

**Name of meeting:** Economy and Neighbourhoods Scrutiny Panel

**Date:** Tuesday 6 October 2020

**Title of report:** Community Response to Covid-19

**Purpose of report:**

To discuss with the Panel the work that has taken place working alongside the voluntary and community sector (VCS) in response to the pandemic;

To consider some of the outcomes, learning and challenges arising from the last six months, particularly with regards to the VCS going forward and assisting in system changes.

<b>Key Decision - Is it likely to result in spending or saving £250k or more, or to have a significant effect on two or more electoral wards?</b>	Not Applicable
<b>Key Decision - Is it in the <u>Council's Forward Plan (key decisions and private reports)?</u></b>	No
<b>The Decision - Is it eligible for call in by Scrutiny?</b>	Not Applicable
<b>Date signed off by <u>Strategic Director</u> &amp; name</b>	Rachel Spencer Henshall, Strategic Director for Corporate Strategy, Commissioning and Public Health – 24 September 2020
<b>Is it also signed off by the Service Director for Finance?</b>	Not Applicable
<b>Is it also signed off by the Service Director for Legal Governance and Commissioning?</b>	Not Applicable
<b>Cabinet member <u>portfolio</u></b>	Councillor Cathy Scott and Councillor Rob Walker

**Electoral wards affected:** All

**Ward councillors consulted:** Not applicable.

**Public or private:** Public

**Has GDPR been considered?** Not applicable for this report

## 1. Summary

The Council recognises the crucial role that the VCS plays in the local economy, creating jobs, delivering services, connecting people in neighbourhoods, improving community cohesion and reducing social isolation and loneliness as well as general health and well-being. The recent experiences in the context of the pandemic have brought that into even sharper focus. The rise in volunteering along with the invaluable roles played by mutual aid groups and anchor organisations are evidence of the energy, capacity and goodwill that exists.

It has also revealed that there are opportunities to reflect on the last six months, to learn from our shared experiences and understand some of the emerging challenges and opportunities to do things differently.

The purpose of this paper, and the discussion with the Panel, is to consider the following areas in more detail:

- The community response to Covid-19;
- Capacity of voluntary organisations within the community;
- How such capacity and sustainability or viability has been impacted by Covid-19;
- The ways in which the experiences of the last six months have begun to influence what happens next.

Colleagues from Third Sector Leaders and the anchor organisations have been invited to attend the Panel meeting to input directly into the discussion and provide their unique perspectives.

## 2. Information

### **Community Response:**

In response to the Covid-19 pandemic a co-ordinated community emergency response (CER) for the Kirklees District was established on 19 March 2020. This rapid response saw the mobilisation of partners and services from across the council, councillors, the wider system, voluntary and community groups and individual volunteers.

The CER system was primarily about ensuring that citizens of Kirklees were kept safe and well and protected from Covid-19. National government guidelines were being issued daily and as the country went into lockdown the CER focused on protecting the most vulnerable with basic essentials to keep people safe and protect life, such as food, medicines, and other essential items.

With partners the council established an emergency telephone line and online system, enabling citizens to request essential help, and encouraging both citizens and organisations to offer support to others. Also with partners, the council created a [Community Response blog](#) to provide help and advice for groups, organisations and volunteers who were part of the response, which could easily be shared via local networks.

Across the district 130 local mutual aid groups mobilised, adding a huge capacity of neighbourhood level support. Working closely with Third Sector Leaders Kirklees, the council quickly developed a package of wrap-around support for this vital network. Support included regular video check-in calls, bespoke online sessions for sharing learning, a facebook group for mutual aid admins and an email network.

There have been nine voluntary sector 'Anchor' organisations who have coordinated local efforts and linked directly to the council and health and care systems. The Anchors had only just

been set up to respond to the new ways of working as PCN's and from these they were adapted to respond to the crisis.

As the Covid-19 pandemic deepened and the initial few weeks of the intense rapid response began to gain rhythm, a broader support offer was developed which has begun to look at social isolation, mental health support, focused support for vulnerable adults, children and families and a developed offer for BAME communities.

A placed based model operated across the whole of the district and the CER was closely aligned to ward councillors' work and engagement, operating seven days a week.

Staff were re-deployed to the emergency effort to support food banks, telephony and triage, and new pathways were developed for prescriptions, food, welfare, grants, funding and direct front line support.

In addition, IT, performance and intelligence, public health, policy and partnerships, communications and transformation have all led critical work streams to establish an effective CER.

NOTE: We have built resilience into the community response both through the council, its partners and the VCS to enable us to 'bounce back' should the need arise due to either shielding coming back on line or as a result of other national government guidelines.

#### **Kirklees Council Data (March – August):**

To date a total number of 3,725 requests for help have been received into the council between 25 March and 23 September 2020. Of these, 30% were from people aged 70 years or over.

The highest number of requests came from people in the Newsome ward (277), followed by Cleckheaton (266). The ward with the highest rate of requests was Cleckheaton (15.4 requests per 1,000). The most common type of support requested by people aged 70+ years was shopping (can afford to pay for essential items) and for people aged 18-49 years it was shopping (cannot afford to pay for essential items).

An important caveat of the data is that 29% of people requesting help did not disclose their ethnic background when asked. However, we do know that, for 18-49 year olds, 1 in 3 people from Black, Asian, Mixed or Other ethnic groups (BAME) requested support with paying household bills, much more than the 1 in 6 White British people; and 1 in 6 BAME people requested support to find advice or information, much more than the 1 in 20 White British people.

We also know that of the 3,725 people who requested help, 11% of them had a child aged under 18 years in the household; 86% of them were self-isolating; 46% did not have anyone they could ask for help; and 19% of them did not have enough food for 3 days.

Support for people requiring collection and delivery of prescriptions into the council prescription pathway has been 816 individuals.

Our data shows that the volume of requests has gradually decreased over time. In April the average number of requests per day was 54.5; in May this was 23.6, in June 11.6, in July 4.8, in August 3.7, and in September to date this fell to 2.9.

Requests have been received more frequently on weekdays and more commonly between 9am and 3pm.

1,430 local people responded to the council call for volunteering. These volunteers supported right across the district and some were signposted to the neighbourhood mutual aid groups and the community anchors.

### **Financial Support:**

In order to meet the challenges at a ward level, a decision was taken to increase ward member budgets from £20k to £50k per ward. Flexed and adapted guidelines were put in place for existing grant programmes to meet the Covid-19 response and uplifted funding for foodbanks to cover their surplus spend.

### **Food and Welfare:**

Food and welfare provision has been a critical aspect of the community response with existing and new food banks supporting thousands of individuals. The three main foodbanks have seen an increased take up of a third from the same period last year. Approximately sixty food banks are now operating across Kirklees.

A new Food Network has been established in partnership with the three main foodbanks and it is providing advice, support and guidance and helping to coordinate food supply across the district.

### **Inequalities:**

The pandemic has shone a light on inequalities, across the country and here in Kirklees. When early data began to emerge nationally about the disproportionate impact Covid-19 was having on black and minority ethnic, (BAME) communities, the community response acted quickly.

The council sought to contact all community organisations who have a reach into those communities and developed an engagement plan to ensure that this population group were getting the support they needed. Community groups have stepped forward and have provided intense support and this has been particularly impactful for those residents who were socially isolated and those with underlying health conditions.

Recovery plans continue with this work and deeper development on tackling health inequalities is currently being developed within our Community Response teams led by Local Integrated Partnerships.

### **Social Isolation and Loneliness:**

Overall, 46% of people requesting support from the community response helpline said that they had no family or friends to help them. Amongst White British groups:

62% of 18-49 year olds, 56% of 50-69 year olds, 42% of people aged 70+ years

This is similar to the pattern amongst BAME groups: 57%, 43% and 37% respectively).

This work has been an ongoing priority for Kirklees prior to C-19 and the pandemic has meant that more people have experienced social isolation and loneliness.

In Kirklees we have had 18,403 people who have been shielded. Of those shielded, we know 283 (27%) of the people requesting help through the community response wanted to have someone to talk to. We also know that 27% of people who are on the shielded patient list compared to 14% of people not on the shielded list asked for help with someone to talk to via the community response.

Through the helpline we identified a number of people who were digitally excluded and work was carried out to rectify this enabling access to the digital world.

Commissioning work within the voluntary and community sector through the loneliness partnership has been extended to support a befriending scheme via telephone, this is in addition to the telephone befriending service offered within the libraries service and those offered by local and national charities.

### **Public Protection Community Engagement:**

As lockdown eased nationally, information from PHE on infection rates for Kirklees began to show an increase. The country entered a new phase of the pandemic where a more targeted approach was needed to identify and tackle the infection. From early July, in response to the increased infection rates for Kirklees an urgent Public Protection Community Response was established in targeted priority areas.

Engagement plans were established and again staff were mobilised from a range of services, partners and the VCS. The main aim of this work was to rapidly get key public health messages out into those communities and engage 'on the ground'.

An intelligence gathering tool was quickly established and used by staff on the ground to establish key facts that would then inform the approach and give us insight into why infection rates were higher in some areas. To date over 5,000 people have completed the intelligence gathering assessment and almost 8,000 have been engaged through the process.

Communications have been translated into many languages to help with the engagement with key population groups. An engagement pack is currently being delivered to over 10,000 people across our district, which includes a face covering, key public health messages and hand sanitiser.

The PPCE work has supported our public health and emergency planning teams to help find suitable locations for testing sites and has led on the engagement work including the development of risk assessments and FAQs for local people.

### **Volunteering:**

Both locally and nationally there has been a rise in volunteering in response to the pandemic. A detailed evaluation of the volunteers that have offered their help to the council has been produced (a full copy can be provided to the Panel). Some of the headlines include:

- 1,430 individuals offered their help to the council since the lockdown began, 252 requests for volunteer help came via the Community Response Hubs, and all were matched with a local person.
- The wards where people offered help most were Greenhead, Dalton, Mirfield, Almondbury, Newsome and Lindley.
- Covid-19 volunteers have complemented a broad range of other volunteers, including informal self-help groups, the work of the Community Anchors and Mutual-aid groups – there has been space for everyone.
- Collecting prescriptions has seen the highest volume of volunteer effort, with Cleckheaton, Liversedge & Gomersal and Dalton being the wards with the highest numbers.
- Volunteers have been linked to other opportunities such as the Age UK and Yorkshire Children's Centre "Befriending service"; Kirklees Youth Alliance Healthy Holidays summer activity programme; Huddersfield Bid town centre futures survey, and delivering decommissioned library books to care homes.
- Our volunteer survey shows that people are most interested in continuing to deliver items to those who are isolated and isolating at home and providing befriending support – this shows how volunteering is changing.
- The number of people actively on standby has now reduced, but people are keen to help again if needed.

Similarly a West Yorkshire level evaluation of the NHS volunteers has also been produced. The full evaluation report can be found at **Appendix 1** to this report.

### **The Voluntary and Community Sector:**

Whilst the pandemic has catalysed capacity and cross sector working in many beneficial ways, it has also presented challenges for the VCS in a number of areas. The West Yorkshire and Harrogate Health and Care Partnership published a report in July 2020 'Third Sector Resilience: Before and during Covid-19' (full copy attached at **Appendix 2**). The report highlights the impact of Covid-19 on the sector. The report suggests that:

- 60% of the third sector organisations (TSO) who responded to the survey may not remain viable past the end of 2020;
- The smaller TSO may be more at risk, with viability being for 3 months or less;
- 48% of TSO that responded rely on trade to make up more than 50% of their income also have viability of 3 months or less.

Although active volunteering has been reduced by two thirds, those still in a position to volunteer have been directed to offer their services in Community Care. This is reflected in Kirklees with volunteers supporting Anchor Organisations and community response hubs. This survey is currently being repeated to assess the situation six months on and the report will be available in early November,

The report makes the following five recommendations for the Partnership to take forward at place level i.e. Kirklees and at theme level i.e. population health management/mental health etc.

- NHS, councils and other funders and commissioners commit to putting in place a strategy for longer term, joined up investment in the VCS.
- All partners formally recognise the social and economic value of volunteering and actively plan to better connect the volunteering infrastructure across NHS, VCS and councils. This includes: working together to consider developing and adopting a volunteer passport; investing in volunteer training and development across sectors; and working together to develop a WY&H wide integrated volunteering strategy;
- Commissioners and funders work together to simplify contracting and commissioning arrangements including monitoring requirements and to develop a shared application format;
- The Partnership works with the VCS to put in place a workforce offer which enables the further development of: workforce capacity including health and well-being; finance and business adaptation; governance and planning;
- All partners ensure the VCS and community voice is listened to and reflected in service design and delivery from the outset. All of these recommendations were supported by the System Leadership Executive Group and later by the WY&H partnership board

By way of further context the Charities Finance Group estimates that charities will suffer a 24% loss in income, or £12.4 billion, this year, with the highest losses felt by the small charities which rely on fundraising events. As fundraising moves increasingly on-line the digital divide and the lack of resources in many parts of the sector is becoming increasingly evident.

There is a shared recognition that, on a number of levels, more work now needs to take place to build on the progress that has been made in partnership over the last six months whilst at the same time beginning to explore the ways in which some of the emerging issues can be addressed across the partnership. Some examples include:

- Collaborative work (in progress now) with VCS and health partners to revisit the current VCS Strategy, with a view to wholly changing our approach. What has already emerged

from this collaboration is a statement of **our shared values** (initial draft attached at **Appendix 3**) which forms the basis of how we will work with and alongside each other in our local places in the future. This reflects the cultural change that we wish to see, and which we will actively help others to be a part of. We are currently working with our partners to develop the practical advice and storytelling that will help to further improve understanding and turn these shared values into action. An important aspect of this work is using clear and accessible everyday language, enabling us to grow support and involvement organically by making it much easier for everyone to engage with. Our “working alongside” approach will influence and inform many strands of work, including the the two year extension to current infrastructure contract between the council and Third Sector Leaders.

- Commissioning work to revisit and refresh our approach to **funding the VCS** with a greater focus on commissioning for outcomes rather than contracting for outputs. This involves the development of a more joined up and co-ordinated approach to funding which at the very least has everything in view and over time is more streamlined and consolidated in terms of transparency, ease of navigation and (where relevant) application. We need to begin work that aligns approaches to funding with our emerging shared values which will involve a more holistic approach over a longer time frame based on trust and acceptance of risk, striking a legitimate balance between due diligence and proportionality.
- Beginning to explore the **future role of anchor organisations** having regard to the experiences and learning gained from the last six months. A workshop involving the anchor organisations, the council and Third Sector Leaders, alongside LOCALA is scheduled to take place on 8 October to progress this piece of work.
- Building on some of the work that has taken place during the pandemic where there have been **opportunities for collaboration** e.g. the recent webinars in respect of community buildings. Note: A specific paper is currently in the process of being produced by colleagues from Third Sector Leaders and the Mission, which is looking at specific issues and challenges relating to community buildings. Some of the emerging issues that have already been identified include;
  - Income Generation - where income is a significant part of an organisations income and this is affected by COVID – e.g. cafes, room hire, paid activity groups, membership, events, tickets. Those organisations that have built a model of income generation dependent not on grants and donations but on trading, have suffered most of all;
  - Community Buildings(managed or rented) – the extent to which the original business model to cover cost of the building still work and implications in respect of room hire, tenants, social enterprises run from buildings etc;
  - Reliance on government support schemes e.g furlough scheme and the implications of the new job support scheme for VCS furloughed staff;
  - Fundraising - is being affected in a number of ways: limited fundraising events, some people have reduced income, reliance on digital media.
- Similarly, the opportunities presented by the recently updated **community asset transfer policy** can be seen within this context, although it will be important to ensure its implementation has regard to the shared values work;
- Ongoing dialogue and engagement with **mutual aid groups** is now in place, which is proving to be mutually beneficial in terms of widening the networks, sharing information and using perspectives to inform and influence longer term planning;

- Building on the work that TSL and council staff have done to help **support trustees** in finding short and longer term funding sources and interpreting Government guidance in respect of employment, business etc to support decision making.

Balancing the longer term system change with the more urgent short term actions is a challenge. Alongside the broader strategic change, there is urgent action required to help support the sector where possible to get through the immediate period. There are clearly linkages to the wider economic recovery work.

The above mentioned points are by no means exhaustive but hopefully begin to provide an indication of some of the tangible work that is now taking place in the context of some of the wider issues set out in this paper. **The views of the Panel would be welcomed.**

### **3. Implications for the Council**

#### **Working with People**

The community response has at its heart collaboration across the partnership and most crucially with citizens and local communities. It has been an example of co-producing and finding shared solutions based on trust and a shared purpose and with speed and considered risk. Moving forward, the thrust of this paper and our wider aspiration is to use the experience of the last six months as a catalyst to build on these principles, whilst seeking to understand and address the challenges that have also emerged as a result. Maintaining the principles of working in a more networked way needs to be at the forefront of subsequent work.

#### **Working with Partners**

Building on the points made above, this paper evidences the importance of partnership working to address shared challenges and deliver shared outcomes. Future work, both operational and strategic, needs to build on these principles. The shared values work referenced above provides a strong basis from which to build.

#### **Place Based Working**

An important part of the place-based working programme is the development of a cross partnership operating model whereby staff (both culturally and operationally) begin to think and react in a place based.

To a degree the Community Emergency Response has provided an opportunity to accelerate the development of the operating model and begin to test some of the initial principles, albeit in response to an emergency situation. This provides an opportunity to inform the next steps whilst being mindful that the Community Response teams by no means reflect the entirety of a place-based working operating model.

Our approach to citizen engagement is in the process of being refined as we have stronger regard to the segmented experience of the impacts of the Covid-19 pandemic on different groups of people and communities of interest in Kirklees. This will form part of the work of the cross partnership Citizen Engagement Reference Group moving forward.

#### **Climate Change and Air Quality**

No specific impact in the context of this paper.

#### **Improving outcomes for children**

No specific impact in the context of this paper although the VCS clearly has an important role in supporting the delivery of this shared outcome.



## **Other (eg Legal / Financial or Human Resources)**

Clearly the work in respect of funding detailed above will have financial considerations depending on the outcomes of the work that has now begun. Similarly, as we begin to model the cultural considerations emerging from the shared values work it will have implications for the relationship between the council and the VCS. This will be reflected in a whole number of areas as we consider how we translate values into practice.

## **Do you need an Integrated Impact Assessment (IIA)?**

Not applicable

### **4. Consultees and their opinions**

The following have been consulted as part of the production of this report:

Hilary Thompson, Chair of Third Sector Leaders  
Steve Brennan, Place Programme Director  
Andy Petrie, Chief Executive, Local Services 2 You  
Noreen Abbas, Community Investment Manager  
Andrew Dolman, Third Sector Manager

### **5. Next steps and timelines**

#### **Community response**

Reflections sessions with partners based on evaluation/ surveys etc of the work during the emergency community response – by the end of November 2020.  
Review of infrastructure (including team capacity) built during this period to inform future developments and responses to potential lockdowns – now - March 2021  
Addressing inequalities – plans aligning to wider corporate programme of addressing inequalities and protecting our most vulnerable - ongoing

#### **Shared values**

October 2020 – Review and discussion at Place Based Working Board (15 October) & working with partners to identify relevant practical advice and stories.  
November 2020 – “We are working alongside” published & more partners involved.

#### **Future role of anchor organisations**

Initial workshop involving the anchor organisations, the council and Third Sector Leaders, alongside LOCALA – 8 October 2020.

#### **VCS and Funding**

Initial scoping paper to be considered by Executive Team on 27 October 2020

### **6. Officer recommendations and reasons**

That the Panel use the contents of this paper to shape the discussion at the meeting on 6 October having regard to the areas of focus set out at section 1 above and thereafter determine specific areas of focus and priority moving forward.

### **7. Contact officer**

Carol Gilchrist. Head of Local Integrated Partnerships  
Carl Whistlecraft, Head of Democracy and Place Based Working

### **8. Background Papers and History of Decisions**

Kirklees Covid-19 Community Response Hub – Volunteer Coordination Report  
Community Asset Transfer Policy 2020 – Report to Cabinet on 22 September 2020

**9. Strategic / Service Director responsible**

Rachel Spencer Henshall, Strategic Director for Corporate Strategy, Commissioning and Public Health

Jill Greenfield, Service Director Customers and Communities