

Edinburgh's Partnership Plan: Community Health and Wellbeing Funding

15th November 2021

This draft Partnership Plan begins to set out Edinburgh's approach to implementing the Community Health and Wellbeing Funding announced by Scottish Government on 15th October 2021.

1: Background

Some elements of the fund are set out by Scottish Government and others are to be defined for Edinburgh in partnership.

- £1.255 million has been allocated to Edinburgh to support community health and wellbeing, for those aged 16 and above.
- The fund is to support mental health and wellbeing at a small scale, grassroots, community level. It can be used to increase capacity for existing groups and projects or for new initiatives.
- Groups do not have to have mental health and wellbeing as their main focus, but there needs to be a clear benefit to the mental wellbeing of people in their community.
- Initiatives with a focus on addressing mental health inequalities by supporting those who have been disproportionately impacted by the pandemic will be prioritised, particularly those supporting communities experiencing multiple forms of marginalisation.

For full Scottish Government Guidance see [here](#)¹.

Context:

The fund will be distributed by Third Sector Interfaces (TSIs), which in Edinburgh consists of EVOC, Volunteer Edinburgh and Edinburgh Social Enterprise, in partnership with a broad range of stakeholders. Implementation will take place in the context of Edinburgh's existing planning framework for mental health and community wellbeing, most specifically the Thrive Adult Health and Social Care Commissioning Strategy (linked to the Edinburgh Integration Joint Board Strategy), as well as the four Locality Improvement Plans and the Local Outcomes Improvement Plan.

The Thrive Strategy is summarised in the diagram below and has clear synergies with the aims of this funding.

¹ <https://www.evoc.org.uk/wordpress/wp-content/media/2021/11/Communities-Fund-Guidance-Guide-for-Partnerships-Final-14-Oct-2021.pdf>



The role of community commissioning

Communities (in the broadest sense, including people with lived experience, members of community organisations of all sizes, local residents and public sector partners) have an important role to play in all stages of implementing this funding to achieve the best outcomes for people in Edinburgh. People with lived experience should be involved in the process from an early stage, and supported to play a central role in planning and decision making around the fund.

This is in line with long term ambition to devolve planning and decision making in Edinburgh. How to achieve this in practice has been the focus of much discussion through the Edinburgh Wellbeing Pact Programme, and this fund offers a valuable opportunity to begin to put theories into practice.

For this to happen there are five key roles:

- Building capacity in communities.
- Understanding need – bringing together evidence to create a shared understanding of need.
- Defining an Edinburgh approach within the criteria set by Scottish Government - setting clear outcomes and priorities for the fund.
- Establishing an accessible application process and collaborative decision-making process with appropriate local governance.
- Defining how to report outcomes and understand the impact of the fund.

Each section below currently contains proposals as a starting point for these important decisions, to facilitate constructive discussions which develop consensus around the best approach and further detail.

2: Building capacity in communities

In addition to the £1.255m funding available to community organisations, the TSI will also receive around £90k to support capacity building related to the fund. Some of this will need to be used to

fund some of the practicalities of administering the fund but we would like to consider how some of this funding can also be used to directly support communities:

- In the short term:
 - to support the fund to be more accessible to organisations which are otherwise without the necessary capacity, especially those representing marginalised communities.
 - to support people with lived experience to participate fully in all parts of the process.
 - to support organisations to develop initiatives which help to meet the identified needs of communities.
- In the medium term to support organisations to develop their capacity with areas of delivery and reporting etc.
- In the longer term to support communities to be better equipped to participate in, and begin to lead, community commissioning processes.

Please contact us at funding@evoc.org.uk with suggestions on any of the above, and we will be happy to discuss.

3: Understanding need

There is plenty of existing evidence around need, demand, and gaps in support. We have reviewed a range of sources to identify evidence of need and priorities for mental health support across the city and a summary is included below. You can find more detail (and references) in Appendix 1 which will be further developed to provide a more comprehensive resource to guide implementation of the fund.

There is a direct link between poverty and poor mental health, and the COVID-19 pandemic has exacerbated existing health inequalities. Scottish Government data indicates that someone is three times more likely to have below average wellbeing in the most deprived areas compared to the least. The Mental Health Foundation recommends safe spaces for connection, peer support and specific support for asylum seekers and refugees and BAME communities. The Edinburgh Poverty Commission report from 2020 states that the capital must make a sustained and significant effort to improve mental health, responding both to recent traumas and the underlying causes of mental health inequalities. A key theme in the majority of reports is the evidence for early intervention and prevention approaches to prevent escalating need and more complex interventions in the longer-term. The Edinburgh Locality Improvement Plans and Locality Outcome Improvement Plan (LOIP) support a community engagement approach as being key to combatting inequality, and the LOIP emphasises strengthening community engagement and influence in subsequent planning processes.

The Edinburgh JSNA Input Locality Population Needs Report (May 2021) states that GP mental health workload represents around 30% of primary care workload. Social isolation and loneliness are recurrent themes. In the Edinburgh CLW Annual Report 2020-21, mental health (50%) and social isolation and loneliness (23%) were the top two reasons for referral requests. In March 2021 GPs across Edinburgh identified a number of areas which represented the recent increase in mental health presentations, including:

- anxiety and depression
- destabilisation of patients using substances
- distress due to money, employability and housing

- social isolation
- suicidal ideation, particularly in young men

There are a number of key areas of mental health support that have been identified as priorities across the range of evidence we reviewed although it should be noted that not all are necessarily within scope for this funding:

- Befriending services
- Counselling, CBT, anxiety management, particularly for those communities whose first language isn't English
- Peer support
- Perinatal support
- Support for carers
- Trauma support, particularly for those suffering from domestic abuse

There is also a need to consider evidence for specific communities of interest within Edinburgh, particularly those disproportionately affected by the pandemic. How to best support specific communities is discussed in more detail in the section below.

Example: LGBT+ communities

A recent report 'The experiences of UK LGBT+ communities during the COVID-19 pandemic' outlines that *"the COVID-19 pandemic has had a negative impact on the mental health of LGBT+ people living in the UK. This includes evidence of increased anxiety and depression, attributed to feelings of isolation and loneliness through the loss of safe, supportive, and identity-affirming peer-groups, communities and spaces."*

In Edinburgh, groups which had been running pre-covid have ceased to operate – for example of 9 community groups supported by LGBT Health and Wellbeing, only 4 are still operating, severely reducing the support available.

Please contact us at funding@evoc.org.uk with any additional evidence which you are aware of.

4: How we want to do this in Edinburgh

a) Outcomes

Rather than define new outcomes it is proposed that we select the most appropriate for this fund from a menu of the Thrive Outcomes and the Fund Outcomes proposed by Scottish Government. It is important not to choose too many, but instead select a small number which will help guide prioritisation and decision making for the fund.

Thrive Outcomes

Outcomes for citizens and people using mental health services & support:

- People have choice and control
- People are recovering, staying well and can live the life they want to lead
- People feel connected and have positive relationships

- People are living in settled accommodation of their choice where they feel safe and secure
- People have opportunities to learn, work and volunteer
- People receive good quality, person-centred help, care and support.

System and financial outcomes:

- Timely access to high quality person centred help and support when and where it is needed
- Reduced levels of mental and emotional distress
- Reduction in unplanned and crisis health and social care utilisation, including emergency response as well as institutional placements

Fund outcomes

The intended outcome of the Fund is to develop a culture of mental wellbeing and prevention within local communities and across Scotland with improved awareness of how we can all stay well and help ourselves and others.

The Fund seeks to contribute to the four key areas of focus from the Mental Health Transition and Recovery Plan:

- Promoting and supporting the conditions for good mental health and wellbeing at population level.
- Providing accessible signposting to help, advice and support.
- Providing a rapid and easily accessible response to those in distress.
- Ensuring safe, effective treatment and care of people living with mental illness.

The Fund also seeks to contribute to the following national outcomes from the National Performance Framework:

- We are healthy and active
- We will live in communities that are inclusive, empowered, resilient and safe
- We tackle poverty by sharing opportunities, wealth and power more equally

b) Which kinds of support are in scope?

Counselling for example is stated to be outside the scope of this funding and it will be important for Edinburgh to define the type of support we want to prioritise. E.g. Groups, peer support, befriending etc. This should be led by a consideration of the evidence of demand, need, and what has worked to date.

c) How to achieve a meaningful impact on inequality

There is a clear emphasis in the funding guidance on supporting those disproportionately impacted by the pandemic, which are of course the same communities disproportionately impacted by other socio economic factors and who experience worse health and wellbeing as a result. These communities may often be 'equalities groups'; the term 'inequalities' will be used in general and the emphasis will be placed on designing the fund in a way which tackles differential health outcomes in Edinburgh. Different communities need to be supported in different ways and it is important to consider whether a locality approach will ensure the best outcomes or whether a city wide approach

might be justified in some cases. It is anticipated that for certain communities there will be strong cases for inviting a city wide group to form, and in other cases the priority will be best upheld within localities. There is a tension between recognising key communities and protecting funding for these communities, and creating silos which fail to recognise intersectionality, and we will try to find the right balance.

Communities to be considered are:

- i) BAME communities
- ii) Carers
- iii) LGBTQI+ communities
- iv) Older people
- v) People affected by substance use
- vi) People affected by trauma or with a diagnosed mental health condition
- vii) People experiencing homelessness
- viii) People experiencing socio economic disadvantage
- ix) People who were on the shielding list for COVID-19
- x) People with a disability
- xi) Refugees and those with no recourse to public funds
- xii) Women (particularly with multiple and complex needs)

d) Focus on grassroots organisations

The guidance suggests that the majority of the fund should go to small and medium sized organisations with an income of up to £1m. This seems designed to maintain a focus on grassroots organisations, which is appropriate to the aims of the fund, although income is potentially a blunt measure. This will be disappointing to some organisations and we will need to decide if we provide any caveats to this guidance, particularly where upholding this might prevent a specific community from being appropriately supported.

5: Designing an accessible and collaborative application and decision making process with appropriate local governance

a) A proportionate and accessible application process

Grant processes can be very demanding on an organisation's resources, and this can result in smaller organisations finding them inaccessible. We would like to define a proportionate application process which focuses on providing the most relevant information to meeting need.

Proposal for discussion:

- A stream of funding for grants of up to £2.5k with minimal requirements in terms of written application.
- A stream of funding for grants between £2.5k and £10k with slightly more information required. For collaborative initiatives £10k would apply per organisation rather than to the whole proposal.
- Streams of funding (amounts tbc) for specific communities of interest for which the above structure was deemed not to be likely to achieve the best outcomes.

The process proposed below outlines a phased application process whereby brief expressions of interest are first requested, and then developed in discussion. The key information requested in the expression of interest would focus on a clear explanation of what is being proposed, evidence of need/demand, an outline of who would benefit and an outline of associated costs.

b) Collaborative decision making and appropriate local governance

In Edinburgh we are committed to devolving decision making to communities, and encouraging collaboration in place of competition. There are clear benefits to this approach and it is believed that communities being at the centre of these processes will achieve the best outcomes. It is important that we together decide what is necessary to make this a transparent and accountable process and agree to proceed only when these conditions can be met.

Recognising that there are different networks in existence across Edinburgh, and that there are tight timescales to be adhered to, this might result in a mixed model operating whereby for communities where conditions cannot be met a more traditional funding panel operates as a back-up. This is not ideal but potentially necessary to allow progress to be made in those communities where it is possible, and mitigate the risk of money not being spent (whereby it would be lost).

There will need to be an Edinburgh agreement on the minimum requirements for a collaborative in terms of necessary membership and governance to make the decision making appropriate for the level of funding in question, and also similar decisions will need to be taken as to the composition of community panels and city wide panels. The role of the collaborative will in time extend beyond fund allocation (to monitoring and accountability) and its governance will need to evolve accordingly. Much of this detail will be developed through the Edinburgh Wellbeing Pact.

In recognition of the difficulty in achieving genuine consensus, trained facilitators will be funded to ensure a constructive discussion where every member’s voice is heard and valued equally.

Proposal for discussion:

Date	Action
30 th November	Initial priorities for the fund established to guide expressions of interest.
30 th November	Process open to receive expressions of interest.
Mid-January	Deadline for expressions of interest.
Mid-January	Collaboratives are established, by locality or community of interest.
Mid-January	Collaboratives meet to discuss evidence of need, make further prioritisations, and recognise any gaps
Late January	Collaborative discussions with organisations expressing interest to further understand the proposals, ask for additional detail, discuss potential adjustments/partnerships in order to better meet identified need.
Early February	Facilitated collaborative sessions to see if consensus can be reached.
Mid- February	Community panel to consider proposals and recommend allocation on any decisions upon which consensus could not be reached. This panel should consist of key members of the community, but should not involve any organisations which have proposals being considered.
Early March	City wide panel meets to make any final decisions which couldn’t be resolved by stages outlined above.
Mid-March	All money has been allocated.

6: Defining how to report outcomes and understand the impact of the fund

Partners will be required to participate in a process to define a proportionate monitoring and evaluation model. Given the dependence on the decisions taken under points 1-4 and the different timescales involved this discussion will take place at a later date.

7: Document information

This draft is dated 15th November 2021 and has been prepared by EVOC guided by discussions with partners to date. The purpose of this document is to facilitate discussion at upcoming events and will be updated by the end of November 2021 in response to discussions.

Contact: funding@evoc.org.uk

Appendix 1: Evidence of need in Edinburgh – Community Mental Health and Wellbeing Fund is included as a separate document.

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