on outcomes, process and a Social Return on Investment analysis. All of these present compelling evidence to demonstrate that this objective has been achieved, and will support future development of the programme.

Outcomes for East Dunbartonshire

Engaging with over a hundred organisations, BHHC has increased capacity within the third sector and communities to enable:

- greater awareness and understanding of the third sector's potential roles in service provision
- greater ability to communicate and evidence the impact of third sector activity on community health and wellbeing
- improved knowledge of funding opportunities and how to access them
- greater connectivity to form new partnerships, identify new opportunities, work more collaboratively and enjoy a better shared understanding of how to meet local aspirations and needs in relation to health and social care.



The BHHC approach has helped to improve understanding of how strong partnerships between integration authorities and the third sector can facilitate community-led approaches to addressing local health and social care priorities. It will ensure that organisations make greater use of existing assets, are more attuned to the interests of communities and can align their activity with local and national policy priorities.

The partnership

BHHC was delivered in a partnership between East Dunbartonshire Voluntary Action, East Dunbartonshire Community Health Partnership, East Dunbartonshire Council and the Scottish Council for Voluntary Organisations.

A partnership approach was essential to the success of the programme and all partners contributed to the outcomes that were achieved. Everyone involved recognised that for change to happen, there had to be a catalyst and the national strategic perspective of SCVO provided an impetus which enabled local partners to build on their achievements to date and begin to realise some of their wider ambitions.

The programme to build capacity

A general programme of capacity building support enabled third sector organisations in East Dunbartonshire to contribute more to health and social care. The programme was open to individuals and organisations across all sectors and communities with an interest in building healthier and happier communities.

In addition, nine projects received direct investment from BHHC. The impact created by this funding brought people together to share experiences, built confidence, empowered people to advocate on their own behalf, improved physical fitness, provided community based support and reduced social isolation. All of which help people to remain healthier and happier for longer.



The following benefits were felt by public sector partners and by local and national third sector umbrella bodies:

- Statutory bodies, East Dunbartonshire Community Health Partnership and East Dunbartonshire Council, reported a greater understanding and acceptance of the third sector's current and potential contribution to health and social care interventions.
- Third sector intermediary organisations – East Dunbartonshire Voluntary Action and SCVO – reported on the synergy achieved by harnessing local and national resources for community benefit.

Leaving a legacy

The process of jointly exploring how to work together for maximum impact has been developed through BHHC and measures are in place to ensure outcomes can be achieved and sustained on a medium and longer term basis. The Building Healthier and Happier Communities pathfinder in East Dunbartonshire has:



“...built a movement of people from all sectors who are committed to working together to develop health and happiness in a different way.”

The learning from the BHHC approach in East Dunbartonshire provides a timely offer to integration authorities as they consider how community-based approaches and the third sector offer can support the delivery of the nine national health and wellbeing outcomes.



Building Healthier & Happier Communities

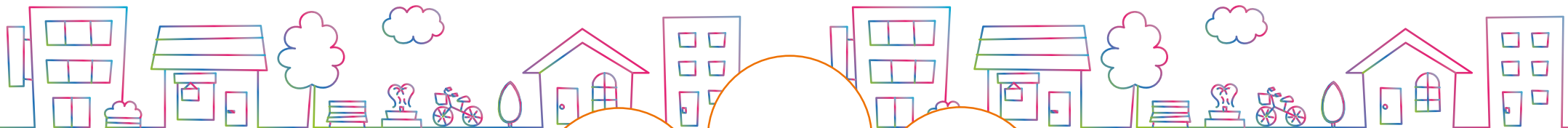
a snapshot

102 Number of organisations we have connected with

8 Number of communities we have engaged with

9 Number of funded projects

4 The principles we promote



This is what we aim for...

Our people and communities enjoy increased physical and mental wellbeing and health inequalities are reduced

Projects we are funding...

Aftercare through Arts and Technology / Carers' Wellbeing Reviews / East Dunbartonshire Asset Map Launch / East Dunbartonshire Green Gym / Hear to Help / Partner-ED / Rosebank Allotments Service / Twechar Meal Delivery Service / Youths on Bikes Scheme



Our principles...

Connecting Communities

Collaborating across sectors

Building social capital

Enabling prevention

PART 1

Setting the context

Our aim

Building Healthier and Happier Communities (BHHC) aims to evidence the proposition that a strategic investment in the capacity of the third sector can manage demand for statutory services arising and improve the quality of life for people in their own communities. BHHC is a national programme, delivered locally.

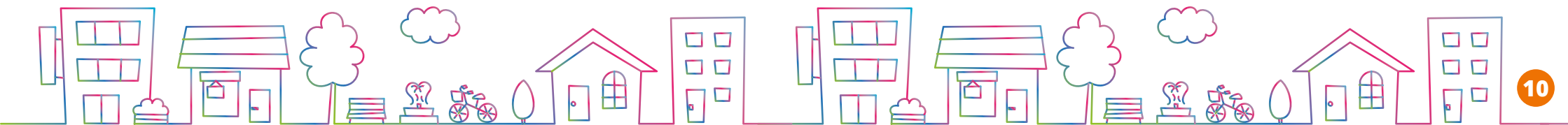
Set in the context of health and social care integration, the programme seeks to enable people, with the support of the third sector, to do more to look after their own health and happiness, as well as that of the people and communities they care about.

The pathfinder (pilot) for the national programme took place in East Dunbartonshire between October 2013 and March 2015, seeking to understand how a change in community capacity can enable prevention at a locality and primary care level.

Funding and support

The Scottish Government committed £510,000 to the programme over two financial years – 2013/14 and 2014/15. £410,000 of this funding was committed in 2014-15, when most of the pathfinder delivery took place.

At the same time as it invested in the Building Healthier and Happier Communities programme, the Scottish Government supported the ALLIANCE to create a Health and



HOW CAN WE IMPROVE

This central collage features a large pink question mark in the center, surrounded by various photos of participants and logos for organizations like Ceartas Advocacy, SCVO, and Tvechar. Hand-drawn notes in speech bubbles and on cards include phrases such as 'BRINGING PEOPLE TOGETHER TO SHARE + LEARN', 'Let's All Move ON TOGETHER', and 'HEALTHY + HAPPY'. A central graphic reads 'Building Healthier & Happier Communities'.

STORYBOARD OF PROJECT

CAPTURE THE PROCESS



Social Care Academy. Given the relevance of both initiatives to health and social care integration, there was an expectation that the ALLIANCE and SCVO should work closely and collaboratively.

The programme delivery is formally governed by a partnership via the Third Sector Health and Social Care Advisory Group. These partners¹ were involved in the proposal and continue to provide guidance and support to the development of the BHC programme.

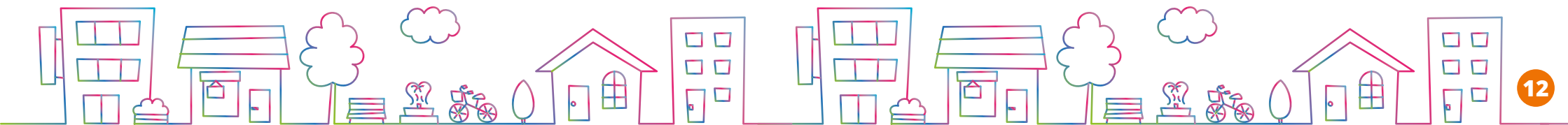
Our approach

By shifting resources to build third sector organisations' capacity, extend their reach and improve their connections – enabling community-led interventions which are downstream and preventative – the BHC approach helps to ensure that more people get the help and support they need without having to visit their GP or other health and social care services.

In addition to growing third sector and community capacity, the BHC approach engages statutory partners, improving their understanding of the third sector and the ways in which it equips people to do more for themselves and each other, and builds personal and community resilience.

Charities, community groups, social enterprises and voluntary organisations of all shapes and sizes make significant impacts in areas like early intervention, prevention and care and support for people with complex and multiple conditions - and with the right conditions and appropriate support, they can make an even greater contribution.

1. The ALLIANCE, Carers Scotland, Coalition of Care and Support Providers in Scotland (CCPS), Community Health Exchange (CHEX), Evaluation Support Scotland, Inclusion Scotland, SCVO, Scottish Federation of Housing Associations, SENScot, Voluntary Health Scotland, as well as the Joint Improvement Team (JIT) and the Scottish Government.



A pathfinder in East Dunbartonshire

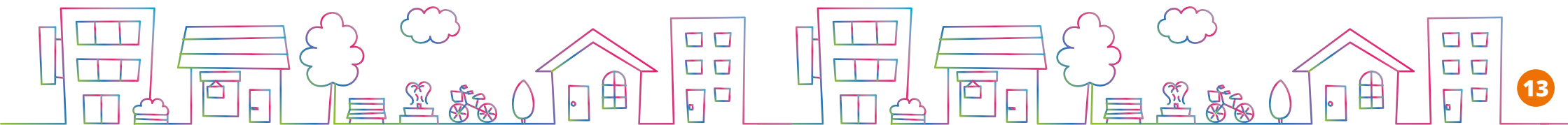
The role of East Dunbartonshire Voluntary Action (EDVA) – the local Third Sector Interface (TSI) – as our key partner was integral to the BHHC programme. EDVA’s vision seeks high levels of volunteering and public confidence in the third sector and social economy across East Dunbartonshire. Their mission is to provide strategic direction to third sector activity and community engagement in East Dunbartonshire, in line with Scottish Government and local Single Outcome Agreement (SOA) requirements.

The programme’s proposition was located in the context of an increasing role for the third sector as part of the change agenda around the integration of health and social care. The programme commenced as a pathfinder (pilot) in East Dunbartonshire and the learning on behalf of the partnership has been documented in a suite of reports focused on outcomes, process and social return on investment.

The rationale for choice of location, a chronology of the activities undertaken and a detailed account of the process followed can be found in a related, separate report.

This evaluation report demonstrates the difference that the Building Healthier, Happier Communities approach made within the context of health and social care integration. The approach has been developed for general application. While it was deployed in a certain way in East Dunbartonshire, it is sufficiently flexible to meet particular local needs and priorities in other areas.

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The magic ingredients

-  **Identifying and engaging with key partners**
-  **Developing a mutual understanding and agreeing a co-production approach**
-  **Mapping local assets and engaging with the wider third sector**
-  **Enabling the shared identification of barriers and agreeing approaches to overcome them**
-  **Providing opportunities for cross-sector learning by providing networking and information exchange events**
-  **Building the capacity of the third sector through workshops and tailored support**
-  **Developing structures and processes that will help to embed, maintain and develop the changes delivered**

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While BHC is a national programme, the priorities it meets are the ones which matter to local communities and partners. Developing relationships which are confident, reciprocal, trusting and understanding requires a significant investment of time. As the programme is adopted in other areas, the need for this investment must be recognised. The effectiveness of the programme and its legacy are founded on caring, collaborative and considerate relationships:



“There is a need to meet people and to spend time talking to them. This process is an essential part of the programme and forms the building blocks on which it is based. This can be quite challenging for others to understand but this initial investment, although time consuming, is critical.”

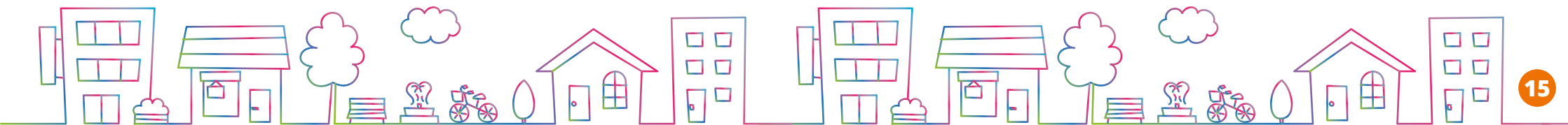
Claire Tester

Strategic Lead for Third Sector for Health & Wellbeing (Planning and Quality Division: Healthcare Quality and Strategy Directorate, Health and Social Care Division & Third Sector Unit, Local Govt. & Communities Directorate)

What we wanted to achieve

The purpose of the BHC pathfinder was to improve understanding of how changes in community capacity can enable prevention at locality and primary care level. This was to be achieved by:

- Developing the BHC approach on a locality basis
- Creating a logic model which can evaluate our process and outcomes
- Engaging with partners and communities to address local need
- Making connections between existing organisations working in the area
- Making connections/brokering joint projects between community-based organisations and national organisations, leading to increasing quality and scale of activity



- Adding scale and volume and reach to existing activities
- Replicating activities that have proven successful in other areas (ensuring they are anchored locally)
- Ongoing evaluation and reporting
- Ensuring partnership-based governance via a Local Reference Group and the Third Sector Health and Social Care Advisory Group which also provides governance for the ALLIANCE's Enhancing the Role of the Third Sector Programme.

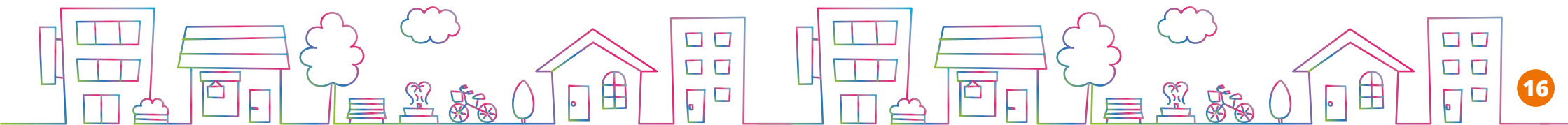
Building on the commitments to our funder, SCVO worked with East Dunbartonshire partners, Evaluation Support Scotland, Glasgow Caledonian University, IRISS and the Third Sector Health and Social Care Advisory Group to develop a logic model which illustrated the causal connections between the programme's purpose, inputs and outputs, and the short, medium and long-term outcomes. Another logic model was used for project planning and evaluation. These are attached as [Appendices 2 and 3](#).



“What lies ahead for health systems to navigate the rapids of system pressures and seemingly incessant demand is not so much a financial but a cultural challenge. It is time to draw on the deep well of human creativity and resourcefulness to find new ways of responding to illness and suffering. We don't have an evidence-base for this because we have not been asked to do this before in a modern context, but we can learn our way into a new system of health and care based on our common humanity, acknowledgment of our limitations and our possibilities.”

Dr Margaret Hannah

author of Humanising Healthcare, February 2015



Policy context

Christie Commission on the Future Delivery of Public Services

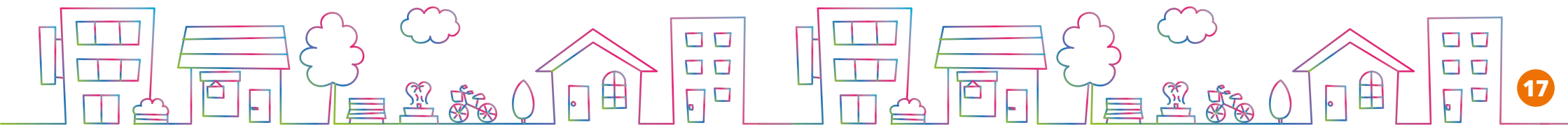
From the outset, the BHC programme has been guided by the Christie Commission's priorities and developed and delivered in a way which:

- Recognises that effective interventions must be designed with and for people and communities – not delivered 'top down' for administrative convenience (co-production)
- Making the most of what we have by utilising all available resources from the public, private and third sectors, individuals, groups and communities (collaboration)
- Working closely with individuals, communities and organisations to understand their needs, maximise talents and resources, support self-reliance, and build resilience (assets-based approaches)
- Prioritising preventative measures to reduce demand and lessen inequalities (prevention, tackling health inequalities)



“What distinguishes these approaches is that they are grounded in people’s lives, and the lives of communities (of place and of interest). Typically, people, communities and services work together to decide priorities and how to achieve their delivery while the focus is on fitting services to people, not people to services. They also maximise all the resources and assets available, and the process itself build the capacity of all those involved.”

Christie Commission on the Future Delivery of Public Services (2011)



20:20 Vision

While the wider context of public service reform underpins the BHHC approach, SCVO took particular note of the Scottish Government's "20:20 Vision", where by 2020 "everyone is able to live longer healthier lives at home, or in a homely setting" and we have an integrated health and social care system which focuses on "prevention, anticipation and supported self-management".



The Route Map "supports our commitment to shift the balance of power to, and builds up and on the assets of, individuals and communities through a focus on achieving social change (more people able to care, volunteer, etc.), support for the self-management of long-term conditions and personal action (drinking, exercise, diet and engagement) through working in partnership in Community Planning Partnerships (CPPs) and the new Integrated Health and Social Care Partnerships."

A Route Map to the 2020 Vision for Health and Social Care

Health and wellbeing outcomes

In the current context of health and social care integration, the BHHC approach has been driven by the most significant outcome of the nine Health and Wellbeing Outcomes:



"People are able to look after and improve their own health and wellbeing and live in good health for longer"

National health and wellbeing outcomes (Scottish Government, 2014)

In addition to Outcome 1, the BHHC approach supports Outcome 5 – "Health and social care services contribute to reducing health inequalities" – although there are caveats about the extent to which our and other related work can negate, rather than prevent or mitigate, the fundamental causes of health inequalities.

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Understanding East Dunbartonshire

East Dunbartonshire has a population of 105,026 (2011 census), of which 82.1% are over 16 years old. Compared to the rest of Scotland, the area has a higher than average proportion of older people. The most recent projections tell us that the number of younger people will decline while the number of people aged 65 or more will rise. Between 2015 and 2018, East Dunbartonshire's population is expected to decrease by 0.5%, while the group of people aged 85 or more will increase by 17.8%. Between 2012 and 2037, the number of people aged 85+ years is expected to rise from 2,513 to 7,574.

People living in East Dunbartonshire are relatively healthy and can expect to live longer and healthier lives compared to other communities in Scotland. However the inequality gap between people who enjoy good health and those who do not can be significant.

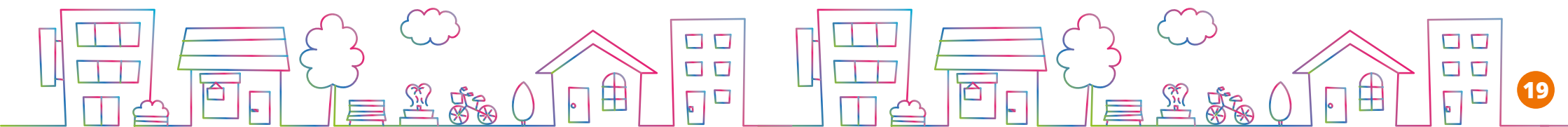
An estimated 40% of people in East Dunbartonshire live with a long term condition (LTC) and the proportion of the population living with LTCs will increase. Meanwhile, 1,100 adults in East Dunbartonshire with one or more

long term conditions account for the use of over 50% of health and social care resources. As in other part of Scotland, the likelihood of developing an LTC increases with age – particularly over the age of 75 – while their onset can be 10 years earlier for people living in areas of deprivation.

While the population of East Dunbartonshire lives longer, increasing age has an impact on the demand for health and social care provision, including:

- the management of complex and multiple long-term conditions, including mental health
- a higher number of injuries resulting from trips and falls
- the treatment of age-related diseases
- the provision of aids and adaptations
- the provision of care in the home

Meanwhile, isolation and loneliness have a negative impact on health, particularly for older people.



PART 1

Planning to build health & happiness

Forging strong partnerships

The importance of quality engagement in the BHHC approach cannot be over-emphasised. To that end, SCVO engaged with its three strategic partners – East Dunbartonshire Voluntary Action (EDVA), East Dunbartonshire Community Health Partnership and East Dunbartonshire Council – from the outset of the programme to:

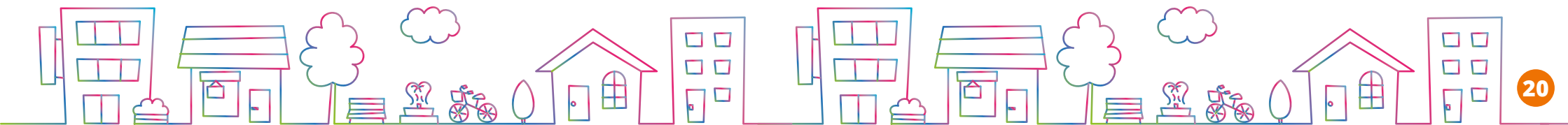
- Establish their interest in the BHHC approach
- Understand their views on the extent to which the approach could enable them to achieve outcomes which mattered to them
- Encourage their participation at operational and strategic levels
- Develop relationships which would enable change and endure
- Agree priorities for action

Local and national third sector organisations were also actively engaged in the process and EDVA helped to facilitate this. For the purpose of this evaluation report stakeholders have been divided into three groups. The groups are:

- Third sector organisations
- Public sector organisations
- Third sector intermediary organisations



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This evaluation report will detail the short term changes that were experienced by each group. It is important to stress that at this stage, given the short timescale of the programme, it is not yet possible to evidence the medium and long term changes. Some of these changes will emerge over the next few years, while others will take longer to realise.

Building on the evaluation logic model (**Appendix 3**), the pathfinder's evaluation strategy and methodology was developed to allow us to evaluate the impact of all activities throughout the programme, and ensure we could review our aim and impact. Indicators were agreed to support the outcomes, which were collected via tools including interviews, case studies, evaluation forms and surveys completed by participants.

Engaging with third sector organisations

Understanding local issues

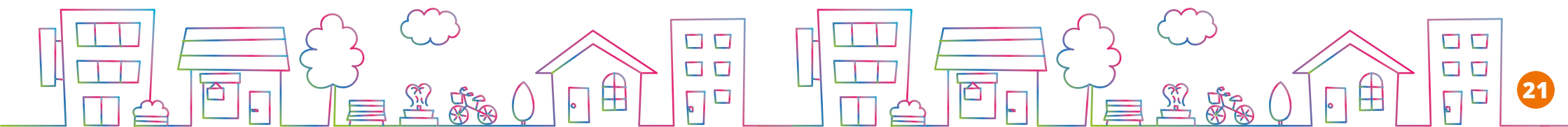
Four events were held in Auchinairn, Kirkintilloch, Milngavie and Twechar in February 2014 to introduce the programme and to get a better understanding of the range of activities undertaken by locally based third sector organisations working to improve health and happiness in East Dunbartonshire. The events also offered an opportunity to hear directly from the different sectors about perceived barriers to their ability to operate effectively and deliver the activities or services they provided.

57 individuals representing 43 organisations attended the events, which provides a reasonable degree of confidence that the views expressed were representative of the situation in East Dunbartonshire.

Baseline research

In addition to the community events, a baseline survey to measure capacity and identify areas in which support was required was carried out between March and April 2014.








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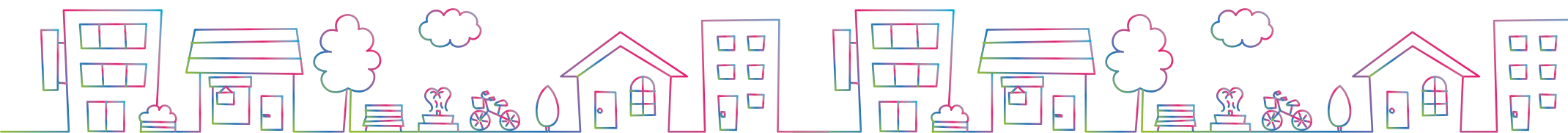


What the third sector needed locally

To enable third sector organisations in East Dunbartonshire to contribute more to health and social care it was necessary to consider – and where possible, address – the issues they identified as affecting their capacity to achieve better outcomes.

A number of issues affecting the capacity of the third sector in East Dunbartonshire were identified, including:

-  Lack of awareness of the activities and services provided by other organisations
-  Limited communication, resulting in difficulties in establishing connections with potential partner organisations
-  Different cultures and ways of operating across sectors
-  Lack of respect for and /or understanding of the third sector by the statutory sector
-  Difficulty in accessing funding and, when it was secured, meeting the required reporting requirements
-  The need to develop and strengthen key skills associated with evaluation, evidencing impact and raising funds
-  Practical issues such as access to venues, travel costs, the lack of accessible transport and integrated transport solutions



If these issues could be addressed, organisations felt their capacity would be improved and their ability to meet local needs enhanced, with the:



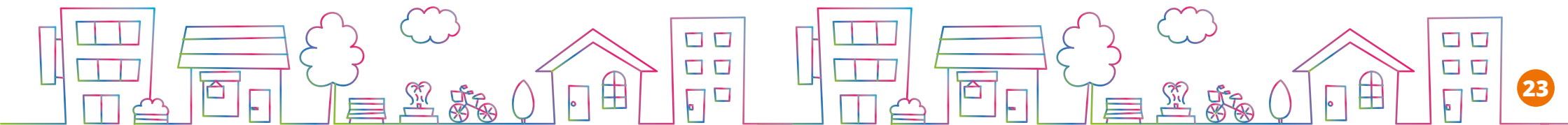
“...possibility that there may be better outcomes for clients because organisations are better supported.”

Programme participant

There is a well-established link between service delivery and capacity. Over 13 years ago an HM Treasury review identified a lack of skills and resources in the third sector as a major barrier to its ability to deliver more public services. Since that time a variety of strategies have been put in place to address this impediment, with varying degrees of success.



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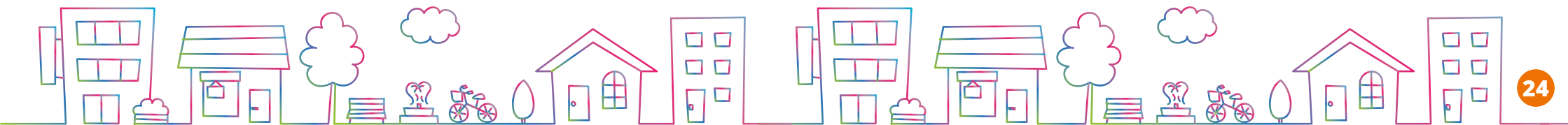
What we wanted to achieve for third sector organisations

Following discussion and dialogue the following short-term outcomes were identified for third sector organisations involved in building healthier and happier communities in East Dunbartonshire.

By taking part in the BHHC Programme third sector organisations would:

- have greater awareness and understanding of their potential roles in service provision
- be better able to communicate and evidence the impact of their activities on community well-being
- be aware of and be able to use existing community assets and to develop new partnerships
- have improved knowledge of funding opportunities and how to access them

Medium and long-term outcomes were also established but their consideration is beyond the scope of this report.



PART 3

Delivering our approach

To deliver on the short-term outcomes a series of events and workshops were held. Open to anyone in East Dunbartonshire with an interest in the health and happiness of the community, they were delivered in partnership with EDVA. Delivered area wide, the number and diversity of organisations attending was wide and a list of participants is provided in **Appendix 1**. All events allowed a good amount of time for networking and sharing information.

The programmes for the events were agreed by the Local Reference Group² to ensure that local needs and priorities were reflected. The events were promoted by EDVA at a local level and by SCVO to their members.

Support to enable better outcomes

The following events, workshops and activities formed the basis of the capacity building programme:

1. Logic modelling workshops

What we did

Logic modelling workshops were provided in partnership with Evaluation Support Scotland

2. The Local Reference Group comprised colleagues from EDVA, East Dunbartonshire Community Health Partnership, East Dunbartonshire Council and SCVO. Details of the Group's key role in the programme are included in the process evaluation report.



for organisations which wanted to develop a new, or extend an existing project, related to improving the health and happiness of their community.

Forty people representing 31 organisations attended and produced logic models which allowed them to develop and demonstrate the impact of a planned activity.

The difference it made

When we asked them the difference it made, over 80% of participants said that as a result of the workshop they would be able to improve the quality of both funding applications and project plans. The models they produced were a requisite part of the process of applying for BHHC funding. This is covered in more detail in the process report.

2. 'Health Inequalities' networking events

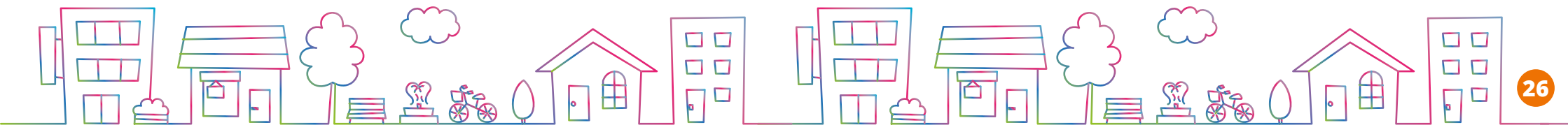
What we did

Four networking events on the theme of 'health inequalities' were held in Bearsden, Bishopbriggs, Kirkintilloch and Lennoxton. Presentations about health inequalities were delivered by Voluntary Health Scotland and SCVO along with practical examples of the contribution local organisations – including Ceartas, Community First, Older People's Access Line (OPAL) and East Dunbartonshire Cycling Co-op – were making to addressing health

These inputs were followed by group discussions about the effects of health inequalities and the impact they can have on individuals. The groups also considered actions that can be taken on an individual and collective basis to address health inequalities and the positive impact that building social capital in communities can have.

In addition, participants exchanged ideas about opportunities for co-production, as well as sharing good practice and recording impact.

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The difference it made

When we asked the participants what had changed as a result of the events:

- 83% of participants reported increased knowledge and understanding of health inequalities
- 93% of participants said that they would make changes in the way they delivered activities and services to meet the needs of their communities and address health inequalities
- 90% of participants made new connections.

3. 'Meet the Funder' events

What we did

As one of the most significant barriers identified was accessing funding, two 'Meet the Funders' events were held. The first took place in June 2014 and was organised by East Dunbartonshire Council and EDVA, with input from SCVO. Based on the demand for this event, another was held in February 2015, organised and supported by EDVA and SCVO. Events took the form of a series of presentations by both local and national funders followed by the chance to network and explore opportunities on a one-to-one basis.

At the February event, brief presentations on procurement and the impact of health and social care integration were also provided.

The difference it made

As a result of attending these events, participating organisations reported the following impacts:

- They would increase the number of funders to which they apply



- They had identified new potential partnerships
- They would consider different projects, including group transport, respite care and a sound system for older people would be considered
- Their knowledge of available funds had increased significantly

In relation to their ability to be involved in commissioning and procurement many organisations, particularly the smaller ones, reported that they did not really understand the impact it would have on their activities and how they would be involved in the process. A lack of funding is a barrier identified by many organisations, but the provision of commissioned services might be a way to address this deficit. Further dialogue is required in this area.

4. 'Partnership' networking events

What we did

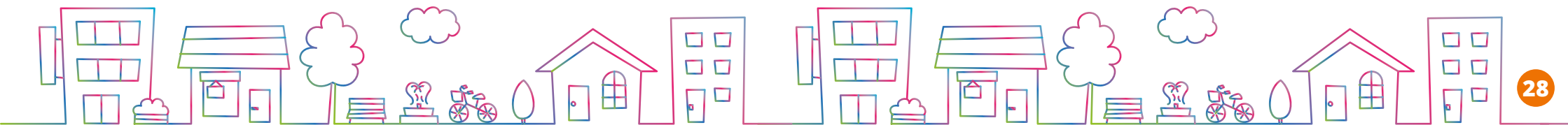
Two networking events with the theme of 'partnership' were held in October 2014. An overview of the East Dunbartonshire Health and Social Care Partnership was given by the interim Chief Officer, which informed a discussion on how it will work with community and voluntary groups. Presentations from local third sector and cross-sector partnerships were also delivered. Originally it had been planned to hold several events across all of the main communities in East Dunbartonshire but as there wasn't sufficient demand it was decided to focus effort on sessions in two areas: Bearsden and Hillhead.

The difference it made

As a result of attending these events, participating organisations said they noted the following impacts:

- They were enabled to create more partnerships, particularly with EDVA, the Third Sector Interface

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- They would benefit from improved communication between and across sectors
- Their knowledge of how to work with health partners had improved
- They had raised their awareness of new opportunities for the client group they supported
- They had a better understanding of the range of organisations and projects which existed.

Many organisations welcomed the confirmation that groups want to work jointly and start the process of developing new partnerships.

Learning point

At the end of both events, amongst many organisations, there remained a lack of understanding of their role in relation to East Dunbartonshire's Health and Social Care Partnership and of how the Partnership will operate. Whilst this may be because the Partnership itself was still at a developmental stage, it also illustrates the potential disconnect between the agendas of the statutory and third sectors and the language each uses.

5. Evaluation surgery

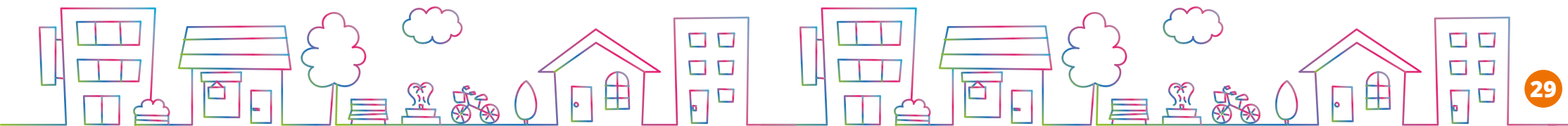
What we did

An evaluation surgery was held in EDVA's office at which local organisations could book a slot to receive evaluation advice on an individual basis tailored to meet their needs.

The difference it made

Organisations who benefitted from this support were able to identify additional outcomes and redraft existing logic models. Projects were therefore supported to better understand

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the local need they were seeking to address and put in place sustainable measures as to how they would monitor this.

Learning point

It is worth noting that one of the organisations which attended the surgery had failed to secure funding from the BHHC tailored support programme but was still sufficiently engaged to come along and access further advice and assistance.

6. Media training

What we did

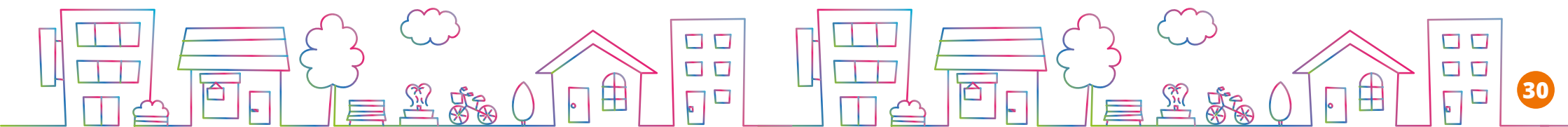
A practical interactive session on 'communicating effectively' was delivered by Media Education. The focus was on defining and delivering key messages using a range of media and developing creative ways to record the changes resulting from activities.

The difference it made

As a result of attending the events, participating organisations noted the following differences:

- They will use digital media more often
- They better understood the potential for using photos and videos in evaluation
- They will use short videos to advertise services and events and make short videos to explain more about their organisations
- They felt the session was really worthwhile and inspiring and hoped it would help them to make their project much more engaging

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After the session participating organisations reported that they were able to summarise their key message in one sentence or phrase.



“Youths on Bikes Scheme is about making young people healthier and older people happier”



“Twechar Healthy Living Centre builds confidence in people to access healthy options in their community”



“Partner ED and our six week training course @Power, @Voice, @Choice aims to give individuals the confidence to speak out and have their views heard - to feel they have something valuable to say and have the skills and confidence to say it and take part in shaping their local services”

7. Shared learning event

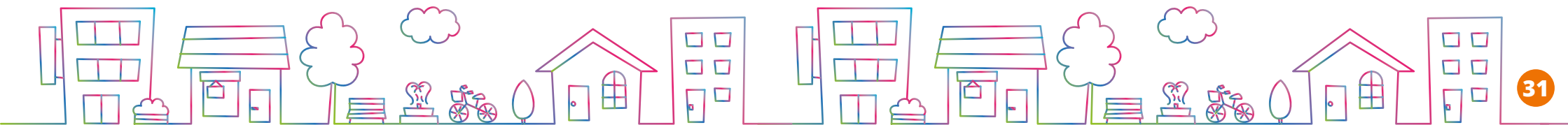
What we did

Organisations and individuals who had participated in the programme or who were considering applying the approach in their own areas were invited to attend a shared learning event in Bishopbriggs in March 2015. The event was well attended including good representation from decision makers in East Dunbartonshire. The key note presentation was delivered by Rhondda Geekie, Leader of East Dunbartonshire Council.

The difference it made

Conversations with a selection of the funded projects allowed them to showcase the difference participating in the programme had enabled them to make to the health and happiness of people living in East Dunbartonshire and of how they had contributed to managing the demand on statutory services. Table discussions took place at which participants were asked to discuss a series of questions related to their experience of the

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programme. A short question and answer session involving all the project partners also took place.

The key findings reported by participants in the event were:



“Being better able to work together has allowed improvements in service delivery to be carried out.



“The sum is more than its parts.”



“It gave us an opportunity to share ideas, which is essential.”

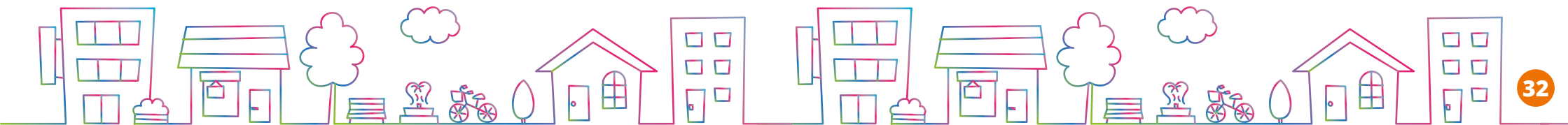


“It wasn’t just about bringing people together, but having the right people around the table.”



“The programme has greatly improved communications by using more effectively existing networks.”

“One of the biggest benefits of the programme was the improved communication that it has encouraged and enabled at a local level.”



Learning from engaging with third sector organisations

Partnership and investment are necessary but need to be sustained.

There was consensus that the approach had worked as a pathfinder but for some participants there was a degree of uncertainty about sustainability and where ongoing support would be found. Others felt that this could be addressed if there was “a recognition that everyone has to play a part.”

As part of the legacy of the project, it was felt that ways had to be identified to maintain and develop the networks which had been established. People and organisations had to be supported and allowed to come together and “keep the conversation going.”

The value of the work done by the funded projects and the difference they had made was recognised. Further funding that allowed organisations to demonstrate success and to make a difference at local level could build on the achievements to date. It was acknowledged, however, that the funding provided to supported projects to develop their ideas had:



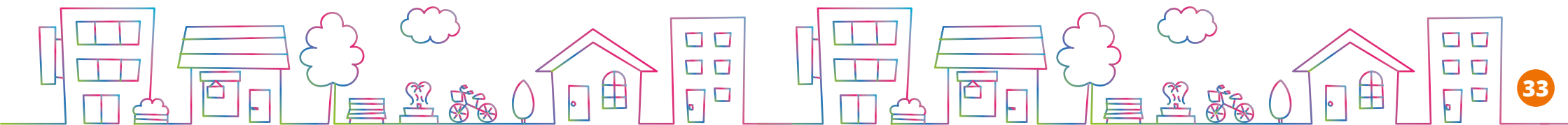
“...acted as a catalyst. The grants and money are not the core but have permitted people to find out what people want. It is that which makes the difference”

Building up skills within the area has been of benefit to all and East Dunbartonshire as a community is now better placed and more able to make use of its community assets. Organisations were better placed to “evolve, adapt and change”.

There remained some lack of understanding of what health and social care integration meant for the third sector, as well as the opportunities it offers. One participant noted:

“Health and Social care integration is a challenge but the third sector in East Dunbartonshire are now better placed to meet it”

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From the outset of the BHHC programme, it was recognised that there was a need for a legacy which endures beyond the end of the pathfinder work in East Dunbartonshire, sustains the change and build on the learning to ensure the medium and longer term outcomes are achieved.

A number of work streams are already underway to secure this legacy. They include the recruitment of a Development Officer by EDVA to work collaboratively with community groups, individuals, statutory and third sector partners to scope, develop and build capacity which sustains change and evidences their impact in relation to health and social care outcomes and building healthier and happier communities. The role and functions of this post will be informed directly by the BHHC experience, as well as the input of the nine organisations which benefitted from tailored support. Local recommendations have also been agreed to monitor progress and ensure the legacy of the programme is sustained.

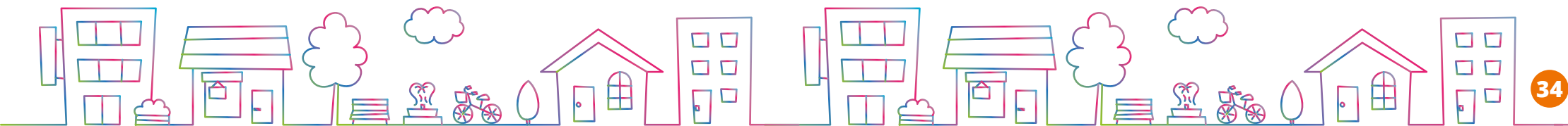
At a national level, SCVO will share the learning from East Dunbartonshire and take the BHHC approach to other parts of Scotland.

Investing in local projects to address local need

Our approach

As well as offering a series of events and activities to build the capacity and connectivity of local and national third sector organisations, the programme made financial investments in selected organisations. The investment was provided to enable the delivery of projects that would enhance community health and happiness and would allow participating organisations to evidence the impact of their activities and the contribution they made to preventing poor health and managing reliance on statutory services.

A representative cross section of projects was selected for funding, taking into account the type of activity they offered, the people who would benefit from their activity, their



geographical location and reach, and their organisational size and structure. Funding was provided for both new initiatives and developments to existing work.

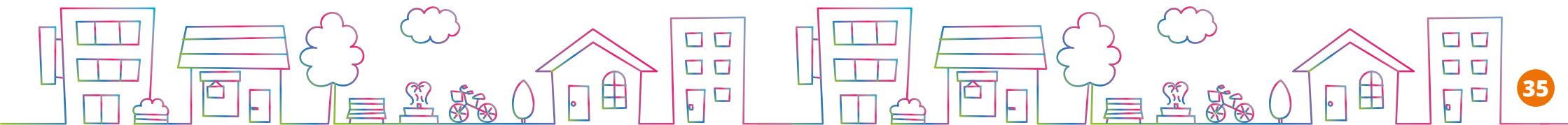
Projects which contributed to some or all of the following changes were considered to be a priority:

- Reduction in health inequalities
- Increased focus on prevention
- Increased impact on community health and well-being
- Improved engagement in collaboration and partnership working
- Wider application of an innovative approach
- Greater sustainability
- Improved value for money

Funding was awarded following a two stage process. A short initial application form was sent to groups and those that met the eligibility criteria were invited to take part in a workshop on logic modelling provided by Evaluation Support Scotland. The logic models they produced were used as the basis of the content they would provide on an outcomes focussed application form. The application forms were assessed by the Local Reference Group and funding of £101,833.99 was awarded to nine organisations.

The difference it made

While the majority of organisations found this process helpful, some indicated that it was too complicated and time intensive for the funding on offer. Those who found it of benefit



stated that it had helped them articulate more clearly the changes that their project would deliver:



“We can now articulate very clearly what we are trying to achieve in a way that gets us respect and recognition.”

Programme participant

The process was designed to help organisations to understand the contribution that their activities made to improving health and happiness at a community level:



“I’d never really thought of it like that before - we just helped people. I knew that social isolation was bad for you but not that it took years off your life. We can now say we are helping people live longer and when challenged, explain how.”

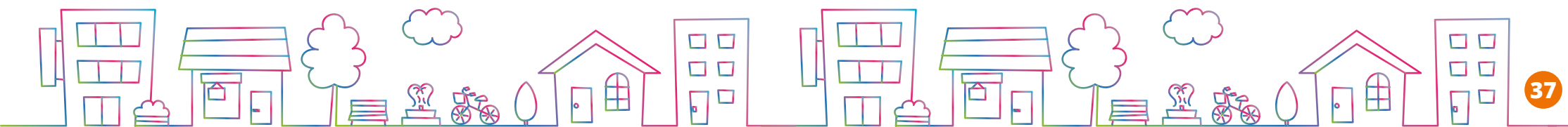
Programme participant

The funding and bespoke support provided to a selection of projects helped to illustrate how building community capacity can help to manage demand on statutory services. The following projects provide an illustration of how third sector organisations can deliver change, as well as positive returns on investment:

- **Hear to Help** reduced the need for people to travel to hospitals for basic hearing support and benefits local NHS audiology departments by allowing them to focus on fitting hearing aids, testing hearing and providing other specialist services.
- **The Carers Wellbeing Reviews** supported carers to be happier, healthier, better informed and more resilient. This will allow carers to continue providing care and support at home for longer, without the need to access residential care.



- By providing raised beds at **Rosebank Allotments**, some of the physical and social needs of people with mobility problems were addressed, enabling them to improve their health and wellbeing and live independently for longer.
- **Partner-ED** provided training and support to service users that will enable them to have more direct influence over how health and social care services are designed and delivered. This will ensure that services more closely meet user needs and achieve better outcomes.
- The **Youths on Bikes Scheme** supported intergenerational engagement by providing opportunities for social contact between older and younger people. This has reduced the social isolation and loneliness many older people were experiencing, while providing opportunities for younger people to make a difference to their community.
- The **East Dunbartonshire Asset Map** allowed people to share information and interact with one another by identifying and mapping the places that make them feel good. This will build social capital and encourage individuals to make use of local assets as an alternative to visiting their GP or other health services.
- **Aftercare through Arts and Technology** boosted the confidence and skills of people affected by life traumas and enabled them to engage once more with their communities. The confidence and peer support provided by the project has meant that individuals have reported a reduction in both the need for medication and support from health workers.
- **East Dunbartonshire Green Gym** provided an opportunity for local people to keep fit by taking part in outdoor physical activity. There is a well-documented correlation between increased physical activity and reduced risk of health conditions such as heart attack, diabetes and colon cancer.



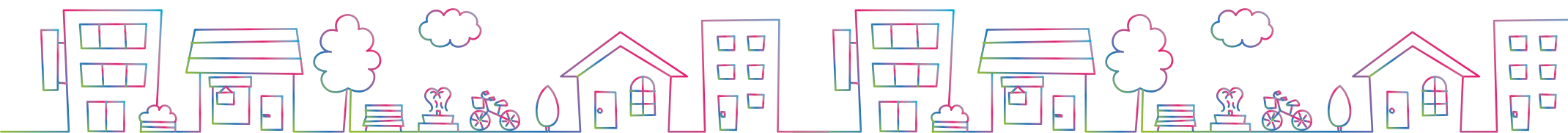
- **Twechar Meal Delivery Service** provided older and vulnerable people with a healthy meal. At the same time, it offered information and support to encourage participation in other community based activities. The mental health risks of social isolation are well documented and can lead to depression and an increased risk of dementia.
- A tenth project, the **East Dunbartonshire's Food Co-op's Hillhead Older People's Supper Club**, was also granted funding. Although this project offered a great opportunity to reduce social isolation and promote health and happiness, unfortunately it was not possible for it to proceed as planned and the organisation withdrew. Details of the circumstances and reasons for this decision, as well as the learning which emerged from the experience, are outlined later in this report and in the separate process report.

How we supported these projects

The support provided by SCVO to funded organisations was tailored to meet their specific requirements. The organisations ranged from small local groups without staff to national bodies and accordingly the support offered had to be sufficiently flexible to accommodate their circumstances.

SCVO staff met with all the projects that were selected for funding to discuss project planning and evaluation. Projects were offered support to provide a basic plan that demonstrated what activities were going to take place and when.

They were also asked to identify the people who would change as a result of their project, the changes they would experience and how these might be measured. At the end of the process each organisation had a project plan and an evaluation framework which could be adapted and used for other activities.



In the course of these discussions, it became apparent that the level of support required varied considerably. National organisations often needed minimal assistance, whereas for smaller groups, project planning and evaluation were less familiar activities. This position was often reversed when it came to making local connections or recruiting volunteers and national organisations needed significantly more assistance than their local counterparts. Support for these needs was provided by EDVA.

The strong relationship between EDVA and SCVO meant it was possible to work in an assets- based way where each partner could deploy their particular expertise and strengths to achieve the best outcomes and offer added value. SCVO was able to offer a national perspective and technical expertise while EDVA provided locally based engagement was able to review progress through an East Dunbartonshire lens. By offering support on a one to one basis it was possible to meet the needs of organisations and to provide them with the opportunity to develop new approaches, extend connections and develop skills which will endure beyond the life span of the programme and enhance their sustainability.

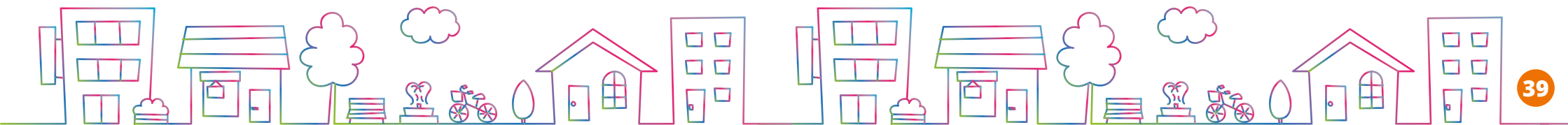
This way of working was valued by participating organisations:



“We had never worked in this area before and without the help and support we got from EDVA it would have taken much longer to get the project up and running.”



“The support from SCVO was massive. As a result of the conversations and suggestions we had we can now promote the work we do much better.



How we knew we made a difference

The outcomes which would be delivered by investing in the selected projects were identified in the logic model. A copy is included in **Appendix 2**.

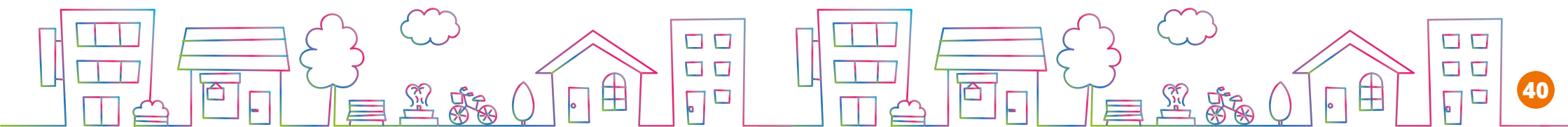
Each of the nine organisations produced a simple evaluation plan which included the following elements:

- an identification of everyone who would experience change as a result of the project (stakeholders);
- the nature of the change for each (outcomes),
- how it would be known the change had happened (indicators); and
- how this information would be collected (tools)

Organisations were encouraged to use and, if necessary, develop any existing systems of evaluation and to keep the process as simple as possible.

Although the majority of the projects were able to work to tight timescales, the evaluation is taking place when most of the projects have only been up and running for a few months. As a result, there is a limited amount of data to assess the extent to which organisations have achieved their outcomes in the short term.

Demonstrating the medium to long term benefits will require a much longer time period and additional work. In the case of some, the long term benefits may not be felt for several years.



TAILORED SUPPORT CASE STUDIES

Action on Hearing Loss - Hear to Help



The purpose of the organisation is to reach and support people with hearing loss which can damage people's lives, cost jobs and relationships, and cause isolation and depression. Small interventions, such as information and advice, peer support, technical devices and communication support can bring about radical improvements to the quality of life for affected individuals.

The project

Action on Hearing Loss extended the reach of an existing project in East Dunbartonshire, Hear to Help, which supports people to operate and look after their hearing aids, so that they are able to participate more fully in all aspects of day-to-day life. Getting used to wearing hearing aids takes time and providing support makes a huge difference. Trained volunteers carry out basic maintenance such as cleaning ear moulds or replacing tubing and batteries, to help people get the best performance from their NHS hearing aids and to hear more clearly. Volunteers also give advice on equipment that can make life easier in the workplace or at home and signpost people to other local support services such as lip-reading classes, hard of hearing groups or sensory support. The project attempted to recruit new volunteers, organising additional sessions at sheltered housing and care homes which offered help to get residents and staff supported and trained in maintaining hearing aids, as well as providing public information sessions at new geographical locations.

The difference it made

The most significant benefits that will be delivered by the project are likely to be seen in the longer term by allowing individuals to remain living independently for longer as a result of




TAILORED SUPPORT CASE STUDIES

increased understanding and support in relation to managing their condition. However, after even a few sessions individuals reported better understanding of the services on offer and of how to accommodate and manage the changes in their lives caused by hearing loss:

 **“I understand my condition a lot better and I can get help and information that I did not know about before.”**

By attending support groups and meeting others facing the same challenges people reported feeling less isolated and more confident:

 **“Somewhere else to go for help, rather than relying on the NHS.”**

Volunteers gained new skills in communication and practical maintenance of hearing aids and felt a real sense of achievement from helping others:

 **“I really enjoy seeing a smile come back onto their faces when their aids have been sorted and they can hear more clearly what is being said to them.”**

By being able to access advice and support on an individual basis at an early stage demands made on audiology services were reduced and early intervention resolved many minor issues before they became major problems:

 **“It saves them time going to hospital and the inconvenience this can cause by being able to have a service right on their doorstep.”**



TAILORED SUPPORT CASE STUDIES

Their learning



“We experienced difficulty recruiting additional volunteers despite advertising through EDVA. Limited transport links within East Dunbartonshire meant that unless volunteers had a car there was a limit to the areas they could cover and in which they were needed.”



“The project reduced the need for people to travel to hospitals for basic hearing aid support and has significantly benefitted local NHS audiology departments by enabling audiologists to focus on testing hearing, fitting hearing aids and providing a specialist service,”



“If people are able to get support and help to cope with hearing loss and to learn about what aids are available and how to use them properly then it reduces visits to the GP and audiology services. Having a trained volunteer who can spend some time cleaning someone’s hearing aid makes a real difference both to the happiness of the individual that is being helped and the confidence of the volunteer who is helping.”



TAILORED SUPPORT CASE STUDIES

Carers Link - Carers Wellbeing Reviews



Carers Link provides a range of services for people who live and care within the East Dunbartonshire area. Recognising that each carer's situation is unique, Carers Link services include the provision of information, advocacy, one-to-one support and courses and groups for carers.

The project

The Carers Wellbeing Review aims to make positive changes in carers' lives. A Wellbeing Review is a supported conversation that focuses on carer's health and wellbeing and enables the carer to identify what they feel they need to make them healthier, happier and stronger. Reviews provide a tailored and intensive approach to carers' health and wellbeing, supporting their needs to access other services or change a behavior, and set achievable individual goals. As part of the discussion, services within Carers Link and throughout East Dunbartonshire are explored and signposted. 12 weeks after the initial assessment a further review is carried out.


The difference it made

By providing care and support at home, carers significantly reduce the demands made on statutory services. To enable a carer to continue caring, it is crucial that they stay fit, healthy, strong and happy. This project demonstrated that by having the opportunity to talk to someone about their needs, a significant difference can be made to the quality of carer's lives and to their health and wellbeing. The most common challenges identified by carers who participated were a lack of physical activity and social contact. To address this,




TAILORED SUPPORT CASE STUDIES

Carers Link have been able to support individuals to take part in group activities and to signpost opportunities for physical activities such as local walking projects:

 **“Since I...talked about my health and wellbeing I have been pushing myself to leave the house regularly. This is still difficult for me but it makes me feel a lot better. I am now socializing again.”**

By being better able to manage and cope with the stresses and challenges of caring for others, carers have improved health wellbeing and are able to have improved relationships with those for whom they care:


 **“I go for walks and I try to practice mindfulness as much as I can. This gives me some ‘time out’ when I am stressed. When I come back home I have regained inner strength and patience, which I need in order to care for my wife, who has dementia.”**

Carers Link have produced new resources, set up additional referral pathways and established new partnerships. Staff have an increased sense of achievement and job satisfaction:

 **“The serviced has led to an improvement in job satisfaction because the volunteers feel they have something to offer the carers and this makes me feel that what I do is even more worthwhile.”**

Their learning

 **“The Wellbeing Review Service has allowed the team to reach more carers.”**

 **“This project has demonstrated the success of this approach and the positive outcomes it delivers. By demonstrating the success of the project we hope to secure funding for it to continue.”**



TAILORED SUPPORT CASE STUDIES



“A happier, healthier and more informed carer is confident, resilient and better able to ensure the best possible quality of care of the person they look after.”



“BHHC allowed us to put into practice an approach that we knew would have lasting benefits for carers and their families but which we couldn’t evidence – now we can.”



“We recognise the need to find ways to evaluate the changes for the person who is cared for as a result of the wellbeing reviews. This is proving challenging because of the complexity of the individual’s needs and their lack of ability to express their views.”



“The wellbeing reviews have proven to be very successful and have helped carers be more aware of the wellbeing opportunities that exist both at Carers Link, but also in the community. The Wellbeing Network continues to develop in East Dunbartonshire, which is a great legacy of the project.”



TAILORED SUPPORT CASE STUDIES

Carr Gomm - Rosebank Allotments Service



Carr Gomm is a person-centred organisation that supports people to lead their lives safely and to do the things they want to do: in day-to-day living; in planning for the future and in realising dreams. This is achieved by providing support at home and in supported services which are delivered by highly trained and committed workers.


The project

Rosebank Allotments Service, managed by Carr Gomm, aims to extend access to the health and well-being benefits of community growing to people with limited mobility by installing raised beds at their allotment site. From their base at Rosebank, Carr Gomm provide a range of activities, of which growing is one. People with mobility problems were not able to participate in community growing activities until raised beds were provided. This potentially limited an individual's choice and opportunities for social contact.

The difference it made

Individuals with physical disabilities are able to gain the health and wellbeing benefits of taking part in the physical outdoor activities involved in community growing.


 **“Being outside and sowing seeds in my bed makes me feel better. I am more relaxed and less anxious. The staff say I am smiling more.”**

 **“I like taking part because I can work with others but if I feel like it I can go off and do my bed on my own.”**



TAILORED SUPPORT CASE STUDIES


Individuals have an increased choices of activities and are able to be part of a group and not to feel excluded as a result of their disability.


 **“I’ve got a bad back so I can’t bend and take part but having the raised beds will let me go out in the sun – if we get any – with others and take part instead of watching.”**

As an organisation Carr Gomm have made new partnerships. Meeting other organisations and sharing experiences has enabled them to learn new approaches and try different ways of gaining referrals.

Their learning

 **“It was always going to be challenging building raised beds in winter but we now have everything complete ready for spring planting. A bit more time to develop the project or a different start date would have been helpful.”**

 **“The biggest benefit taking part provided was the opportunity to work with other organisations and to see how we can use a joined-up approach but each continue to deliver the things we are good at.”**

 **“People with poor mental or physical health often find that their physical activity and social engagement needs cannot be met. Community growing meets these needs and takes people’s minds away from their problems. This means they are less likely to make demands on statutory services.”**



TAILORED SUPPORT CASE STUDIES

Ceartas - Partner-ED



Ceartas provides an advocacy service for people in East Dunbartonshire, irrespective of their cultural background, gender, beliefs or sexuality. The organisation is committed to providing a service based on the principles of equality, fairness and justice and to ensure that the views and opinions of individuals are heard and respected, affecting in a positive way the lives of people using the service.

The project

Partner-ED seeks to improve services by enabling services users to have a direct influence over how they are designed and delivered. By developing the skills, knowledge and confidence of those who use local services Partner-ED aims to support and empower individuals within the local community to develop their skills and capacity to have their say, and to participate in shaping, designing and developing health and social care services.

This will be achieved by providing a six week training course aimed at building confidence and developing communication skills. An initial pilot course will be reviewed and refined in line with participant feedback and will result in the production of a training manual that will enable Ceartas to continue to deliver the course. On completion of the course participants will be invited to attend a networking event to share learning and encourage user-involvement in local service design and delivery. It is intended to create a forum for people to share their experiences and have their say.

The difference it made

The timescales of the project do not permit a complete evaluation at this point as some of the intended outcomes will not be directly measurable until after the networking event, including any opportunities for local user involvement that might follow. A mid-point evaluation has demonstrated the outcomes achieved so far and the ongoing capacity building work of



TAILORED SUPPORT CASE STUDIES

the project. By participating in the project individuals have reported increased confidence, improved communication skills and the ability to work effectively in a team.

Participants feel valued and that their opinions will be respected. They have gained additional chances for social interaction and say that they are more likely to take on new opportunities.



“It can be hard to say what you feel.”



“Sometimes when people use words I feel I am not at their level.”



“Being able to have my say makes me feel valued, respected and more confident.”

As an organisation, Ceartas has increased its profile as well as its reach and sphere of influence. In promoting the six-week course and seeking recruits, Ceartas has engaged with organisations and agencies throughout East Dunbartonshire. This will increase when the networking event is arranged.

The real benefits of the project will be delivered when service users are able to directly influence the services they use and when their views and ‘lived experiences’ are afforded the same consideration and respect as those of professionals.

Their learning



“The timescale was too short and things always take longer than anticipated.”



“The programme allowed us to talk to people we would not normally meet.”





“The funding will allow us to produce a replicable model that could be used to involve the lived experience of service users in the design and delivery of services and will seek to influence the Adult Protection and Quality Groups.”



“If people feel in control of their lives they feel healthier and happier and can find solutions to problems and not need to rely on statutory services.”

TAILORED SUPPORT

CASE STUDIES



TAILORED SUPPORT CASE STUDIES

East Dunbartonshire Food Co-op - Hillhead Older People's Supper Club



East Dunbartonshire Food Co-ops supports volunteers who run community food co-ops in their local area and who believe that fruit and veg is the "root" to a healthy mind, body and soul.

The project

Hillhead Older People's Supper Club (HOPSC) aimed to provide a healthy meal in a social setting at which health related services and community activities would be signposted. Based in Hillhead Community Centre the supper club would be planned and delivered by volunteers.

Their learning

Unfortunately, it was felt that although the project would offer a great opportunity to reduce social isolation and promote health and happiness it was not possible for it to be delivered as planned. There were various factors that contributed to this and after some deliberation and concerns being raised by all involved in supporting and delivering the project East Dunbartonshire Food Co-op very bravely decided that they could not accept the funding offered.

The organisation felt they didn't have capacity to take on a new project at the same time that the existing services provided by the Food Co-op were being reviewed. As the



TAILORED SUPPORT CASE STUDIES

organisation did not have any paid staff it was entirely dependent on support from a very small number of volunteers and it was felt that taking on a new project would over stretch resources that were already extremely limited.

Logistically there were problems in accessing the venue in the evening that took some time to resolve and access was only possible after intervention by statutory partners. This resulted in a significant delay in being able to start to plan the actual delivery of the project.

Despite having preparatory meetings and discussions there was a lack of understanding and appreciation of all the rules and regulations associated with food preparation. All involved identified from the outset that to deliver the project would require extensive support with both project planning and evaluation.

Whilst some scoping work had been undertaken of the demand for the project, a more detailed needs analysis and assessment of potential user numbers was required.



“We are committed to the project but not at this time. We were optimistic but not realistic. In the end as a group we had different priorities so didn’t take the finding, but the idea is still there and maybe we can work on it in the future.”



“We still feel the concept is good and that giving older people the chance to come for supper will offer them some company which will make them feel better. In some cases it will give their carers a break too.”



TAILORED SUPPORT CASE STUDIES

East Dunbartonshire's Cycle Co-op - Youths on Bikes Scheme



ED's Cycle Co-op is a social enterprise which aims to promote cycling to children and adults in East Dunbartonshire.

The project

The Youths on Bikes Scheme (YOBS) has linked volunteers from Bishopbriggs Academy with housebound older people living in Auchinairn. The project seeks to improve the relationships between older and younger people by providing opportunities for positive contact and in so doing reduce the social isolation and loneliness of older people. The young volunteers will use bikes to visit the older people and help them to use an iPad to access the internet. The young people will also deliver fresh produce. Bikes, iPads and SIM cards have been provided.

The difference it made

The young people took part in training arranged by the EDVA Befriending project, have gained an understanding of older people's perspectives and needs, and as a result are able to communicate with them better. Almost all of the young participants reported knowing more about the people and places in their local community and have improved understanding and awareness of different aspects of personal safety.



“Discussion in training with our Campus Cop covered personal and property



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safety, bogus workmen, safe places to leave a bike and what to do if concerned about something. Afterwards all the young people expressed in feedback that they were more aware of personal safety.”


Many of the young people participating had not cycled much in the months leading up to the project and most said it had been over two years since they last cycled. Since taking part in the project, they are fitter and healthier as a result of being more physically active and are keeping a weekly log of the number of miles they cycle. Almost all of the young participants have improved bike maintenance and cycling skills.

ED’s Cycle Co-op has seen a small increase in customers at the skate park due to the project and has used the project as the basis of a funding application to Young Start. At this stage of the evaluation process it is too early to state if the anticipated outcomes for older people and their families have been achieved.

Older people have gained new IT skills and are less isolated. They are really enjoying the company of the younger people and have been exploring using their iPads. Emails have been sent to Canada and Cornwall (among other places) and a few have tried out Skype/ Facetime. The younger people have helped the older people to download various games onto their tablets and this has resulted in happiness and hilarity for all.

Their learning

 **“It was only possible to deliver the project in the very short time scale permitted by being able to access established networks through EDVA and get referrals from them. Having a December start date was a major difficulty and the timescale was unrealistic.”**

 **“It was good to have an established support structure in place but staff changes made it a bit discontinuous. It is unfortunate that the programme finishes before the project.”**



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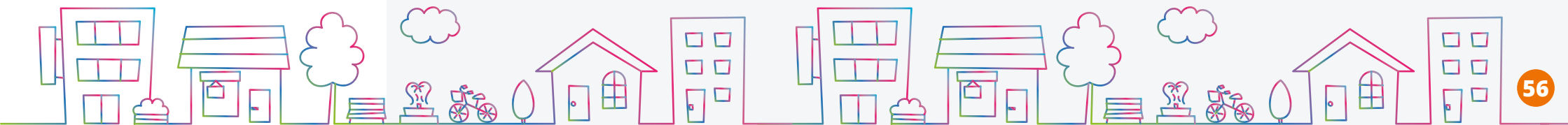
“Delivering a new project in six months is not realistic, particularly one that has had to be changed and amended to meet unforeseen circumstances as they arise. For example, initially the project planned to work with up to 10 older people and planned to recruit 10 young volunteers. Conversations with various organisations and the young people themselves challenged this plan and we realised we would need to link two young people to each older person for aspects of safety and support.”



“ED’s Cycle Co-op has employers’ liability insurance, however the current policy did not cover teenage volunteers cycling and befriending without supervision. One quote was eventually obtained which was three times the initial budget.”



“The project will deliver more change for less cost with wider benefits. There will be a reduction in carbon usage and that will lead to a healthier community. The number of old people is increasing and so is social isolation. Having a young visitor a few times a week will make a big difference on an older person’s health and happiness.”



EDAMH - East Dunbartonshire Community Assets Map



East Dunbartonshire Association for Mental Health (EDAMH) offers emotional, practical and social support to people experiencing mental ill health, living in East Dunbartonshire.

The project

EDAMH developed the East Dunbartonshire Asset Map – a community website with a range of neighborhood assets (activities, organisations, places and resources) – that had been identified by people living in East Dunbartonshire as helping them feel better. The asset map allows the wider community to share and benefit from this information. The website can be used to search for assets, add ones that might have been missed, and allows individuals to provide comments on their preferences.

Funding was given to enhance existing work and to extend its reach by taking the asset mapping approach into multiple communities and supporting local people to be leaders of the process as 'Community Champions'. This provided opportunities for community involvement and influence and significantly extended the reach of the approach. The map was developed, launched and marketed at a series of events throughout East Dunbartonshire.

The difference it made

Throughout East Dunbartonshire local people have been able to take ownership of the asset map, by identifying and mapping the places that make them feel good. This has



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increased the number and extent of community connections as people share information and interact with each other. The approach has enhanced social capital and allowed people to feel that they are more connected to their local community and to increase awareness and use of local assets. Following training, Community Champions have gained knowledge and skills and are confident in communicating with members of the community at local Asset Map launch events. They have a sense of pride and achievement from helping individuals in their community.

EDAMH, and other organisations and agencies now have a better understanding of the impact of locally identified assets. The project has raised the profile of the asset map and grounded it in the community. It has allowed EDAMH to develop new partnerships which will extend the reach of the project in future such as supporting the involvement of young people from local schools.

Their learning



“Taking an asset mapping approach into multiple communities and supporting local people to be leaders of the process has provided opportunities for community involvement and influence and has significantly extended the reach of the approach. It has resulted in a better understanding of the impact of locally identified assets.”



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GRACE - Aftercare through arts and technology



Group Recovery Aftercare Community Enterprise (GRACE) is a self-help group supporting people affected by life traumas, such as addictions, mental ill-health and homelessness. It is a peer-led membership organisation which aims to promote health and mental wellbeing, and to support members in their recovery from traumatic life events which are often exacerbated by addiction to alcohol or drugs, and poor socio-economic circumstances and opportunities.

The project

Aftercare through Arts and Technology is a series of drama and digital arts workshops whose aim is to boost the confidence and skills of people affected by life traumas and to enable them to engage once again with their communities. Drama workshops enabled individuals to come together and support each other to “find their voice”. Many people who have experienced traumatic life events have profound confidence and self-esteem related issues which can thwart the potential and desire of a person to move on in life and to progress onto new pathways or to become the person they once were.



“The one thing you notice is that people’s heads come up a little more, eye contact is made. It’s not creating a new person, it’s like someone re-finding themselves.”

The workshops offered by the digital café enabled participants to develop understanding and provided opportunities to learn the new skills which are needed to engage with the




TAILORED SUPPORT CASE STUDIES

digital world. Many participants are seeking to return to the job market from long term unemployment and struggle with digital literacy requirements demanded by employers.

The difference it made

The individuals who participated in the workshops became more confident and acquired new skills. As a consequence they are able to re-engage with their communities and improve social capital.


 **“I was probably about a two (out of 10), I was quite low. But now when you’re in the group, you’re hitting a nine.”**

Some went on to find employment, others felt they could form better relationships with their families and started taking part in other activities within the wider community. Many reported improved health and stated that existing physical and mental health conditions had improved and that they relied less on support from health workers and/or medication.

 **“I’m no longer on antidepressants. I’m totally off them.”**

One member suffered a setback in his personal life which resulted in him coming back into the group for support rather than seeking support from statutory services. The project empowered people, helping them to take full charge of their life path and to start to become people who can, in their individual way, actively contribute to their communities.

As an organisation, GRACE has developed new partnerships and has confidence in using more creative ways to demonstrate the difference they make. The drama group was supported to produce a video which powerfully demonstrates the difference the project has made to their health and happiness.

 **“By setting up a digital café we have been able to start to develop a partnership with the Department of Work and Pensions.”**



Their learning



“We have the tools to ensure we get recognition of the value of what we are doing.



“The timescale was too tight and we are now just getting into the swing of things when it has to wind down.”



“Having someone to go to has been great and a dedicated worker would help.”

TAILORED SUPPORT CASE STUDIES



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TCV - East Dunbartonshire Green Gym



The Conservation Volunteers (TCV) help hundreds of thousands of people each year to reclaim local green places. Through environmental projects and a network of community groups, people are supported to take responsibility for their own local environments. TCV created 'Green Gyms' which provide fun and free outdoor sessions involving practical activities such as planting trees, sowing meadows and establishing wildlife ponds. Unlike other conservation projects, the emphasis is very much on health and fitness - volunteers warm up and cool down in preparation for a range of light to vigorous activities to suit all abilities.

The project

East Dunbartonshire Green Gym provided an opportunity for local people to keep fit by taking part in physical activity in a programme of outdoor sessions. A range of physical activities was offered at Merkland Local Nature Reserve and Tintock woods. These included woodland thinning, litter picking, removing patches of rhododendron and paths clearing.

The difference it made

As well as improving physical health as a result of increased activity, participation in the Green Gym enhanced individual wellbeing through greater contact with nature.



"Conservation work is my best workout each week."

Participants reported that the biggest benefits were the new social contacts that they had made and the sense of pride and satisfaction they experienced from making a difference to their local community by improving the environment.



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“It’s good to get outdoors and meet people – it makes me feel much better.”

Some individuals also gained new practical skills.

Local people benefited by being able to enjoy and access a green space on their doorstep. The paths improvements that were carried out made it easier to go for a walk and access local services.



“It’s much easier to use the path and go for a walk or get to the local shops.”

As an organisation, by setting up a green gym in East Dunbartonshire, TCV have been able to increase their geographical reach and to form new partnerships. By making links with other service providers, such as local countryside rangers, they have made the volunteer led project more sustainable.

Their learning



“Having a dedicated member of staff to work with was very useful.”



“The length of time in which the project had to be completed was very challenging. It would be much better to have a longer project lead in time and start it at a time of year when it was more likely to be successful. Setting up an outdoor project in winter is far from ideal.”



“As an organisation we had to cope with the challenge of our member of staff leaving just after the project had started. This was difficult to manage in the limited timescale that was available.”



“As a national organisation it was good to be able to have support to



make connections at a local level. Hopefully the work we have started will continue to be supported and we can set up more activities. As an organisation we have a better understanding of the needs and challenges of working with communities in East Dunbartonshire.”

TAILORED SUPPORT

CASE STUDIES



TAILORED SUPPORT CASE STUDIES

Twechar Community Action - Twechar Meal Delivery Service



Twechar Community Action, formed by local people, was responsible for the establishment of Twechar Healthy Living and Enterprise Centre. The Centre is a community hub housing a full time pharmacy, a satellite GP surgery, café, sports hall and meeting rooms and offering a vast range of activities and services.

The project

Twechar Meal Delivery Service, managed by Twechar Community Action, used a meal delivery service to provide older and vulnerable people in the local area with a healthy meal and at the same time offered information and support to help them participate in community based activities. Hot evening meals, prepared by young trainees, were delivered by a volunteer befriender who could spend time talking to individuals who were isolated or experiencing social exclusion. Once a relationship had been developed, information and support was given to encourage individuals to take part in other community activities and events.

The difference it made

Older or vulnerable residents reported feeling better as a result of increased social contact and indicated that they knew more about other local services on offer and were more likely to use them.



“It was good getting information on other local services and events - I now attend the lunch club.”

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“As well as getting a meal I have a friendly person to talk to.”

For the volunteers who prepared and delivered the meals, all reported that they felt more connected to their community and had increased their social contacts. Some had gained new skills and certificates in food hygiene and first aid.



“It is so important to talk to the pensioners to keep them up to date with village news – they really enjoy our conversations.”



“For some people it saves them energy needed to make a meal that they may not have – they might just have got a sandwich.”

In the course of delivering the project it became clear that the social contact offered to isolated individuals was valued highly and was the most important element of the project. In many instances, the provision of a meal was considered to be incidental. In the conversations that took place when delivering the project it was identified that people missed the social interaction that had been offered by the recently cancelled mobile library service. Discussion with the local council made it possible to incorporate a book delivery service in to the project. As a result, it was felt that the best way to proceed in the future would be to look at including time for social contact into some of the wide range of existing services and opportunities that are on offer.

The possibility of applying for grant funding to cover this social aspect, in addition to utilising existing service charges, is being explored and the learning and evidence gathered from the meal and book delivery service is being used to assist this process.

Their learning



“Adverse situations such as the cancellation of the mobile library service can offer opportunities.”



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“It took longer to get the project established than anticipated. Cold calling didn’t work too well as some people were reluctant to come to the door. Using a leaflet drop to advise that visits about the meal delivery service would be taking place at a certain time worked better.”



“There was too much time at the beginning spent in meetings. The process was a bit complicated for the amount of money on offer. If you have limited staff numbers and restricted funding it is very difficult to maintain attendance.”



“Participating organisations should be involved in any discussions or plans about how any continuation funding to support sustainability is committed.”



“It was helpful to have dedicated staff who took an approach based on the needs of individual organisations – this type of approach should continue. What would be really useful if someone who can help with funding applications.”



“We know that social isolation shortens people’s lives so we wanted to give older people in the village the contact they need. We started off providing a meal delivery service but have taken what we learned from this approach and the needs users identified – time to talk and to find out about what is happening locally – and are going to factor this into other work we do.”



Engagement with statutory bodies

Approach

BHHC works on a cross-sector basis to bring agencies and organisations together, developing shared understanding and building mutual respect. The logic model approach was used to identify and agree outcomes with representatives from East Dunbartonshire Council, East Dunbartonshire Community Health Partnership and NHS Greater Glasgow and Clyde. A presentation on these outcomes and the wider aims of the programme was provided for the Community Planning Partnerships.

As with the third sector partners, outcomes were identified on a short, medium and long term basis.

The short term outcomes that were identified for statutory bodies were:

- Statutory agencies have greater understanding of the external barriers to third sector service delivery of health and social care services
- Statutory bodies understand and accept the contribution the third sector can make to health and social care interventions
- Statutory bodies set timescales to develop new processes and policies to facilitate community activity

What we did

To identify whether or not these outcomes had been achieved, individual interviews took place with representatives from each public sector partner. In the course of a semi-structured interview the following areas were covered:

- General views and observations of the approach taken by programme
- Consideration on whether the predicted project outcomes have been delivered for

Local statutory bodies...

have greater understanding of the external barriers to third sector service delivery of health and social care services

understand and accept the contribution the third sector can make to health and social care interventions

set timescales to develop new processes and policies to facilitate community activity



stakeholders and if there are any unanticipated ones

- An identification of what had been learned and, as a result of that, what will now be done differently
- The role of enabling organisations such as EDVA and SCVO in supporting health and social care integration

Interviewees were offered the opportunity to comment on anything, positive or negative, that they felt was important and relevant.

The difference we made

There was agreement that the programme offered a comprehensive approach that could be used to engage with all sectors. In East Dunbartonshire some work had already been undertaken in relation to collaborative working across sectors and the BHC programme built on this and offered added value. The multi-layered approach used worked well and there was a recognition of the need to take time to establish communication and build relationships. It was felt the delivery of a programme of capacity building workshops and networking events had been successful. Establishing a Local Reference Group to oversee the programme and to make decisions on how funding would be allocated to selected individual projects was welcomed.

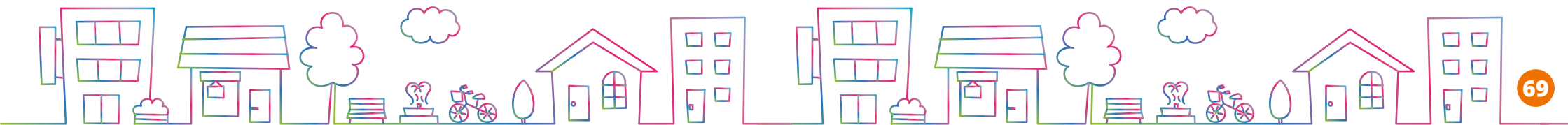


“The approach taken was positive and seemed to galvanise the third sector. It should be seen as a stepping stone to better, more joined-up working.”

David Radford

Health Improvement Lead, East Dunbartonshire Community Health Partnership

Some concerns were expressed about the numbers of organisations participating in the networking events and the extent to which sustainability was actually considered in awarding funding to the selected projects.





“BHHC has meant that we have all come together to look at different ways of doing things that will affect the way that everyone, across all sectors, works.”

Fiona McCulloch

Planning and Performance Manager, East Dunbartonshire Community Health Partnership



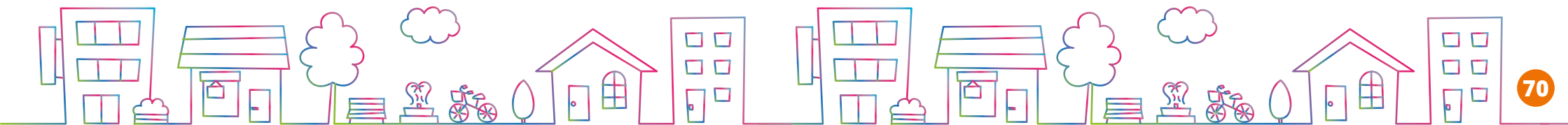
“The programme demonstrated what the third sector can offer. It opened my eyes up to the possibilities offered by wider engagement by giving an opportunity to connect with a range of organisations who were able to exert different influences.”

David Radford

Lack of connectivity and mutual understanding were seen as major barriers to collaboration. There was a recognition of the role the third sector has in both influencing change and supporting improvement. There was a recognition that health and social care integration will provide an opportunity to gradually change organisational ethos and start to move towards a shared understanding. The way in which BHHC supported third sector organisations to use a logic model approach as part of the application process for funding was viewed as a useful contribution towards this end.

By adopting a co-production approach, with the active participation of all parties with an interest in making change happen, there had been the start of a culture shift which resulted in better joined up working. Whilst there has been a track record locally of the statutory sector working well with other organisations, it has tended to be on the basis of individual contacts. BHHC has provided a better shared understanding of different roles and how organisations can work better together.

It was suggested that statutory agencies may not have the same level of understanding of what is needed at a community level as locally based groups who have a real



knowledge of what is required within their communities. The improved connectivity created by the programme will allow local needs to be better reflected in how statutory services are planned and delivered.

In terms of new policies and practices it was felt that support mechanisms to help third sector organisations bid for resources should be put in place. This might result in a more joined up approach to tendering. It was suggested that it might be possible to make partnership working a condition of funding and include clauses to this effect in procurement.



“The voluntary sector are able to help people out at a much earlier stage and offer help and support before a crisis point is reached”

Paula Brown

AWI/Co-production Co-ordinator, East Dunbartonshire Council

Learning

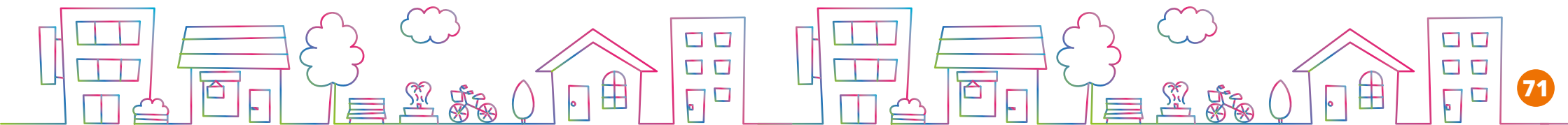
The number of organisations participating in BHHC events served as a reminder to statutory agencies of the number and diversity of groups with a role in health and social care.

The reluctance within the statutory sector to try things that may not have worked in the past or which are innovative was acknowledged. This can occur for variety of reasons not necessarily related to a lack of willingness on the part of the agencies. By providing resources to support individual projects the programme provided the opportunity to try out new approaches, based on community need and drawing on local assets, in a safe environment.



“Whilst there was some work underway in relation to health and social care integration, BHHC enabled this to be widened out and new ideas to be generated. Some of the proposals for funding were really innovative

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and we found ourselves posing the question – why didn't we think of this before?"

Fiona McCulloch

There was consensus that the key learning point from the programme was the impact that can be made by having positive connections that enable organisations to work collaboratively.



"The biggest benefit of the BHC programme are the connections that have been made. It highlights that being able to connect and work together will deliver change but there needs to be improvement in how this happens."

Paula Brown

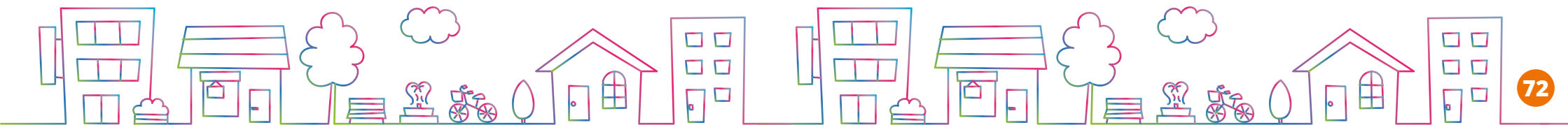
It was felt that what had been achieved needed to be shared and if this could be done annually it would increase visibility and recognise the success of partnership approaches to building healthier and happier communities. Any event of this kind would need to include something positive for the participating groups.

Given the timescale of the project it was not possible to provide evidence of any of the medium term outcomes that will be delivered by BHC. However, these have been agreed and it is recommended that appropriate indicators are put in place to enable an assessment of the extent to which they are realised. Meanwhile, a sustainability strategy has been agreed and more information on this is provided in a separate process report.

How we supported them

It was suggested that SCVO provided clarity and vision to the programme and were able to identify individual needs and work across sectors in a non-threatening way. SCVO were able to set up meetings that would not otherwise have happened by using their

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existing contacts. As a result of the participation of an organisation with a national perspective it was possible for a strategic overview to be provided and this enabled all those taking part to look at things differently.

Meanwhile, EDVA's connections and relationships, notably with community planning partners and the Change Fund Programme Board, have been crucial in enabling BHHC to succeed:



"We had really strong foundations because of EDVA's relationships."

Sarah Currie

BHHC Programme Manager, SCVO

SCVO helped raise the profile of the programme and were well placed to share good practice. It was felt that the support provided by SCVO was crucial and EDVA alone would not have had the capacity or the wide ranging connections that were required for delivery. There was a recognition that there is a real need in the statutory sector to make positive connections with the third sector and there are some concerns as to whether EDVA will be able to follow through on those that have been established.



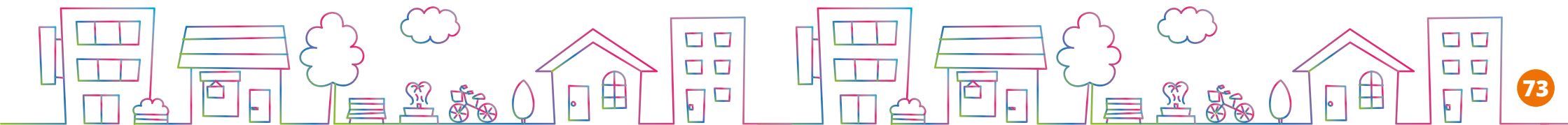
"Having SCVO involved has been really helpful as being a larger organisation they have wider experience which informs a better understanding of what works and what doesn't."

Paula Brown

To address concerns around sustainability and maintain the BHHC legacy, funding was provided to enable EDVA to recruit a Building Healthier and Happier Communities Development Officer. The post is funded for a 12-month period.

Legacy and sustainability

Legacy and sustainability have been two words at the forefront of EDVA's mind since



the BHHC programme began. The delivery and sustainability of the project has relied heavily on EDVA being able to dedicate resource to it and to embed the learning into their day to day work, given the value and support it provides. This is evident in the legacy elements which are already underway locally.

Colleagues from East Dunbartonshire Community Health Partnership, East Dunbartonshire Council and NHS Greater Glasgow and Clyde said BHHC:

- Addresses the lack of connectivity and promotes collaborative working, used asset-based approaches
- Supports a new way of thinking and offers the opportunity to test new approaches
- Encourages statutory organisations to view the third sector in a new way
- Provides a way for all sectors to work together for continuous improvement and encourages statutory bodies to review their practices and procedures
- Recognises that third sector organisations need support to bid for resources/ tender for contracts

Third sector intermediaries

What we did

The role of SCVO and EDVA has been that of intermediaries enabling change. By initiating the BHHC programme, SCVO attempted to create conditions which allowed connections to flourish and capacity to be developed. Statutory bodies and third sector organisations were supported to identify outcomes which, if they were achieved, would allow all parties to understand and contribute to the process of health and social care integration.

Measuring and evaluating the changes delivered directly as a result of an intermediary organisation's activity can be challenging, particularly in relation to identifying and

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establishing the level of attribution. This element will be considered in more detail in a separate Social Return on Investment analysis of the BHHC programme.

Much of the evidence of the contribution made by SCVO derives from the comments of partners and participating projects. SCVO acted as a catalyst by bringing people together, keeping them focussed on the key priorities and using their organisation's unique knowledge and experience to facilitate change.

 **"The support from SCVO was massive."**
BHHC-funded third sector organisation

 **"SCVO were able to get people together to talk – that made a huge difference."**
Local third sector organisation

 **"Lot of respect for SCVO – it would have taken years without them."**
Local third sector organisation

 **"SCVO were able to set up meetings that would not otherwise have happened."**
East Dunbartonshire Community Health Partnership

Working closely with local communities, EDVA had a key role in understanding local need, promoting the role of the third sector in East Dunbartonshire and ensuring that the necessary support was available. Importantly, they had existing relationships with decision makers and influencers – this made it easier to introduce the BHHC approach and achieve buy-in.

**Enabling organisations
EDVA and SCVO**

- Better able to support locally based third sector organisations to explain, evaluate and evidence their role in providing health and social care services
- Have evidence to influence and persuade strategic decision makers of the value of third sector interventions
- Able to share and disseminate learning across sectors



As well as enabling others to benefit, both SCVO and EDVA predicted that they too would experience change. The short term outcomes identified were that by supporting and delivering the BHC Programme SCVO and EDVA will be:

- better able to support locally based third sector organisations to explain, evaluate and evidence their role in providing health and social care services
- able to have evidence to influence and persuade strategic decision makers of the value of third sector interventions
- able to share and disseminate learning across sectors

The extent to which each of the organisations has met these predicted outcomes will now be considered.



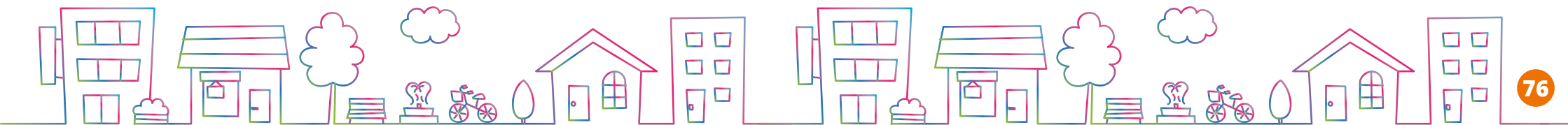
“There is no question that the way in which the voluntary sector works means it is better placed to return a sense of control to people and work with people instead of doing things to them. We should move control to the voluntary sector but we do not know how to make that shift.”

Sir Harry Burns

The difference it made

EDVA and SCVO have been able to highlight the BHC approach and the ways in which the third sector enables transformational change at events and strategic meetings at local, national and international levels.

As a result of the programme’s currency, both EDVA and SCVO were able to access and influence key decision makers in the local area and on the national stage. Paul Gray, Director-General Health and Social Care and Chief Executive of NHS Scotland, met local partners in Kirkintilloch in January 2015 and acknowledged that the BHC approach had



been instrumental in supporting the third sector to think about their outcomes, plan what they do and articulate the difference they make. His conclusion was that the model used for health and social care integration is the right one and that a lot of the solutions can be found by the third sector, whose approach will be more community focussed and is likely to be more cost effective.



“The health and social care integration model is the right one and a lot of the answers lie not in the statutory sectors but in the third sector, which will cost less and be better for those involved.”

Paul Gray

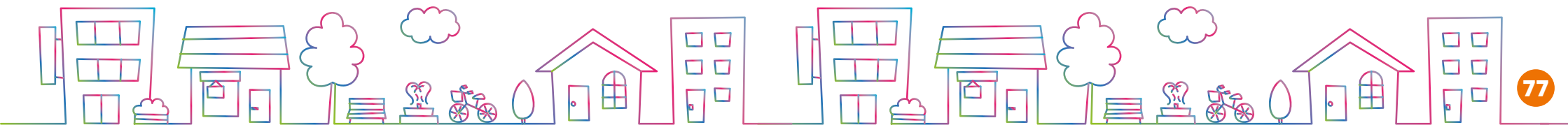
Director-General Health and Social Care and Chief Executive, NHS Scotland



“The Community Health Partnership has welcomed the opportunity to work with SCVO in the implementation of this pathfinder. The programme so far has been able to demonstrate good involvement of local residents and community organisations in identifying local assets and opportunities to contribute to community health and wellbeing. The inclusive methodology has been well received and has increased the knowledge and skills of community and voluntary organisations involved in the programme, and provides a platform for future capacity building. We hope that the outputs from the pathfinder will provide us with further opportunities to identify sustainable activities that enable individuals and communities to look after their own health and wellbeing.”

Karen Murray

Interim Chief Officer, East Dunbartonshire Adult Health and Social Care Partnership



At the shared learning event in March 2015, Rhondda Geekie, Leader of East Dunbartonshire Council, acknowledged the value of the approach and welcomed the opportunity it provided for:



“...everybody to work together across all sectors in East Dunbartonshire.”

Sandra Cairney, Head of Planning and Health Improvement at East Dunbartonshire Community Health Partnership added:



“We did networking before but we never did managed networking. For me that’s about making sure the network is constructive, that people are able to have aims and objectives and know the direction of travel they want to go in, are able to understand what others do and are able to make those links.”

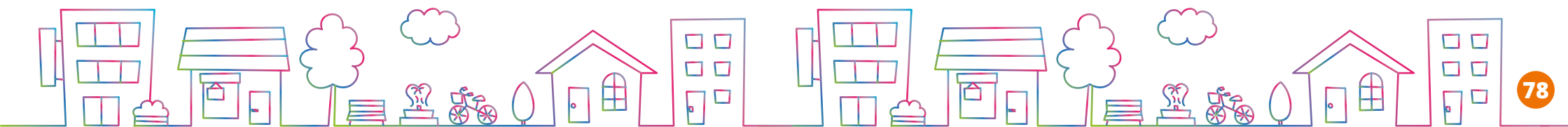
The evidence collected from both the funded projects and networking events demonstrates the difference the BHHC programme has made to third sector organisations operating in East Dunbartonshire in relation to their ability to explain, evaluate and evidence their role in providing health and social care services. Each organisation has learned much about how best to provide support. As well as increasing their knowledge and understanding, their experience of delivering BHHC in East Dunbartonshire will influence the way future capacity building and engagement programmes are delivered.

Learning for EDVA

As a result of the programme, EDVA was able to establish new connections and partnerships and to consider how they might deliver support to local organisations more effectively by working in a different way.

“The programme has increased awareness in EDVA of other services and given an opportunity for people both within EDVA and beyond to stop working in silos. People were able to talk to people they would not normally meet. Having built up a better awareness

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of what is going on there is a danger that we go back to working alone. To ensure this doesn't happen is a role for EDVA."



"EDVA needs to offer support to smaller organisations who may feel overwhelmed - we need to do things differently to focus our efforts on enhancing the quality of the sector locally. It is a huge opportunity for EDVA to play a key role."

Gordon Thomson

former Chair of EDVA

Working in partnership with a national body has enabled EDVA to raise its profile and engage with organisations and agencies on a national basis.



"The partnership approach between EDVA and SCVO has brought a welcome national dimension into a local area."

Jackie Burrows

Chair, EDVA



"It's national policy at a local level - having SCVO as a strategic partner opened doors that wouldn't normally open."

Elaine Smith

Operations Manager, EDVA

EDVA have seen the benefits of using approaches that are based on extensive consultation and engagement followed by targeted activities.





“One of the things that I’ve learned from Building Healthier and Happier Communities is that enabling change with a community is not necessarily about piling money into the community. It’s about engaging with the community and having the community make the decisions as to what it wants to do and how it wants to do it. For me in the project, that’s been one of the most powerful things.”

Jackie Burrows

Chair, EDVA



“Lots of small things happening that fit together to make a bigger difference”

Elaine Smith

Operations Manager, EDVA

The partnership that has been created is valued highly and there is a desire for it to continue.

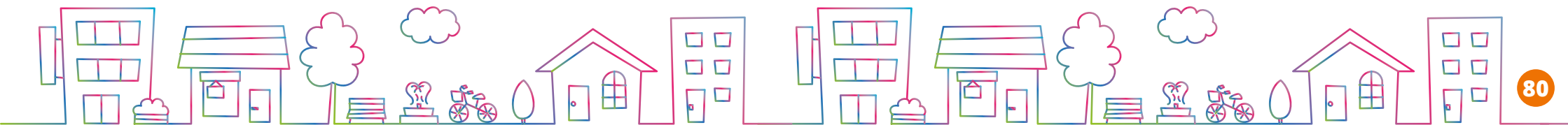


“We are very keen to ensure our relationship with SCVO continues for as long as possible as we feel there has been wider benefit through our contact which is helping to identify and highlight the positive partnership working in ED as well as the positive outcomes we have achieved for our local groups and their service users.”

Gilbert Grieve

Chief Executive Officer, EDVA

There is also a recognition that without the support and assistance from SCVO the programme would not have been possible.





“Without SCVO, we wouldn’t have had the idea, the resources or the capacity to implement BHC in East Dunbartonshire”

Gilbert Grieve

Chief Executive Officer, EDVA

Learning for SCVO

As a national organisation it is essential to understand local priorities and to work with local partners.



“EDVA were key in getting introductions, we wouldn’t have got to the table without them. No assumptions were made – we always drew on the knowledge of our local partners and saw our role as best supporting actor.”

Paul White

Director of Networks, SCVO

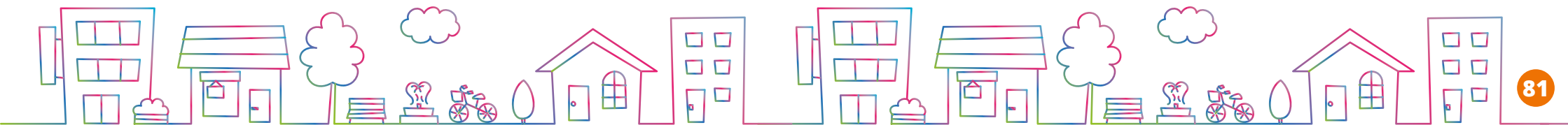
Taking time for proper engagement and consultation are essential. Trust and confidence has to be established and that cannot be rushed. Being able to identify a key ally amongst local decision makers is extremely advantageous.



“There was an appetite to work with the third sector and make better use of what the third sector had to offer.”

Sarah Currie

BHHC Programme Manager, SCVO





“To deliver a programme of this nature requires considerable energy, drive, strategic vision and an ability to build good working relationships. This requires a special type of person and the Programme Manager had these qualities and worked behind the scenes to gain trust as a start to building relationships.”

Claire Tester

Strategic Lead for Third Sector for Health & Wellbeing (Planning and Quality Division: Healthcare Quality and Strategy Directorate, Health and Social Care Division & Third Sector Unit, Local Govt. & Communities Directorate)

Delivery of the programme took much longer than anticipated. Expecting the funded projects to plan, deliver and evaluate their activities in around seven months was unrealistic. The Programme attracted great interest and excitement and it was difficult to manage expectations of both participants and partners.



“Our role is to enable to the change; we’re not necessarily expected to have delivered all the changes in capacity.”

Sarah Currie

BHHC Programme Manager, SCVO

Overall, the programme has built a movement of people who are committed to working together to build health and happiness in a different way:



“One of the outcomes of the programme is that we will all have a better understanding of what is required for effective partnerships with statutory partners in health and social care integration. This will provide evidence of what is needed for parity of partnership working, and enable a transformation in the way the third sector works with statutory partners.”

Claire Tester



PART 4

Implementing the approach in your area

The purpose of the BHHC pathfinder was to evidence the proposition that strategic investment in the capacity of the third sector can prevent the need for mainstream (statutory) services arising and improve the quality of life for people in their own communities.

Set in the context of health and social care integration, the pathfinder sought to enable people, with the support of the third sector, to do more to look after their own health and happiness, as well as that of the people and communities they care about.

As noted above, the short-term outcomes in the planning and evaluation logic models have been achieved, while the medium and longer-term outcomes are expected to reach fruition, in full or in part, over the coming years.

What we found that helps to build healthier and happier communities

The East Dunbartonshire pathfinder aimed to improve understanding of how change in community capacity can enable prevention at locality and primary care levels. This has involved building and developing relationships between the third sector –charities, community groups, social enterprises and voluntary organisations of all shapes and sizes





Paul Gray, Director General Health & Social Care and Chief Executive NHS Scotland, met local partners and projects involved in Building Healthier and Happier Communities in East Dunbartonshire (January 2015).

– the local authority and the NHS to empower people to look after and improve their own health and wellbeing and live in good health for longer.

The BHHC approach has involved transforming ideas (usually simple) into action (often challenging). The way in which this approach was deployed to strengthen partnerships, facilitate change and enable outcomes to be achieved at project and programme levels is set out in a separate process report.

For the purposes of this report, our preliminary findings identified some key elements of the change BHHC enabled:

Relationships

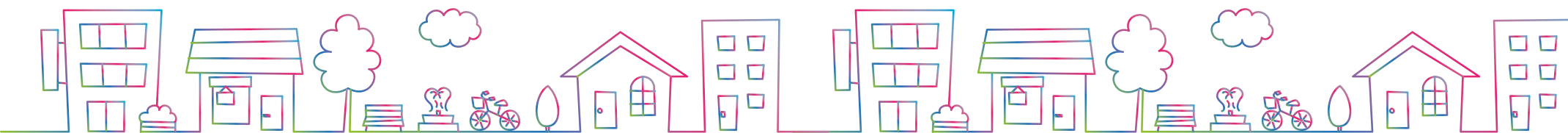
Values-based relationships were key to the success of the pathfinder. The BHHC approach enabled relationships to develop from recognition – knowing who does what and where – to respect, esteem and partnership. Community-based, organisational, personal and professional networks were strengthened.

Creating space

The creation of space, where citizens and colleagues from across sectors were take time to understand themselves and each other – and importantly, the shared things that mattered to them – allowed values-based relationships to develop and helped participants to do things differently, be different and co-produce.

Professional armour

By removing professional armour – the defensive trappings of experience, office, rank and role – people who participated in the pathfinder were able to move more freely and travel further. In other words, they could approach issues from a different angle, appreciate a range of perspectives, adopt an approach of inquiry rather than advocacy, and reach conclusions they might not have considered had they kept the armour on.



Participants in the pathfinder became more approachable, more participative – and more human.

Linking the micro and the macro

Third sector organisations – particularly grass roots groups– are motivated by a passion to make a difference to their community or good cause. By linking this passion and the outcomes it enables to the key local and national policy drivers in the field of health and social care, BHHC enabled organisations to view their activity in more strategic terms.

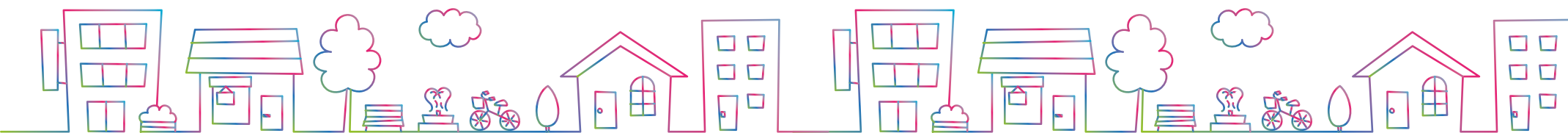
By linking the micro and the macro, third sector organisations were better able to describe their impact to decision takers and policy makers. Statutory sector organisations were able to appreciate more fully the current and potential contribution of the third sector to their policy objectives.

Caring more

As well as encouraging participants to go the extra mile to improve the health and happiness of their communities, BHHC illustrated the benefits of providing opportunities for people with health issues or social care needs to care about others, in addition to feeling cared about. By enabling people to do more for themselves and each other, BHHC demonstrated how the third sector develops community assets, builds resilience and helps people take control of their lives.

Positive horizons

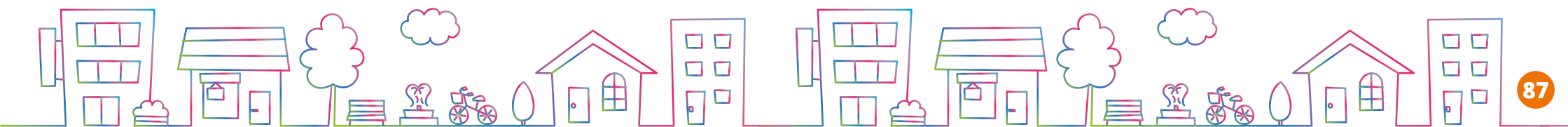
The health impact of social isolation is well known. In addition to addressing this issue for many programme participants, BHHC demonstrated the power of positive horizons – good things which come round regularly – to transform the lives of people with health and care issues. The third sector already does much to help people do the things that matter to them, but there is scope to do more.



Building Healthier and Happier Communities in the future

The experience of the East Dunbartonshire pathfinder shapes the following recommendations:

- The BHC approach, developed and delivered in an East Dunbartonshire context by SCVO, can be adapted and adopted to fit the circumstances and ambitions of other localities, local authorities or NHS Board areas. The programme, which can be delivered as a full suite or tailored to address specific issues, should be extended on an incremental basis to other areas in Scotland with an appetite for building community capacity and enabling prevention with the support of the third sector.
- While the BHC approach can be deployed in a range of contexts, it is particularly suited to the locality-based opportunities presented by health and social care integration. Early discussion is required with integration authorities with an interest in community-based approaches to improving health and social care and managing demand on statutory services.
- Health and social care integration is the most significant public service reform for a generation. Given its significance, the Scottish Government is invited to consider how it can support the community-led, third sector enabled, approach developed by the BHC programme.
- Local buy-in is key. As well as having a commitment to the collaborative approaches which underpin BHC, local partners should demonstrate their buy-in by providing financial and in-kind support to the programme.
- Some of the outcomes enabled by BHC won't be realised immediately. Investment is required to enable evidence of change, and the learning which emerges from it, to be captured and shared.



Building Healthier and Happier Communities - the legacy for East Dunbartonshire

In order to build on the partnership and co-production approach which has been developed in East Dunbartonshire, and in the developing contact of community planning and community empowerment, the following recommendations have been developed and approved by the Local Reference Group in East Dunbartonshire. This will ensure full local ownership of the future of BHHC and it has also been agreed that these recommendations will form an action plan for monitoring and reporting.

BHHC Principles

Build on the learning of BHHC in East Dunbartonshire and the legacy discussions, partners should agree their respective roles and shared ownership to ensure that the BHHC principles (i.e. connecting communities, collaborating across sectors, building social capital and enabling prevention) remain active and embedded within East Dunbartonshire.

Outcomes

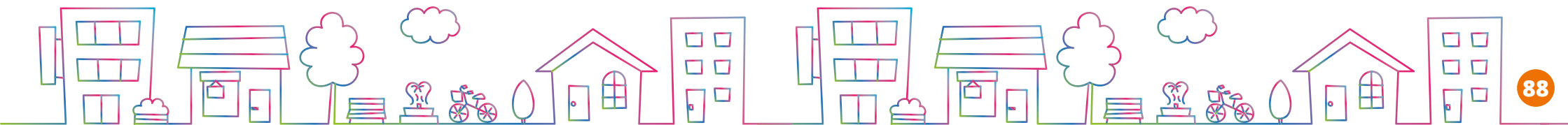
All partners should maintain their common commitment to achieve the agreed medium and longer term outcomes of BHHC to achieve healthier and happier communities and manage dependence on statutory services.

Integration

Local partners should clarify their roles in relation to integration and consider opportunities for involvement and influence from communities, encouraging participation at both operational and strategic levels.

Local need and priorities

A number of issues affecting the capacity of the third sector in East Dunbartonshire have already been identified and addressed. All partners should engage the third sector in order to understand local need and priorities, and identify action to address this.



Relationships and Reach

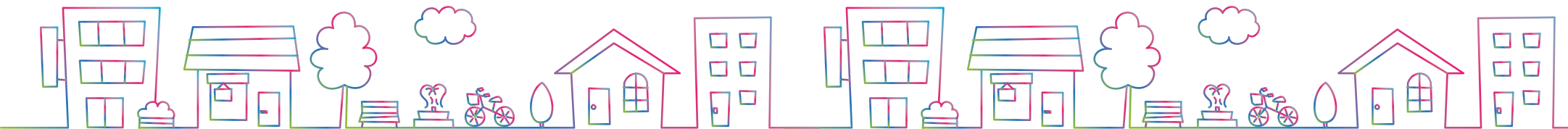
Building on the engagement and extended reach which has been established through the recognition of BHC in East Dunbartonshire, partners should sustain and continue to develop relationships within and across sectors which will enable change and endure.

Build capacity

The Third Sector Interface (TSI) should continue its vital role as a capacity builder and focal point for local community organisations by sustaining the opportunities for structured networking.

Review

All partners should commit to reviewing the above recommendations on a regular basis.



APPENDIX 1

Organisations which participated in the BHHC Programme

Action on Hearing Loss

ACVO

Afasic Scotland

Alzheimers Scotland

Antonine Theatre Group

Auchinairn Primary PTA

Bearsden Community Council

British Red Cross

Caldwell Hall Trust

Campsie Memorial Hall

Campsie View Nursing Home

Carer's Link ED

Carr Gomm

Ceartas Advocacy

CEDAR (Children Experiencing Domestic Abuse Recovery)

CHEX

Chest, Heart & Stroke Scotland

Citizens Advice Bureau ED

Community First, Lennoxtown

Community Mental Health Team

Community Transport Glasgow

Contact Point ED (The Park Centre)

Contact the Elderly

Cornerstone

CRUSE Bereavement Care

Cue and Review

CVS Falkirk and District

Deafblind Scotland

Diabetic Group ED

ED Access Panel

East Dunbartonshire Association for Mental Health (EDAMH)

East Dunbartonshire Community Health Partnership

East Dunbartonshire Council (including elected members and colleagues from corporate services, employability, people development and social work services)

ED Leisure & Culture Trust

East Dunbartonshire Cycle Co-op

ED Food Co-op

EDICT (East Dunbartonshire Initiative for Creative Therapy)

East Dunbartonshire Public Partnership Forum

East Dunbartonshire Voluntary Action (EDVA)

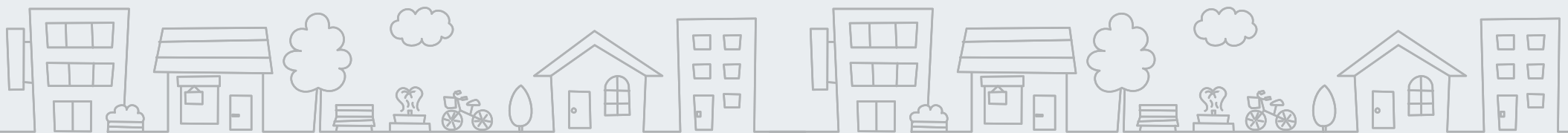
ED Women's Aid

Excess Leisure and Fitness

FACT (Families of Auchinairn Coming Together)

Food Train

GCU (Glasgow Caledonian University)



APPENDIX 1 continued...

Glasgow Integrated Sensory Services

Glasgow Samaritans

Gowancroft

GRACE (Group Recovery Aftercare Community Enterprise)

Guide Dogs For The Blind

Health & Social Care Alliance

Hillhead Housing Association

Home Supported Living Partnership

HOPE Buddies and Befriending Plus

Joint Improvement Team (JIT)

Kirkintilloch Health and Care Centre

Kirkintilloch and Kilsyth Amateur Swimming Club

Lennoxton Playgroup

Lifelink

Media Education

Milngavie in Bloom

Milngavie & Bearsden Swimming Club

Milngavie Pipe Band

Milton of Campsie Community Council

Milton of Campsie Railway Station Restoration Project

Minority Ethnic Forum ED

MND Scotland

Monday Club

Monday OAP Club

Mugdock Country Park

New Kilpatrick Nursery

NHS GGC

Older People and People with Dementia

OPAL (Older People's Access Line)

Paths for All

Person Shaped Support

Place2Be

Police Scotland

Rebound

The Reminiscence Activity in Care Home

The Richmond Fellowship Scotland

RNIB

SAMH - The Foundry

Scottish Council for Voluntary Organisations (SCVO)

Scottish Fire & Rescue

Scottish Government

Stage Stars Theatre Arts

Stand International

Strathkelvin Area Men's Sheds

The Conservation Volunteers (TCV)

Toddler Sense

Twechar Community Action

Universal Comedy

UR Life

U3A (University of the Third Age)

Victim Support ED

Voluntary Action East Renfrewshire

Voluntary Health Scotland

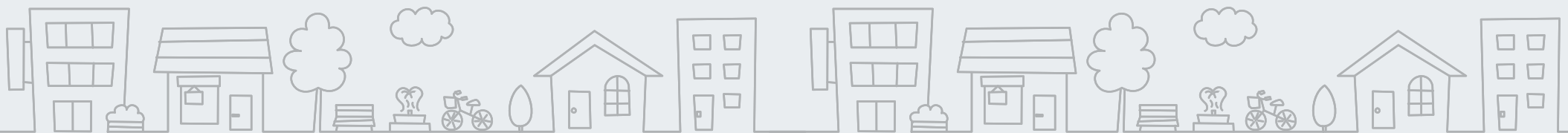
Voluntary Sector Gateway West Lothian

Volunteer Glasgow

Which?

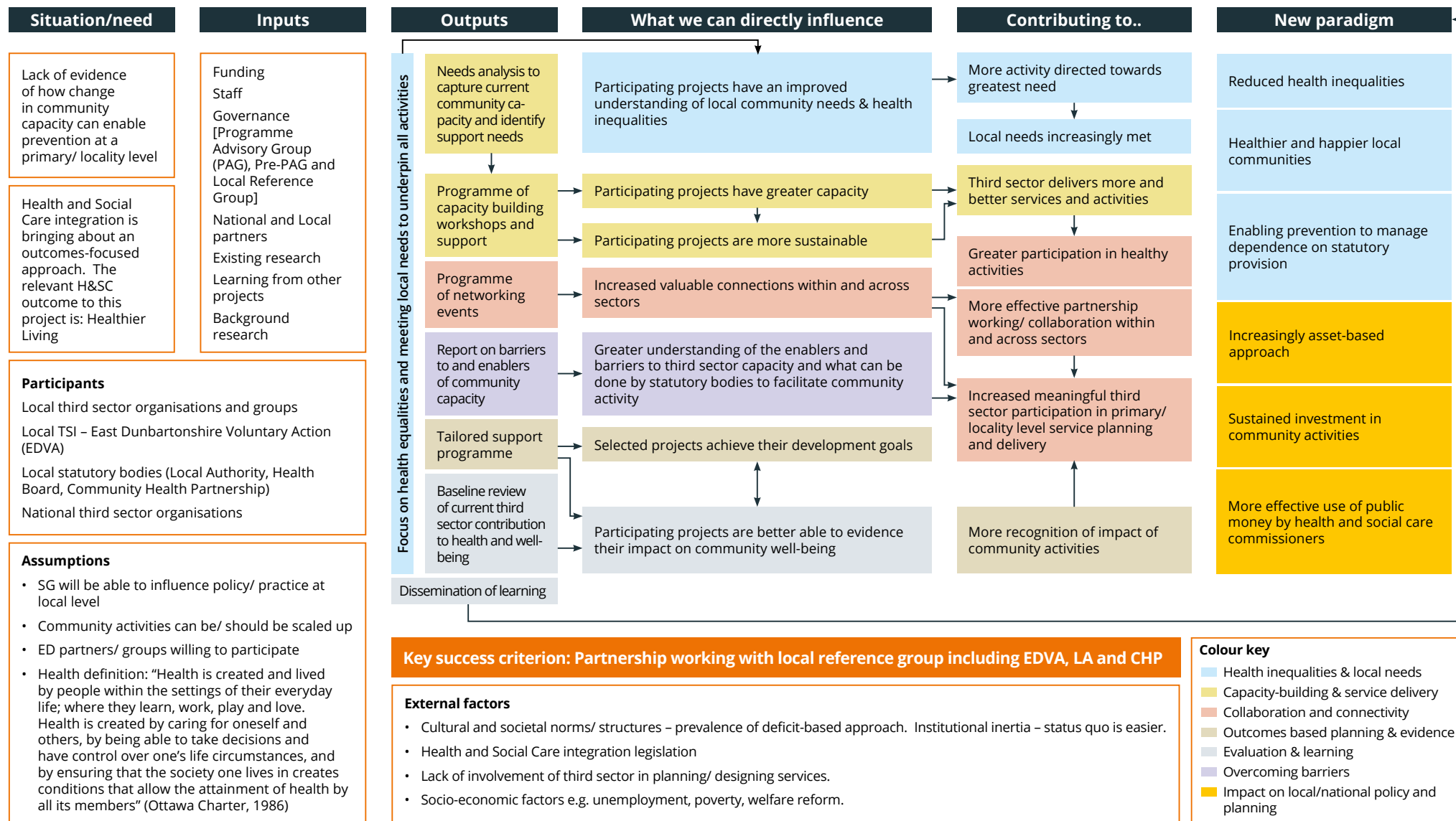
Wild By Nature

Zero Waste Scotland



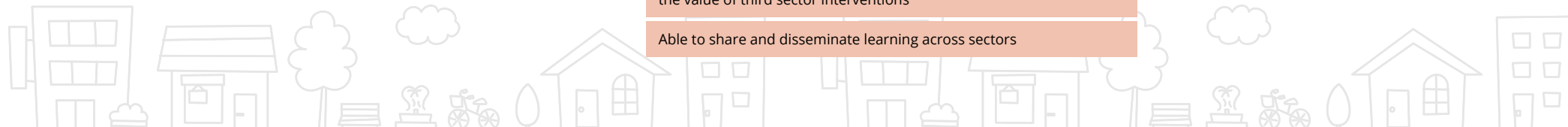
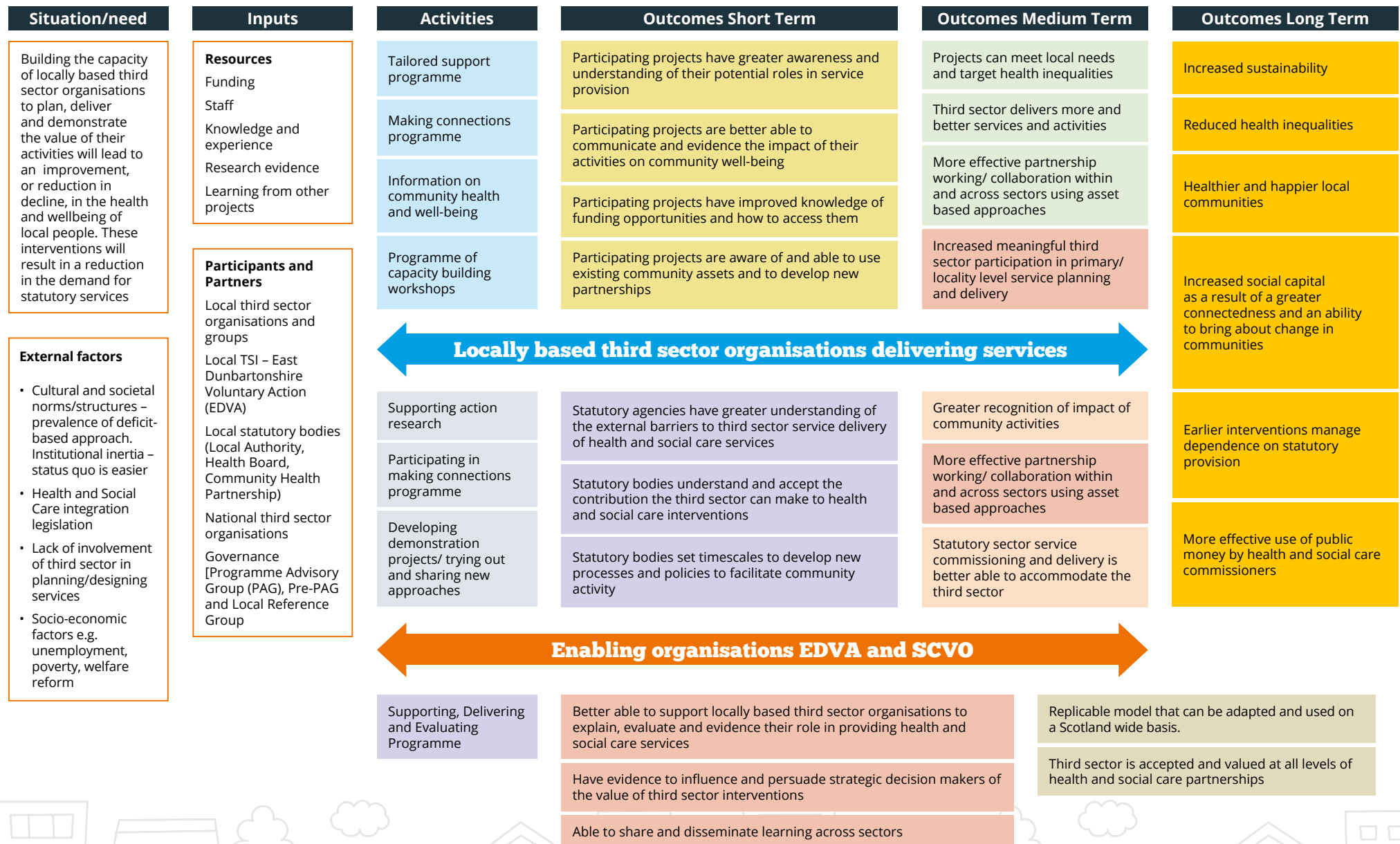
APPENDIX 2 - PROJECT PLANNING LOGIC MODEL

Building Healthier and Happier Communities in East Dunbartonshire Logic Model



APPENDIX 3 - EVALUATION LOGIC MODEL

Building Healthier and Happier Communities in East Dunbartonshire



END NOTES

i. The Role of Third Sector Interfaces – advice note on the role of the Third Sector Interface organisations in relation to integration activities
(Scottish Government, April 2015)

ii. The role of the voluntary and community sector in service delivery: a cross cutting review
(HM Treasury, 2002)

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