

Mansfield Community Champions Learning Report



Mansfield Community Champions

The Context

In January 2021, as the UK Government rolled out its mass immunisation campaign for coronavirus disease (COVID-19), the Community Champions fund, totalling over £23 million, was allocated to 60 councils and voluntary groups across England to support those most at risk from the virus and boost vaccine take up.

The vaccine rollout prioritised the most vulnerable, with a schedule primarily based on age. The focus for the Community Champions fund was on those from an ethnic minority background, older people, disabled people and those facing disadvantage. At the same time, the fund sought to encourage those individuals to stay safe, thereby reducing the impact of the virus on themselves and those around them.

Mansfield District Council (MDC) was awarded £188,000 from the Ministry of Housing, Communities and Local Government (MHCLG) to deliver the Community Champions project. MDC decided to reach people by working through a network of **'recognised and trusted voices'** in partnership with Mansfield CVS (MCVS), business leaders and influencers.



At a critical time in the pandemic, this project increased resources for both existing and new activities aimed at building trust and empowering at-risk groups to ‘**stay safe, stop the spread and save lives**’. The project worked through local ‘anchor’ advocate organisations and like many of the approaches taken in other areas in England, this approach has been particularly effective in the following ways:-

- 1 Supporting specific communities with poor vaccine uptake.
- 2 Translating health messages.
- 3 Developing and enhancing relationships with VCS and key partners.
- 4 Positive engagement with different communities.
- 5 Feeding in local intelligence to inform local planning/response.

Community Champions was developed as a national response to COVID-19 and focused on helping local areas build community support. Crucially, this also involved connecting into existing mainstream and other project related services – a local ‘**Mansfield Together**’ approach.

This evaluation is being written at a time when the UK Government has brought all COVID-19 restrictions in England to a close. Irrespective of whether further variants of the virus bring future challenges for both individuals and society, this review seeks to draw together the learning from this approach in Mansfield. It aims to demonstrate the value and effectiveness and provide a firm template for community development approaches to public health messaging which can be extended to tackling wider social and health and wellbeing disadvantages.

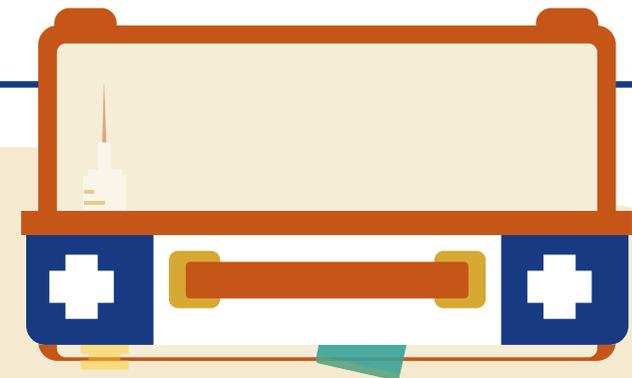
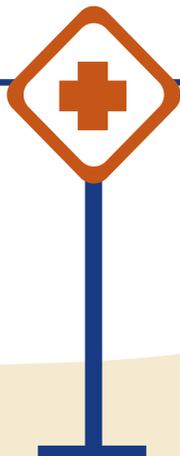


Methodology

The Community Champions funding was awarded to MDC in early 2021. MHCLG required formal reporting through to June 2021, however MDC/MCVS have continued to utilise the Community Champions approach particularly through its Community Champions Network, through to March 2022.

This evaluation was commissioned in late December 2021 and has taken the following approach:-

- ▶ **Management Review**
Review of the core management process and reporting in consultation with key stakeholders to build a composite view of community interaction. This has included observing Community Champions Network meetings alongside developing an understanding of the national Community Champions programme and learning from other key areas.
- ▶ **Qualitative Review**
Qualitative evidence was gathered through a series of interviews with key stakeholders across the priority community areas. This included developing a survey to gather the views of community champions. Consultation with relevant strategic partners was also carried out to build insight into the effectiveness of the project in supporting strategic themes and alignment with service development.
- ▶ **Budget Assessment**
Review of the project budget and an overall assessment of project resources.



Initial Aims and Focus

The Community Champions project aimed to reduce the impact of the pandemic on Mansfield communities, with a **focus on target areas and communities with longstanding health inequalities**. This was done through the promotion of Government recommendations, messaging and Public Health England guidance.



The project set out to:-

- *Build local engagement and confidence.*
- *Provide practical solutions to overcoming barriers, such as supporting those who are digitally excluded or need community transport.*
- *Be targeted using local 'live' intelligence.*
- *Exhibit good governance, collect evidence to measure progress and deliver value for money with robust programme management.*
- *Support and alleviate hardship to promote longer term positive economic impacts.*

MDC and MCVS agreed to deliver a **hub and spoke** model through an existing network of groups and organisations who support and influence some of the most vulnerable people in the community. This was informed by previous MCVS led work on the Sport England funded We Are Undefeatable project and NHS contracts. In these instances, statutory partners have come to appreciate that the most effective way to engage with the hardest to reach people is often through those that they know and recognise as a trusted voice.

At the outset, alongside targeting those residents in the areas identified with greatest need, a further focus was placed on working with those with disabilities and long term health conditions and those from Mansfield's BAME communities.

It was decided to work through the following channels in order to reach the most vulnerable people with health-related messages, helping to keep those individuals and their families safe:

- *25 Community Champions Third Sector Organisations*
- *15 Community Champions Influencers*
- *6 Community Champions Business Leaders*

In addition, this hub and spoke approach also aimed to bring additional resource to local voluntary and community sector groups to ensure that they could continue to deliver effectively through this difficult time.

25

COMMUNITY CHAMPIONS

*THIRD SECTOR
ORGANISATIONS*

15

COMMUNITY CHAMPIONS

INFLUENCERS

6

COMMUNITY CHAMPIONS

BUSINESS LEADERS

National Insight

Community champions or health champions were recognised nationally as active community members who draw on their local knowledge, skills and life experience to promote health and wellbeing or improve conditions in their local community. Historically, they have addressed barriers to engagement and improved connections between services and disadvantaged communities. The Community Champions fund was developed at the height of the pandemic to understand appropriate ways to prevent and control the spread of COVID-19. This included social isolation support, Test & Trace, social distancing, rumour dismantling and importantly vaccine take up and transportation.

With reference to the latter point, the 2014 WHO Report on Vaccine Hesitancy, highlighted the key determinants influencing vaccine hesitancy – *Confidence, Convenience and Complacency*.

These factors have been used in other parts of the country to shape their response to vaccine hesitancy – see the example on the next page which was shared by the North East & North Cumbria (NENC) Vaccine Equalities Board – Vaccine Inequalities Mapping.



The WHO Report on Vaccine Hesitancy provides a useful framework to describe the determinants of vaccine hesitancy. They describe three main factors influencing vaccine hesitancy - *Confidence, Complacency and Convenience*. NENC approaches have been mapped to these.

Work in the North East went on to identify four key areas for addressing vaccine inequality:-

Better Information for communities and professionals (based on insight) – enabling people to make informed decisions via the provision of appropriate and targeted information tailored to meet the needs of different populations.

Increasing Accessibility – taking the vaccine to people. Removing common barriers (including location, booking of appointments and transport) and providing clinics in community venues enhanced by support and information to make vaccine take up as easy as possible.

Empowering Communities – asset based, community champion approaches. Mobilising communities to support each other to promote the importance of the vaccine using local people as a powerful trusted voice.

Partnership working and collaboration – Multi agency partnership working to engage the hardest to reach using existing relationships to build trust and confidence in the vaccine programme and collaborate to share good practice and resources.

National learning highlighted the following success factors:-



Value in community voice – ensure this is central to local plans.



Must be able to feed in local intelligence.



Work through existing VCS groups with trusted relationships – the local authority is not always best placed to deliver.



Provide a legacy beyond COVID-19 – engagement and relationships with communities and targeted groups.



Strengthened partnerships.

The following challenges have also been identified:-

These national findings went onto conclude that **Community Champions** can be key connectors in communities but these roles do not operate in isolation and need to be embedded in effective community engagement and health and wellbeing strategies.

VCS funding has been key – sustainability issues otherwise

COVID-19 is a 'teachable moment' – can it be translated to other health promotion messages?

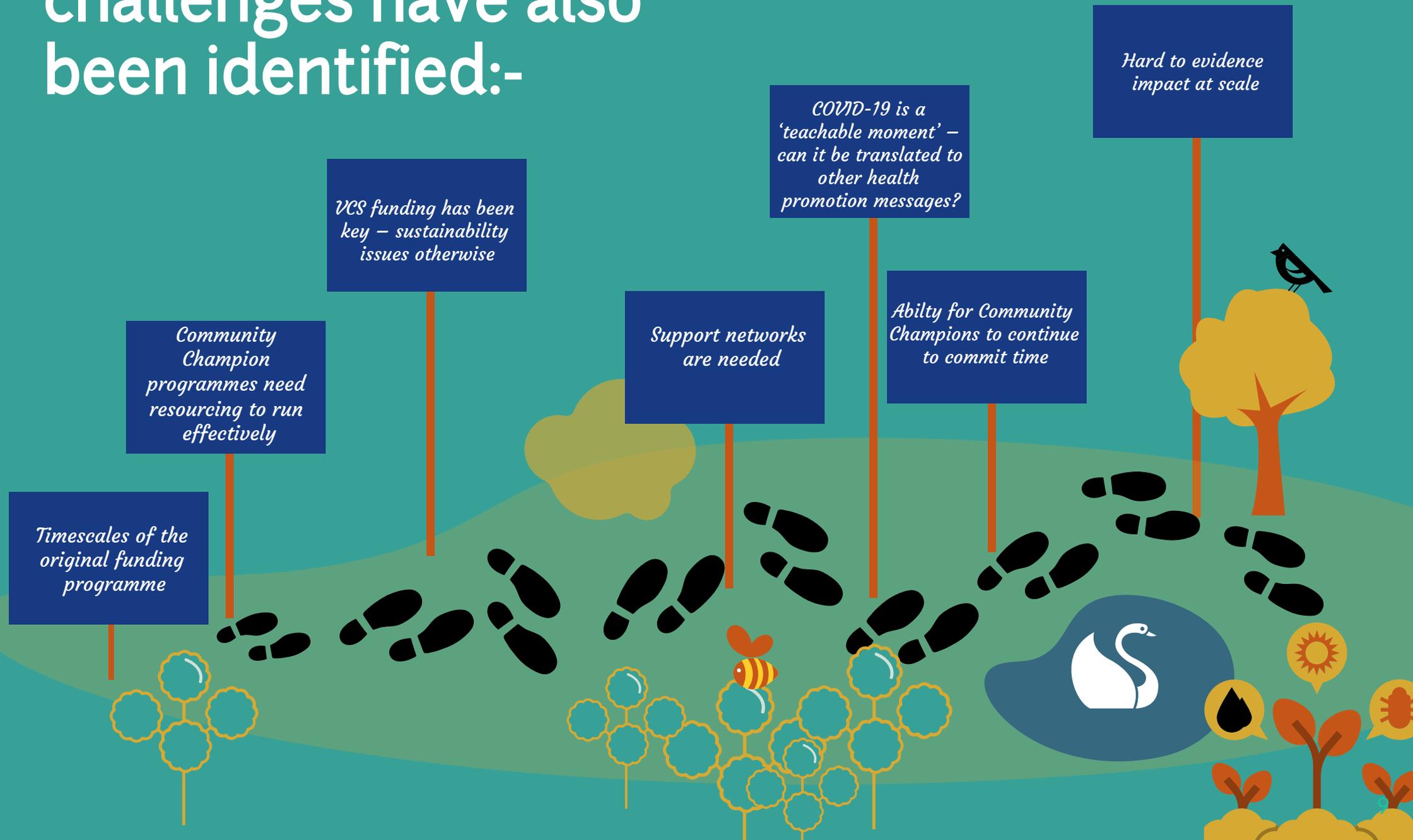
Hard to evidence impact at scale

Community Champion programmes need resourcing to run effectively

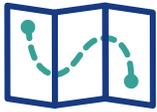
Support networks are needed

Ability for Community Champions to continue to commit time

Timescales of the original funding programme



The report '**Community Champions: Development, Training and Strategic Implications for Recovery from Covid – 19**' by Dr Atiya Kamal, Birmingham City University/LSE provided a range of insights into successful Principles of Community Engagement, which have been summarised below:-



Neighbourhood Knowledge - of communities and broader neighbourhood provision.



Effective Communications - face to face and virtual contact, understanding of debates and no topic off limit.



Gathering Insight - practical support to address physical challenges and understanding invisible barriers.

Community Empowerment - autonomy to recruit diverse trusted champions, effective coordination and amplifying the effect through inter-connected support/Champions.

The report went on to highlight the following success factors:-

The pre-existing relational trust between Community Champions and residents facilitates information exchange which has increased vaccination uptake.

The flexibility and decentralisation of the Community Champions programme increased trust and generated local insights faster than local authorities could have achieved.

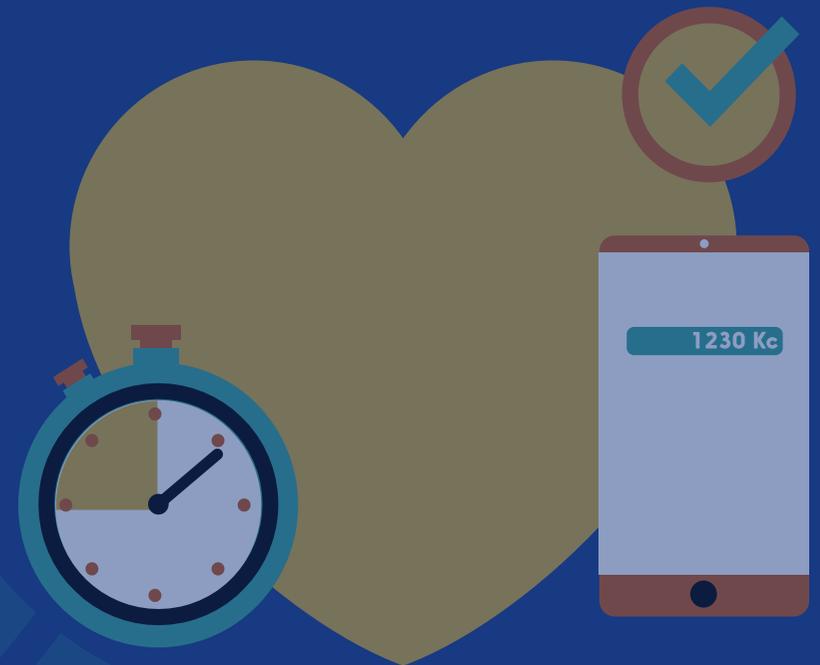
Flexibility of funding was important - having a clear aim but not a prescribed route.

Community Champions created a sense of agency by providing practical information with guidance ...and created a space for residents' concerns to be heard and addressed.



The report went on to conclude that the Community Champions scheme has initiated the process of 'levelling up' by empowering communities to support the delivery of local strategic activities and creating an opportunity for local authorities and community organisations to work together.

It went onto point out the importance of continued funding and support as this model has the potential to support a wide range of public health and social cohesion initiatives.



These conclusions align with those from the **Community Champions Rapid Evidence Review**, pulled together by OHID **Healthy Communities Programme**, which identified:-

- Community champion approaches have high relevance to reducing health inequalities, whether an emergency, or longer-term prevention. This is supported by international and UK evidence.
- Evidence shows that champions are ‘connectors’ who use their social networks and life experience to reach others and promote health.
- The champion approach can be applied flexibly in different communities –no single model stands out.
- Informal nature of the role is important –community-led volunteering where people live and work.
- Evidence of mass mobilisation and working in partnership with disadvantaged groups.
- Recruiting from communities who are disproportionately affected by COVID-19 could help to reduce barriers to engagement and support uptake of services. Champions can also tackle stigma.
- Volunteers with credibility and connections in a community are really valuable. But champion roles do not operate in isolation and champion programmes need to be embedded in effective community engagement strategies.

See Appendix 1 for more details.

This review went onto identify the following elements to building successful Community Champion schemes:-

Recruitment based on recognising that people bring life experience, knowledge about their communities and connections

Having training that builds skills and confidence as well as knowledge about health

Having a local scheme or organisation that can provide support, coordinate activity and make sure champions can connect to other champions.

Good community engagement as the foundation – listening to champions and acting on community priorities

Time to build trust and build relationships

Ongoing partnership working between public health, voluntary and community organisations and communities.



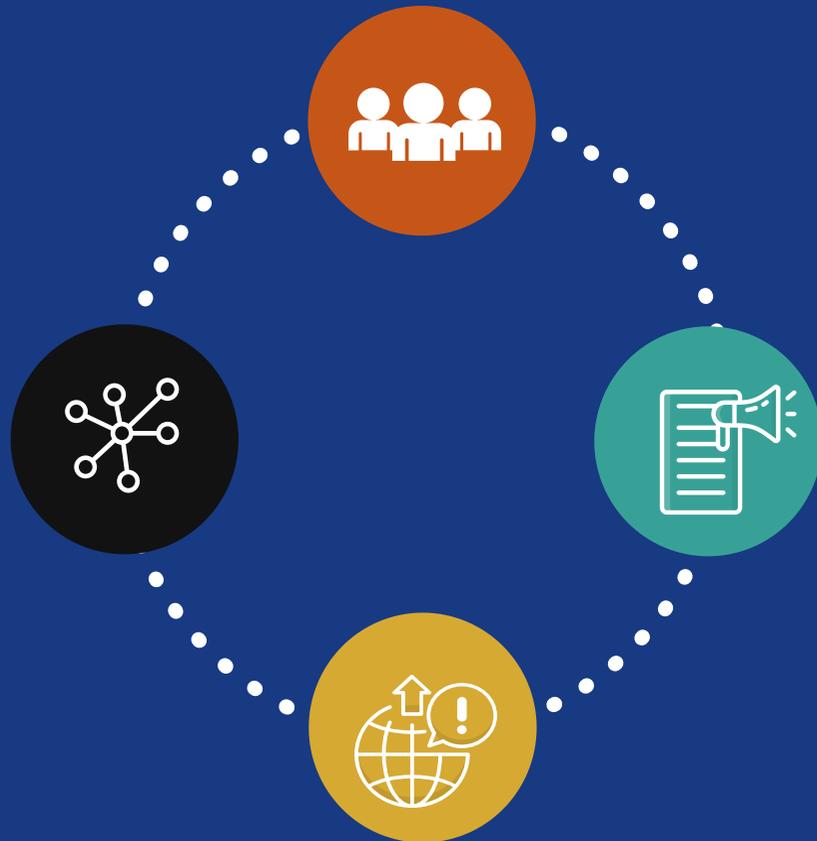


**Kingsway Hall Lunch Club, Forest
Town, Mansfield - supported through
the Community Champions project.**

Community Champions – Mansfield Together Model

Governance

MDC and MCVS entered into a partnership agreement to cooperate on the delivery of the Community Champions project. MDC acted as the Lead Partner and Accountable Body responsible for submitting progress reports to MHCLG. MCVS acted as the delivery partner on a range of key activities, working closely across the VCS in the district.



PROJECT WORKING GROUP

This included senior staff with communications, community engagement and cultural services expertise from both MDC and MCVS.

LOCAL REPORTING

MDC and MCVS ensured that Councillors and Trustees were fully engaged in the project. Local anchor organisations provided regular feedback on key activities.

NATIONAL REPORTING

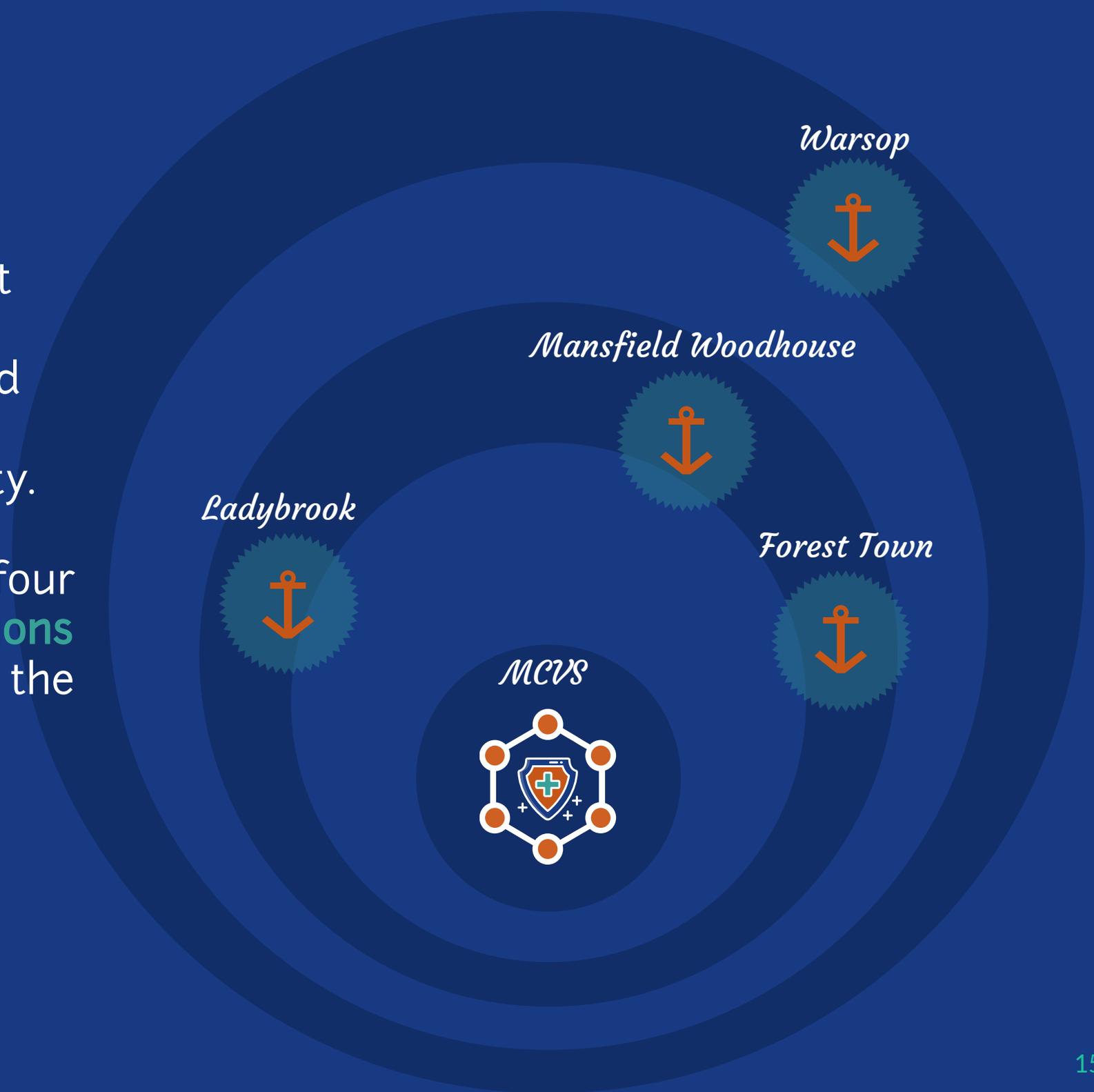
Reports were submitted to MHCLG from April - June '21 on a monthly basis, with a final report covering the overall outcomes and impact - sent November.

COMMUNITY GOVERNANCE

The Community Champions network provided a channel for two-way feedback for all stakeholders to both inform and be informed.

Anchor Organisations

The Community Champions project involved a central hub of coordinated support via MCVS into the community. Direct resources were used to link four **Anchor Organisations** together covering the key areas of Mansfield and District.



The anchor organisations - **Ladybrook Enterprises Ltd, Kingsway Hall Management Trust, Mansfield Woodhouse Community Development Group and Vibrant Warsop CIC** - are existing community assets providing a range of outreach and engagement services across their local areas. Their activities include:-

- the coordination of local volunteering,
- organising health and wellbeing community support, including 1-2-1 and group based services,
- links to employment and education outreach initiatives,
- provision to address social isolation and financial resilience,
- domestic support, befriending and social care.

The anchor organisations have established links to MCVS and MDC, working together across the breadth of thematic groups focusing on community renewal. They were involved in coordinating early stage support at the start of the pandemic in 2020 (via Fielding the Need - National Lottery COVID-19 Emergency Funding) and from 2019-2021 through the Sport England funded We Are Undefeatable programme (aiming to increase the level of physical activity for people with long term health conditions).

The project budget for Community Champions prioritised an initial tranche of funding to directly support the 'operational re-opening' of the anchor organisations - allowing them to establish the necessary safe environment and stabilised staff resourcing to fully open and engage as a partnership across the Mansfield area. **See Appendix 2** for details on each anchor organisation and a summary of their involvement delivery Community Champions activity.

"We have become better at learning from each other, sharing successes, resources; working together across Mansfield we can add tremendous value."



Community Champions - Wider Support

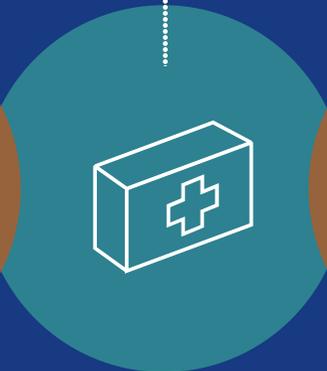
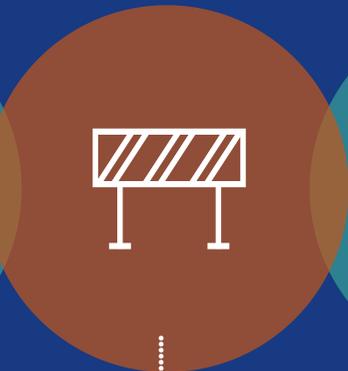
SUPPORT TO REFUGEES

Community Champions facilitated the opportunity for Syrian refugees in Mansfield to access health information in Arabic.



SUBSTANCE MISUSE & HOMELESSNESS SUPPORT

Work with partners focusing on those affected by substance misuse were supported through Community Champions. In addition, support was also provided by working with the Street Homeless Team.



SUPPORT TO NON-ENGLISH SPEAKING COMMUNITIES

Whilst significant efforts were made to support non-English speaking communities with translated information, vaccine take-up remains low particularly in Eastern European communities and this continues to be an area of focus.



SUPPORT TO DISABLED PEOPLE

This funding provided the opportunity to both map and co-design support that addresses the barriers for disabled people and people who are neurodiverse. See Appendix 3 for details of disability mapping.

HEALTH & WELLBEING SUPPORT

Community Champions enabled closer partnership working involving Social Prescribing Link Workers and other local services including Age UK. This has developed in to pop-up health clinics which are now operating in localities to encourage vaccine take-up, address health issues and GP registration.

COMMUNITY TRANSPORT SUPPORT

As transport to access health services was a recognised barrier, Community Champions enabled travel bursaries to help access relevant support quickly. See Appendix 4 for details of community transport support.

Network and Communications

A key element of the Mansfield Together model has been the development of a focused Community Champions Network which brought together all stakeholders – MDC, MCVS, Nottingham and Nottinghamshire CCG/ICS, individual anchor organisations and other voluntary and community sector organisations.

The monthly online meeting took the form of sharing current information on Vaccine Take-up, Testing, Staying Safe, other Health and Wellbeing activities. Participation levels remained consistently high throughout, with all stakeholders commenting positively on the success of this focused opportunity to share information, including with the local Executive Mayor and councillors.

Wider communications included a dedicated newsletter, flyers and extensive use of social media to ensure timely messaging.

For health partners, the view is that this approach was very positive and proactive, building on the established relationship with MCVS being seen as **'the go to'**, with a reach into communities that the NHS does not have. This partnership working enabled agreed messaging to be shared as quickly as possible, in many instances translated into a range of languages, and **a direct line of feedback from local communities.**



"Participation levels remained consistently high throughout, with all stakeholders commenting positively on the success of this focused opportunity..."



Approach to Budget and Project Management

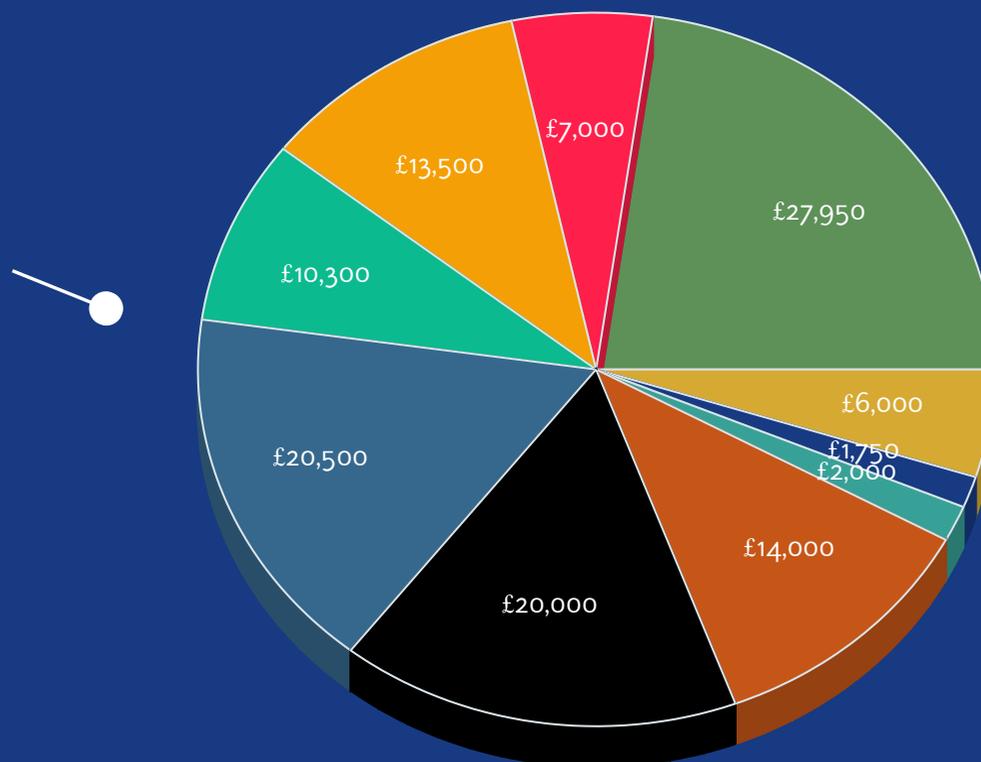
As can be seen below, **over half of the funding for Community Champions was spent directly on recruiting, training and delivering services**. In addition, just under a quarter of the funding was spent on communications activities, with the balance of funding supporting infrastructure and project management. Project management was provided by MCVS staff, working closely with colleagues at MDC and individual anchor organisations and wider stakeholders.

A detailed Project Schedule was developed, with an Action log and RAID log (Risks; Assumptions: Issues and Dependencies).

Total Budget £188,000

Area	Spend
Anchor Organisations	£65,000
CC Training	£6,000
Volunteer Recruitment	£1,750
Conversation Clubs	£2,000
Co-design Workshops	£14,000
Digital Support - Capital	£20,000
Communications incl Digital	£20,500
Community Transport *	£10,300
Project Tracking & Evaluation	£13,500
Barrier Removal	£7,000
Project Mgt/O'heads	£27,950

Budgeted Spend



*Includes pilot set-up costs.

Project Timeline

JUNE '21



JULY



AUGUST



MARCH '22



1. STEP ONE

Partnership planning, development and business case submission.

2. STEP TWO

Rapid deployment of funding to anchor organisations & initiation of key communication channels.

3. STEP THREE

Ongoing service planning, delivery and monitoring: vaccine take-up, testing and 'stay safe' messaging.

4. STEP FOUR

Network review, future sustainability planning and overall evaluation.

'Coffee & Chat', Ladybrook Community Centre, Mansfield - one of the 'Anchor Organisations', funded by the Community Champions Project.



Conclusions and Legacy

Gathering the Key Insights

Insights from the Community Champions evaluation have been grouped into 8 key areas as set out below. These will be used to inform wider legacy planning with MDC, MCVS and their partners. In addition, health partners have asked MCVS to share their good practice by extending Community Champions working into a Mid-Notts footprint, covering Ashfield and Newark and Sherwood.



*Strategic
Influencing*



Central Hub



*Making
Funding Go
Further*



*Information
Sharing*



*Training &
Development*



*Anchor
Organisations*



Communications



*Addressing Other
Barriers*

Strategic Influencing

Community Champions has demonstrated that partnership working in Mansfield is in a healthy position which can be built upon for future funding opportunities. Key learning points that have emerged are set out below.



Learning Points

- Engage senior leaders - health, local authority - so that they are aware of the planned activity and focus.
- Involve anchor organisations/local delivery partners in joined up planning from an early stage - problem solve together.
- Pay attention to timing and prioritisation of different support elements e.g. community transport may need to be planned in from the outset.
- Ensure VCS is involved in wider ‘emergency planning’ in order to learn from the pandemic to date and be prepared to respond quickly in the future.



Central Hub

M CVS has demonstrated that the 'hub and spoke' model has worked effectively and has ensured timely communication to and from local communities. This validates the strategic decision by MDC to devolve the Community Champion funding to a local trusted infrastructure organisation.

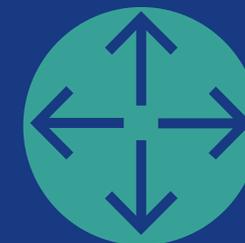


Learning Points

- Ensure efficient coordination at an infrastructure level to demonstrate expertise and value to grass roots community organisations.
- Ensure flexibility and responsiveness to local community organisations.
- Ensure effective project management and governance are in place throughout the timeframe.
- A centralised hub model enables consistent clear communications.



Making Funding Go Further



The flexibility provided by the Community Champions funding has enabled MCVS to maximise the value of the funding for local residents and community organisations. Small amounts of funding have resulted in significant savings 'upstream' e.g. community transport, opportunity to open up community facilities safely.

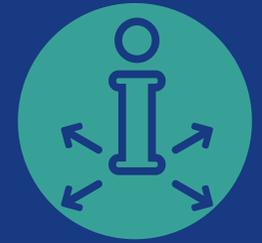
Learning Points

- Ensure efficient coordination at an infrastructure level to demonstrate expertise and value to grass roots community organisations.
- Recognising and working with established 'trusted voices' community assets thus avoiding duplication or displacing existing outreach activities.
- Ensure flexibility and responsiveness to local community organisations.
- Ensure flexibility and responsiveness to local statutory partners.



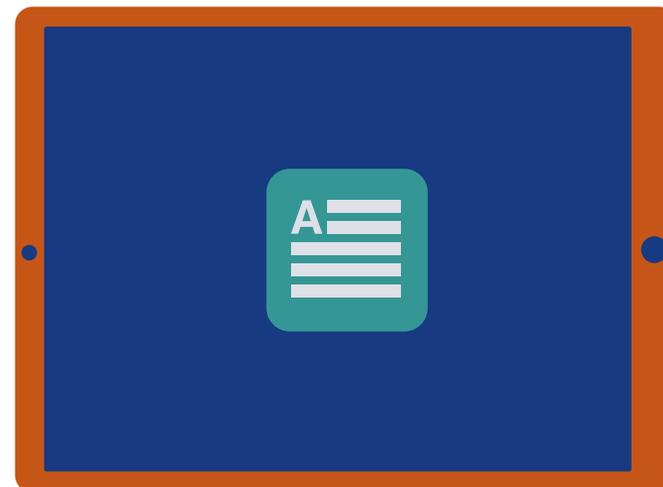
Information Sharing

Historically information sharing has proved challenging between partners. In this instance the pandemic removed some of the barriers to information sharing and whilst it is appreciated that this situation may change, it is hoped that the spirit of cooperation can be retained. This is particularly important for supporting Joined Up Care services and the emerging Levelling-Up Strategy.

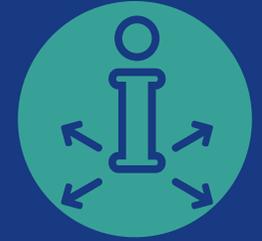


Learning Points

- Establish what data sets are able to be accessed and shared.
- Facilitating the exchange of key local information across community organisations in a joined-up approach - helping to keep all organisations up to date with shared best practice.
- Ensure timely collection of local data and insight to inform service delivery planning and strengthen the business case for further investment from devolved funding streams.



Training and Development



Community Champions provided the opportunity to co-design workshops and to train Volunteer Champions in a number of key skills such as first aid and food safety. This much needed investment in volunteer training needs to be replicated in future funding bids.

Learning Points

- Consider any training needs for community based staff and volunteers - safeguarding, volunteer development.
- Consider the need to plan for keeping training current, given workforce and volunteer churn.
- Take the opportunity to engage in training involving people from a variety of organisations and volunteering backgrounds in order to build relationships and share good practice.



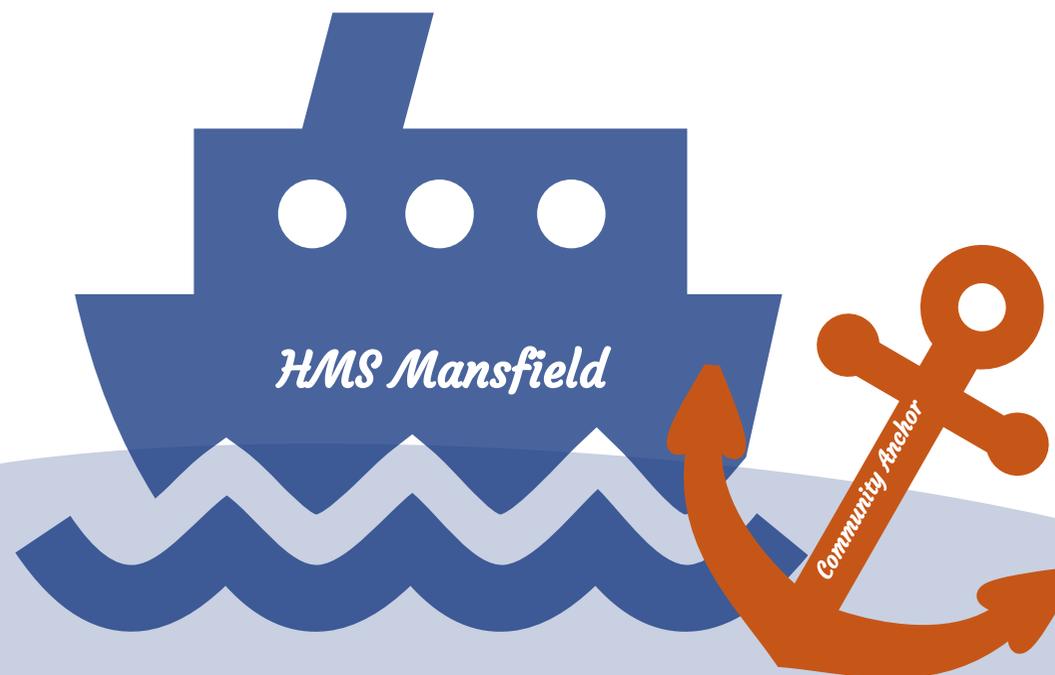
Anchor Organisations



The decision to use existing 'Trusted Voices' by working through anchor organisations has proved to be the right one and provides a well developed model for future working. This has been demonstrated through the effective use of resources and the alignment with important outreach services.

Learning Points

- Work with existing community development organisations or community leaders who can advocate health and wellbeing messages across their local areas.
- Share experience - work through an effective network that involves joined up planning, sharing of resources and sharing learning. Visit other organisations to learn from their good practice e.g. health and wellbeing and/or care expertise to enhance existing group support.



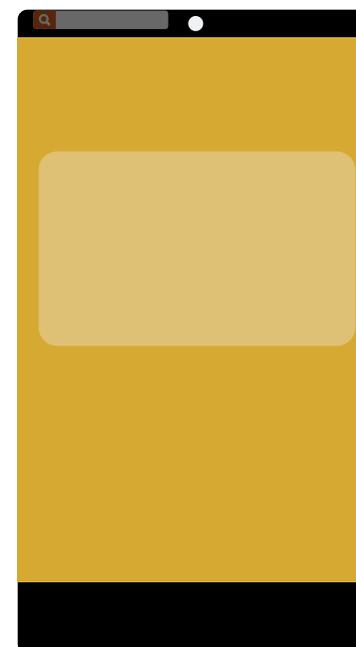
Communications

Timely and effective communications have been vital to the success of the Community Champions work in Mansfield. This has been achieved through effective partnership working at both an individual and network level.



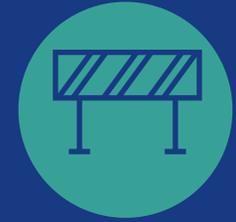
Learning Points

- Central communications key - consistent and timely messaging.
- Plan communications and reporting from the outset - audiences, format.
- Consider channels - network, newsletters, social media and translation requirements.
- Important to provide current information or signpost where to find it.
- Recognise that it takes time to change mindsets.



Addressing Other Barriers

Throughout the course of the Community Champions work MDC, MCVS and the network have recognised the barriers to saying safe, vaccine take-up and accessing testing facilities alongside wider health, economic and social wellbeing inequalities. This recognition has resulted in a number of practical solutions which can be consolidated into existing and future services.



Learning Points

- Consider and plan for wider access factors e.g. community transport.
- Recognise wider health, social and economic challenges impacting on individuals lives.
- Consider specific community groups with access, language or cultural barriers.
- Recognise the specific barriers for disabled people, effectively mapping needs to appropriate service support.



Hearing Clinic, Mansfield Woodhouse CDG, one of the Anchor Organisations offering a range of outreach services, supported by Community Champions funding.



Appendix 1

Community Champions Rapid Evidence Review

Current case studies

1. Harrow—raising awareness amongst BAME and Eastern European communities; increasing vaccine uptake amongst Ghanaians
2. Arun—building trust and sharing accurate information with Central and Eastern European (CEE) and Gypsy, Roma & Traveller (GRT) communities
3. Gateshead—building capacity across the system and enabling VCSE and communities to find practical solutions
4. Middlesbrough—community champions network to support VCS and communities
5. Manchester—achieving health equity through building resilience, health literacy and potential for economic growth amongst at risk groups
6. Bradford & District –increasing knowledge and awareness in local BAME and CEE communities
7. Hyndburn—strengthening the local community hub and VCSE networks
8. Rochdale—community champions as part of a whole system approach to reducing health inequalities
9. Slough—reducing social isolation and promoting wellbeing amongst people unable to leave their homes
10. Kensington, Chelsea & Westminster—strengthening and supplementing an existing community champions programme via a new, lighter-touch COVID-focused programme.

Champions Show the Way (Bradford) –key learning

- Successfully delivered for 10 years and now recurrently funded by CCG. In 2018/19 148 champions delivered 74 activities engaged 1716 individuals. 98.5% now doing more to improve H&WB.
- Delivery needs to be co-produced with champions, and their drive and passion needs to be acknowledged and harnessed.
- Champions need to be supported to deliver their roles in a safe and effective way. This includes training & development, empowerment, resources (room hire, equipment, printed/digital resources, expenses), networking, logistics/admin.
- Building up a programme takes time and willingness to try new things. Not everything you try will work and that's okay, as long as you have contingencies in place and expectations are managed accordingly.
- Recruitment can be time-consuming at first but, once you have the ball rolling, the process often becomes self-sustaining(i.e. through word of mouth) with less input needed at a programme level. Build partnerships with other key organisations and stakeholders that can support the work and help you to meet the needs of specific groups.
- Have a communications plan in place to ensure that you're reaching the people that you need to. Know your target audience(s), tailor your messages accordingly (using formats/channels that they are more likely to engage with) and use insight from local communities to help inform and co-design your approach.

Appendix 1

Community Champions Rapid Evidence Review

Key messages from talking to champions in Birmingham

Feedback from Birmingham Community Champions in Sept 2021, with the aim of presenting findings of rapid review and discussing with champions to get thoughts, feedback and perspectives.

- Champions need to be credible and identifiable to local communities, i.e. “someone like me”
- Narrative and stories are so important in the work of champions, allowing us to capture personal experiences, perspectives and insights (i.e. what impact has COVID had on me and why) and use them to connect with others
- Not a new approach -community champions have been around for a LONG time and used to address all kinds of public health issues BUT approach needs to be valued and resourced appropriately to get the most out of what champions can offer (e.g. passion, expertise, knowledge)
- Language is important and consistency of language is key. Be clear on the principles that underpin your approach and make sure the language used matches.
- Vaccine hesitancy often misunderstood –much of the time it’s as much an issue of access / logistics as it is genuine hesitancy. For those who do have concerns, we need to listen and understand. Labelling as ‘hesitant’ can be unhelpful/counterproductive and end up marginalising people further.

EXAMPLE: Population Group - Ethnic Minorities

Local insight has identified the following barriers and motivators for this population group

Barriers



Motivators





The Mansfield Community Champions project enabled a group of anchor organisations to offer a range of outreach services.

Appendix 2

Ladybrook Enterprises Ltd

Ladybrook Enterprises Ltd is a community charity located at Ladybrook Community Centre, located close to Mansfield town centre. As with the other anchor organisations, Ladybrook Enterprises is a community asset that has played a major role in coordinating community outreach and local service support in partnership with MCVS, MDC, the NHS and other local organisations. At the community centre, service and support areas include social events, exercise classes, health and wellbeing groups, domestic and social care support and counselling. The centre also coordinates volunteering across the local area.

Community Champions funding provided a catalyst to get the centre operational after the initial impact of the pandemic - allowing Ladybrook Enterprises to open its core service support safely. A key aspect of additional project funded support was the installation of a Community Champions phone line - offering advice, guidance and information on vaccination, transport and testing developments.

Ladybrook Enterprises is seen as a 'trusted voice' for its local community, with a hub of support services and an experienced management team that works closely with MCVS, MDC, the NHS and other key organisations to influence and shape community action. As part of the Community Champions network, Ladybrook Enterprises provided key feedback on vaccine take-up, helped address issues arising from misinformation and supported other anchor organisations in the planning and provision of local services.

Kingsway Hall Management Trust

Kingsway Hall Management Trust (KHMT), operating from Kingsway Hall in Forest Town, provides facilities within its community centre and acts as a hub for local services across the area. The centre, which has played a key role in community support delivery, was affected by the impact of the pandemic - with key staff being furloughed and health and safety issues relating to safe opening impacting on the Trust's resources.

Identified as local asset, KHMT was referenced as one of the anchor organisations in the original business case made by MDC when applying for Community Champions funding. The organisation has played a major role within the Community Champions network and working with the other anchor organisations to coordinate support and share learning.

Project funding was used to support the return from furlough of key staff and resources to ensure that health and safety measures were in place, including the disinfection of rooms and furniture.

Community transport, 'stay safe' public health key communications and testing facility details were shared by KHMT within the centre and also across the local area. Crucially the centre was able to re-start a number of activities, including a regular lunch club and exercise classes, which enabled further engagement and awareness raising of vaccination information and support. Project funding provided bursaries to enable these activities to build momentum back up to a sustainable level.

Mansfield Woodhouse CDG

Established in 1995, the Mansfield Woodhouse Community Development Group (MWCDG) are a longstanding community asset that has been involved in a range of community regeneration initiatives over the last 27 years.

MWCDG essentially offers a central hub of support from its community centre and then 'umbrella' coverage across the Mansfield Woodhouse area. The Group works closely with MCVS to coordinate activity, including outreach services and volunteering.

Community Champions funding enabled MWCDG to return from a furloughed and partial closure state during the first stage of COVID-19 and open up its facilities to local people and local outreach services. A key aspect of the central role is the coordination of a number of health, wellbeing, social care and education outreach 'drop-in' surgeries. Project funding quickly enabled these service activities to re-start.

Playing an active role in the regular network meetings, vaccination, public health and safety and testing facilities were communicated within MWCDG central hub and also across the local area - with flyers and leaflets. MWCDG's focus on coordinating local service provision has helped address social isolation and present the local community with factual and timely information about the pandemic, including community transport to help with vaccine take-up.

Vibrant Warsop CIC

Vibrant Warsop CIC works across the northern part of Mansfield District. The organisation coordinates a range of local support services from health and wellbeing outreach and volunteering, through to maintaining a directory of local initiatives for young people in the area.

The Community Champions funding enabled the organisation to return from furlough and to establish live connections with other community organisations in order to support local residents. Good practice was shared across anchor organisations and wider stakeholders.

Working as part of the network of Community Champions, coordinated centrally by MCVS, Vibrant Warsop have been pro-actively disseminating key information on vaccine sites, community transport provision and testing facilities. Vibrant Warsop were part of a coordinated effort in addressing misinformation: ensuring relevant and accurate information about the benefits of the vaccine, its availability and testing arrangements were effectively disseminated across the area.

Whilst not directly funded by Community Champions project funding, the focus enabled Vibrant Warsop to continue their work to establish a physical base at the Methodist church in the centre of the community and to widen their reach to different parts of the community.

Appendix 3

Disability Mapping

MCVS utilised Community Champions funding to explore Disabled peoples' experience during the pandemic and to establish what services are offered to disabled people, carers, family members, professionals and anyone else involved in supporting disabled people to live independently within Mansfield. This was carried out via surveys and interviews with a range of organisations working with Disabled people.

The Cabinet Office Disability Unit (ODI) reported:-

“COVID-19 has created additional barriers for disabled participants. In some cases, participants have felt an extra burden of social responsibility in protecting themselves and their own health, while the perception is that some non-disabled people have not adhered to COVID-19 rules in public places, with scant regard for anyone else at all, let alone those with impairments and underlying health conditions. Disabled people have been regularly confronted with an array of barriers and socially imposed limitations over and above those experienced by non-disabled people. These limitations have sometimes been material, as in the case of physical walls, or spatial, such as the ability to observe social distancing rules or to obtain necessities.”

This mapping process involved:-

- Disability Notts
- The Cabinet Office Disability Unit
- Simply Sensory
- Unison
- Disability Rights UK
- World Health Organisation Regional Office for Europe.

MCVS contacted 83 organisations at a local, regional and national level and then followed this with meetings directly with disabled people, carers and anyone supporting members of this group to share their experiences during the pandemic.

This has resulted in a much-broadened awareness of support available, with details from an additional 64 organisations added to the MCVS website. Profile listings cover:-

- Communication e.g.: Printed, (font size and languages), Telephone, Relay UK, Internet, QR Codes, Accessible website.
- Eligibility criteria, Time, and days open, any cost associated with the services.
- Staff training attended e.g.: Disability Equality, Social model of disability, Dementia friendly, BSL, Autism, Neuro diversity friendly.
- Premises (if any) Access needs e.g.: Parking / Toilets, Sensory.
- Disability Confident Employer e.g.: Committed, Employer, Leader.
- A link to the DWP database of all Disability Confident Employers in Nottinghamshire.

MCVS has pulled together a summary presentation and materials which will be available to all on its website. These conclude that Disabled peoples' quality of life throughout COVID-19 were significantly impacted. Issues encountered include:-

- Closure of Toilet Provision.
- Appointments cancelled, inaccessible vaccination centres.
- Accessible parking spaces and public seating removed.
- Supermarket scooters removed.
- Removal of specific times to access services.
- Carers refused access, including accompanying when shopping.
- Pavement widening using Blue badge parking spaces
- Personal Assistants left because social care companies were offering higher wages.
- Large turnover of carers – concerns re trust and safety
- Anxiety around carers transmitting the virus.

Detailed research findings include feedback from the following organisations.

Disability Notts - The information is based on service user virtual consultation event, survey monkey questionnaire and case work feedback during lockdowns.

- 94% of the participants reported they had been affected by COVID-19 moderately to drastically
- Clear impact both physically and mentally
- The questionnaire results further highlighted the need to keep people connected to improve health and wellbeing

In face to face meetings held in November and December 2021, participants overall felt that people with disabilities and /or chronic long term health conditions were being left behind and it would take an enormous effort by Government and Statuary services to rectify this.



"Attitudes towards people with disabilities have declined dramatically."

Disability Mapping - Case Study 1

This individual is a non-driver in receipt of Welfare Benefits, including lower rate of mobility. Rural bus service cutbacks across the County resulted in infrequent access to transport for appointments such as health, leisure activities, shopping and banking. This individual used his mobility allowance for taxis, however the cost of these was more than the amount he received, which in turn impacts on his overall household budget. The current increase in the cost of living, fuel prices, inflation is only exacerbating this situation.

Disability Mapping - Case Study 2

During the pandemic, the health-related review appointments for this individual were cancelled and /or postponed. They were important but not classed as urgent emergencies. Therefore, on this individual's PIP form, it looked as if she did not need that level of healthcare input. There is currently a major back log in the NHS for all appointments, with many service users waiting for hip/knee replacement.

Disability Mapping - Case Study 3

This individual has interstitial-cystitis, also known as Bladder Pain Syndrome.

'Outpatient appointments have been cancelled so my treatment is on hold. My treatment allows me to at least experience a little bit of relief. I imagine there will now be a substantial back log in medical treatment. I don't in any way mean to sound dismissive, but we all need to understand there are many more medical conditions to fight, other than COVID-19. COVID has made an already difficult situation nearly impossible. Public bathrooms remain unopened leaving those with bladder and bowel conditions housebound..... When lockdown was lifted I was looking forward to living, shopping, going to the cinema, taking my children out. But anywhere I go needs to have bathroom access. Now I am unsure whether they will be opened, many are closed, so I am effectively locked down again.'

Simply Sensory - provide home tuition for children and young adults with complex medical and health needs who are unable to attend school for a variety of reasons. This supports rehabilitation and transition back into school and also provide education for learners who are EOTAS (educated other than at school). For this organisation, working with some of the most vulnerable young people, it has been a constant battle to get advice, support, PPE, Covid tests and equipment.

The organisation reported on how exhausting it has been, with ever changing guidance and no financial or advisory support. They report that their learners have been forgotten, at home shielding for two years which has put a strain on their families and a huge impact on the young learners in terms of physical and mental health. Most support has been cut as healthcare professionals were unable to visit, leaving families to do everything.

Disability Rights UK:
According to data from the Office of National Statistics, 59% of all deaths have been those of Disabled people.

Unison – Conference 2021 Virtual Special Local Government Service Group Conference 8.4.21

- Conference notes that a UNISON survey of disabled members working from home during Covid-19, including local government workers, found that 53% did not receive any reasonable adjustments from their employer to help them to overcome the barriers they faced as a disabled person working from home.
- Only 5% had help from Access to Work, the flagship government scheme which helps identify and fund adjustments. 41% did not know about Access to Work and 23% did not think Access to Work could help with working from home.
- Many local government workers struggled to get the adjustments they needed at home. Some had to use ironing boards instead of adjustable desks, had to buy their own monitors and headsets, were unable to access virtual meetings and thus isolated from the rest of their colleagues, or had to manage the pain caused by unsuitable dining room chairs.
- Long Covid has also affected disabled workers who are being chased through punitive sickness absence procedures by their employers. Some previously non-disabled workers may now be covered by the Equality Act 2010 which gives a right to reasonable adjustments to people whose symptoms have a significant impact on normal daily activities and have lasted or are likely to last 12 months or more. However, conference does not have confidence that all local government managers will accept this duty.

Appendix 4

Community Transport - An Essential Element

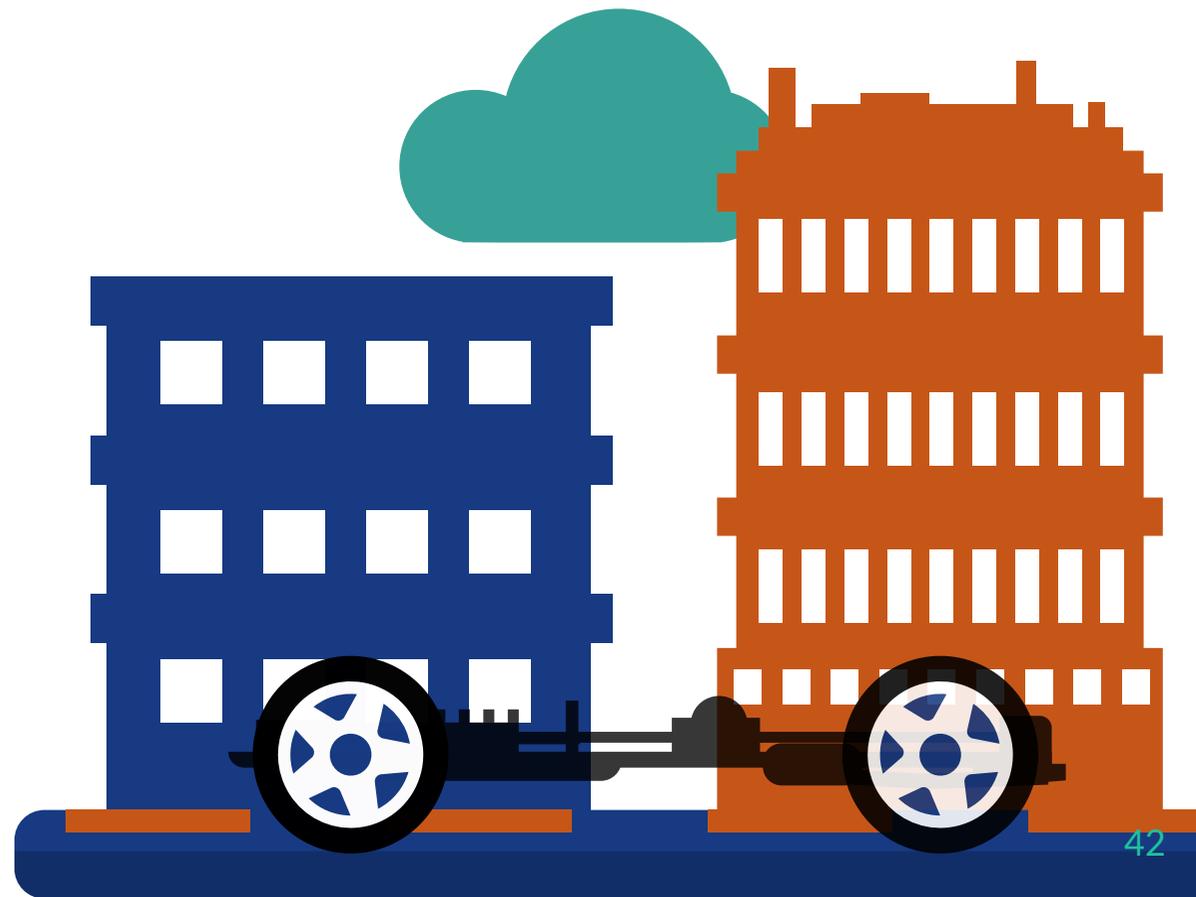
The issue of access to vaccination centres for vulnerable residents and accessing wider health and wellbeing support was identified early on by the Community Champions network. This resulted in the decision to create a Community Transport network which brought together partners from community transport, the voluntary and community sector, social prescribers and other health professionals.

The Network is made up of:-

- CT4N – Community Transport provider
- Our Centre – Transporter Provider
- Vibrant Warsop - VCS
- Ladybrook Enterprise – VCS
- AGE UK Connect – VCS
- MCVS – VCS Chair
- Social Prescribers from both Primary Care Networks

This resulted in the following successes:-

- Our Centre have been awarded £47,000 to continue to deliver a community transport scheme.
- CT4N have established themselves as a community transport provider in Mansfield.
- Community Transport Network meetings now take place on a quarterly basis.
- Community Transport is now an agenda item for the Mansfield Health Strategic Partnership.



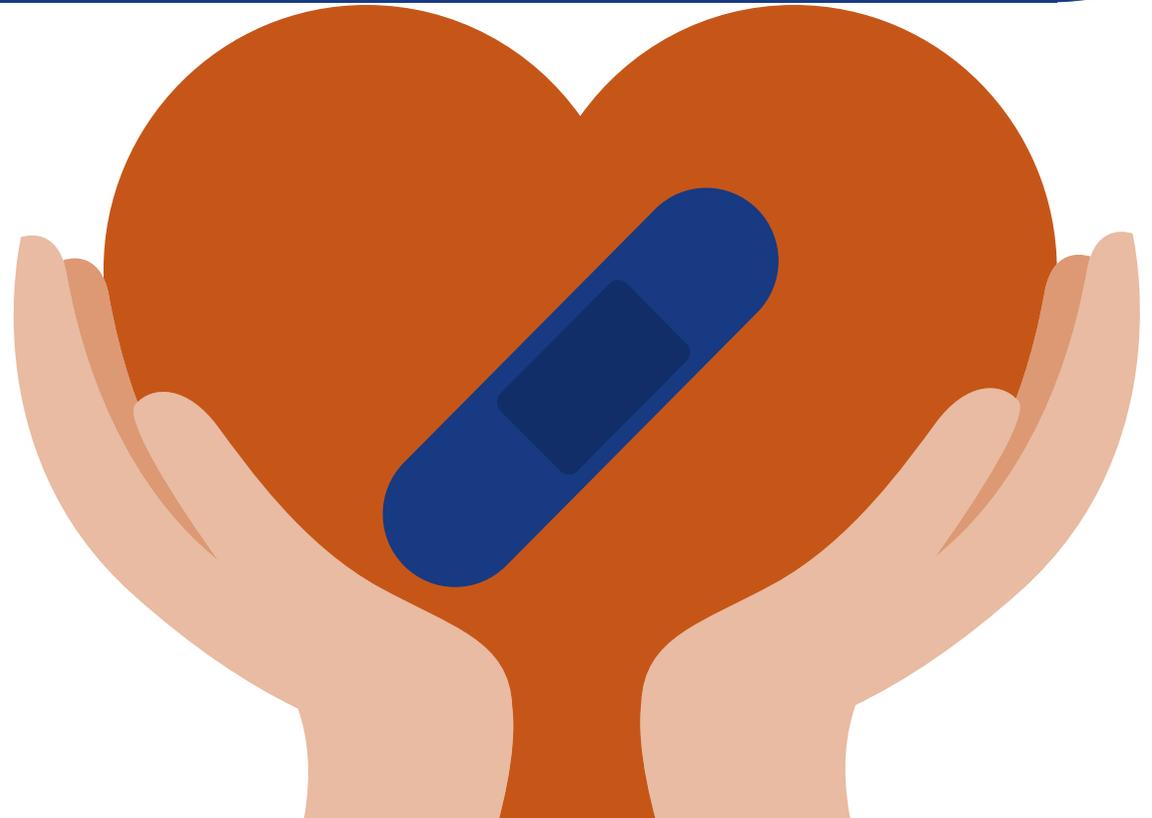
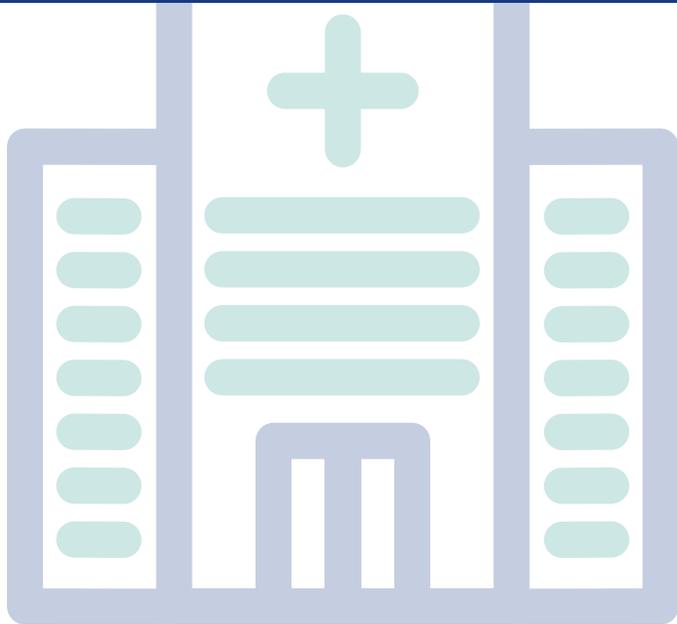


Access to Primary Care - Case Study

A prescription drug misuser, who also suffers with poor mental and physical health including poorly controlled Diabetes, stated that part of his reason for not using a GP Surgery was due to not being able to afford transport to appointments.

Instead, the 23-year-old had been regularly 'overdosing' on prescription medications in order to call 999 and be taken by ambulance to the Emergency Department (ED) of Kings Mill Hospital, Mansfield to be treated.

Through support from primary care and the MCVS administered community transport, this individual has been offered a taxi service to attend GP appointments thus reducing his attendance at ED. Over a 3-month period, he has been seen at the GP surgery 17 times as opposed to the previous 3 months which was 2 times. This has had a very positive impact on the patients' overall health and he is now accessing help in a primary care setting as opposed to a very busy ED.

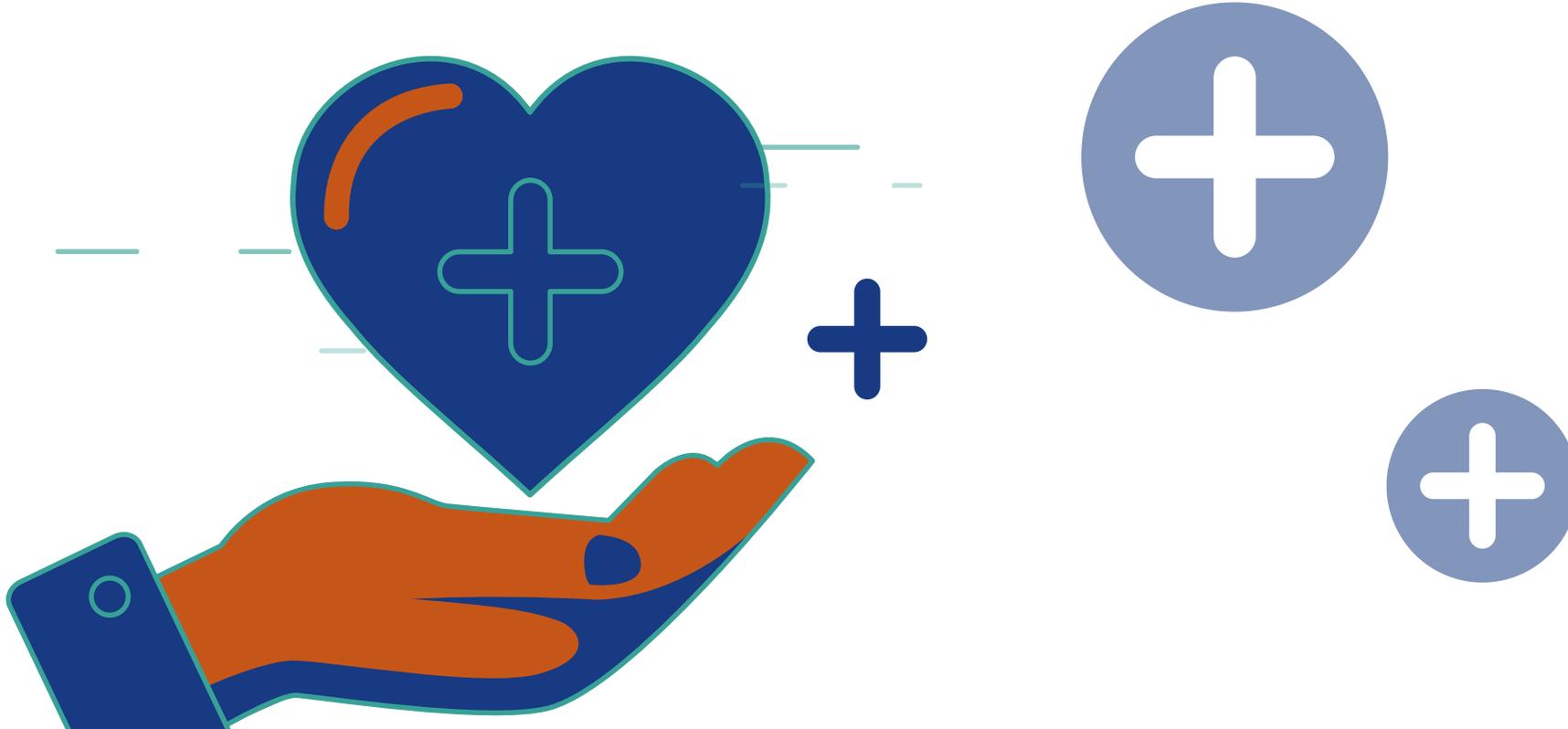




Access to Community-based Health and Wellbeing Support Case Study (1)

An agoraphobic, with type 1 diabetes, Fibromyalgia and PTSD was encouraged by a member of the Ladybrook Enterprises team to come on a course taking place at the Community Centre, with community transport arranged to make this possible. This individual is now attending the Women's Therapy Group at the centre weekly and she intends to continue to access community transport. This has been facilitated by working flexibly with Community Champions and We Are Undefeatable funding.

The individual's confidence has grown to the point where she has asked for a review of her long-standing medication and she is now talking about next steps. She is also making a financial contribution towards the cost of the group support and transport.





Access to Community-based Health and Wellbeing Support Case Study (2)

This 25-year-old started attending a craft group at Ladybrook Community Centre before the lockdown. Whilst she enjoyed coming to the centre, she struggled to engage socially and build relationships with others. During the first lockdown in 2020 she found it very difficult, being unable to see her family and becoming quite isolated which impacted further on her confidence levels.

When the Centre was able to reopen in September, she started attending the Health and Wellbeing Therapeutic support groups, assisted by accessing community transport to attend. She now focuses on the sessions and when she feels able, she will contribute with her own stories. The group has given her a chance to build relationships and share her story.





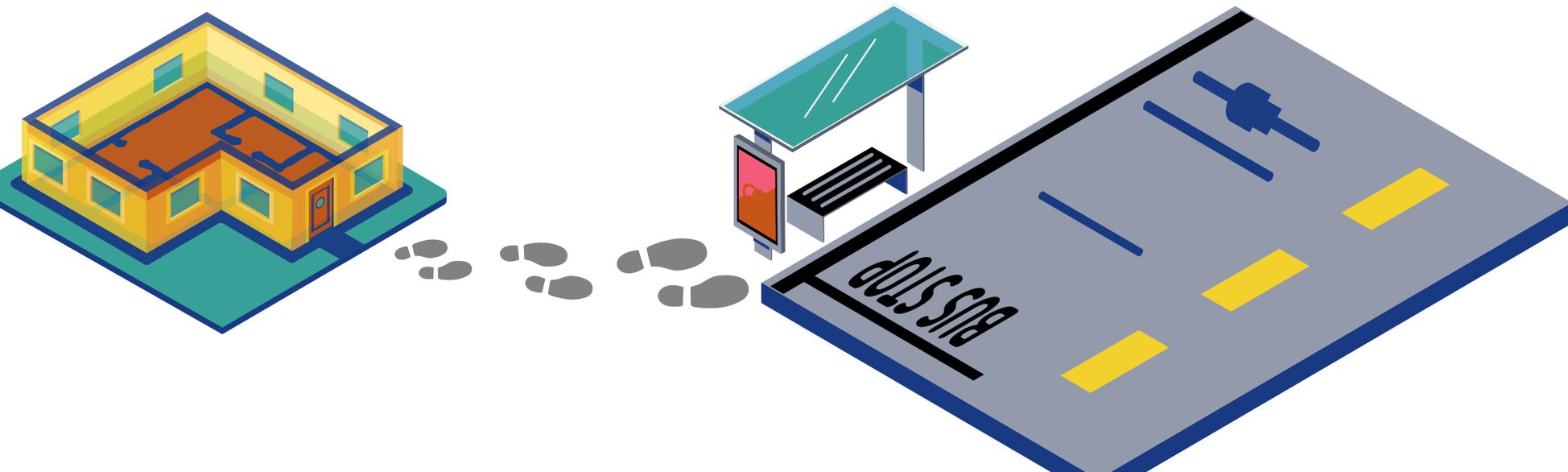
Make a Start - Access to Arts & Wellbeing Support Case Study

Make a Start was launched in August 2021 as part of MDC's Cultural Services response to the pandemic recovery. This group included participants referred by social prescribers who experienced isolation, poor mental health, long-covid or other long term health conditions. This pilot lasted 12 weeks and included a therapeutic creative activity, reminiscence and social skills activities. The sessions were informal with a tea break and biscuits.

The Community Champions project supported community transport for participants as part of the 'wellbeing' strand of the project and this transport was essential to the sustained participation of 8 residents who had complex needs and required low cost or free of charge transportation.

Community Transport provided door-to-door transport that was fully accessible. Drivers and escorts with enhanced DBS checks were trained in physical and emotional support needs. Minibuses were accessible, with tail lifts providing secure transport to those with disabilities who use a wheelchair or walking frame. In one instance, this included a participant who required an oxygen concentrator which was safely secured.

Participants received not only the physical support to attend but the drivers also ensured that they were encouraged and emotionally supported, including helping with bags and coats.



Mansfield Community Champions

Mansfield Working Together

