



Health and Social Care Partnership Grant Programme

Monitoring and Evaluation 2019-20

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Special thanks also go to the organisations, staff members of the Edinburgh Community Health Forum and officers from CEC and NHS Lothian who developed and co-produced the evaluation system.

Edinburgh Health and Social Care Partnership Grant Programme Monitoring and Evaluation 2019/20

1 Introduction

- 1.1 The Edinburgh Integration Joint Board (IJB) continues to recognise the importance of tackling Inequalities and enabling prevention and early intervention. Two key priorities identified in the IJB's Strategic Plan 2019-22 are to:

Tackle inequalities: take action to identify those experiencing poorer health outcomes and address the barriers they face which will in turn help manage the increasing demand for health and social care services.

Consolidate the approach to prevention and early intervention: establish links with community resources and assets to ensure people have the opportunity to access preventative opportunities which will help them keep themselves as fit and healthy as possible.

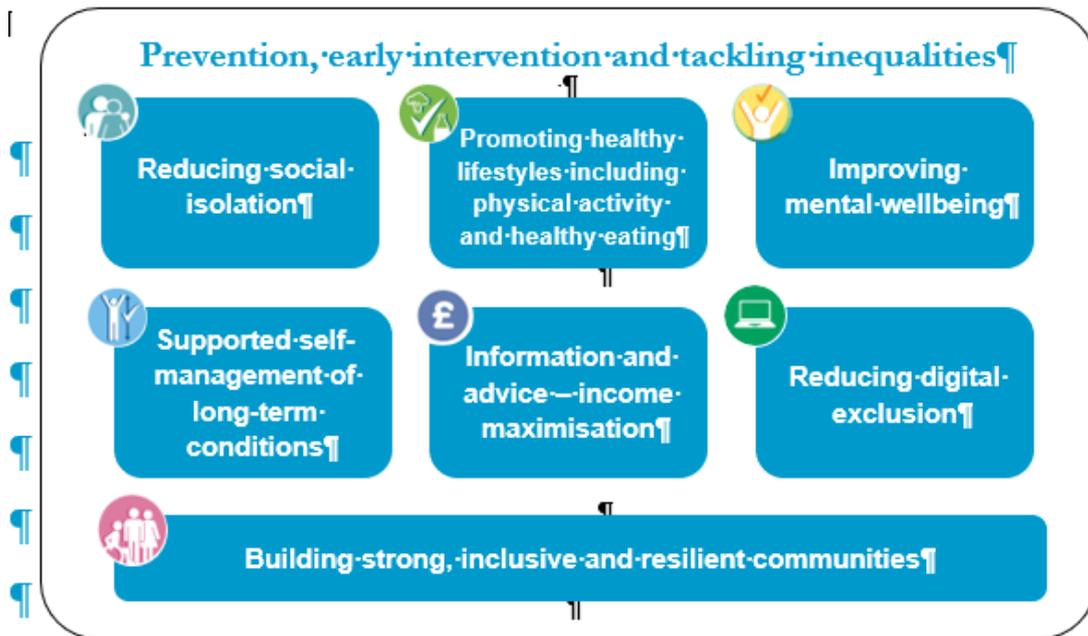
- 1.2 In order to help realise these priorities, a £14m grant programme was established through the Edinburgh Health and Social Care Partnership (EHSCP). This report provides an evaluation of the first year, 2019/20, of the 3-year Programme which saw an investment of £4.6m.
- 1.3 The main objectives of this report are to demonstrate:
- the type and scale of activities which were carried out
 - the impact of the activities
 - the additional benefits gained from the programme

2 Grants Application Process

- 2.1 Constituted and not for profit organisations were invited to submit applications for funding for activities which would help progress the Partnership's strategic aims of (1) preventing poor health and wellbeing outcomes, and (2) reducing health inequalities, as set out in the Strategic Plan and the Locality Improvement Plans.

The fund was significantly oversubscribed with the total value of applications coming in at over £31m and an available budget of £14m.

Applications were assessed against a set of published criteria and awards were agreed by the EIJB in December 2018 with activities starting in April 2019. Successful applications addressed one or more of the seven funding priorities



A list of projects receiving awards in 2019/20 awards is set out at Appendix 1.

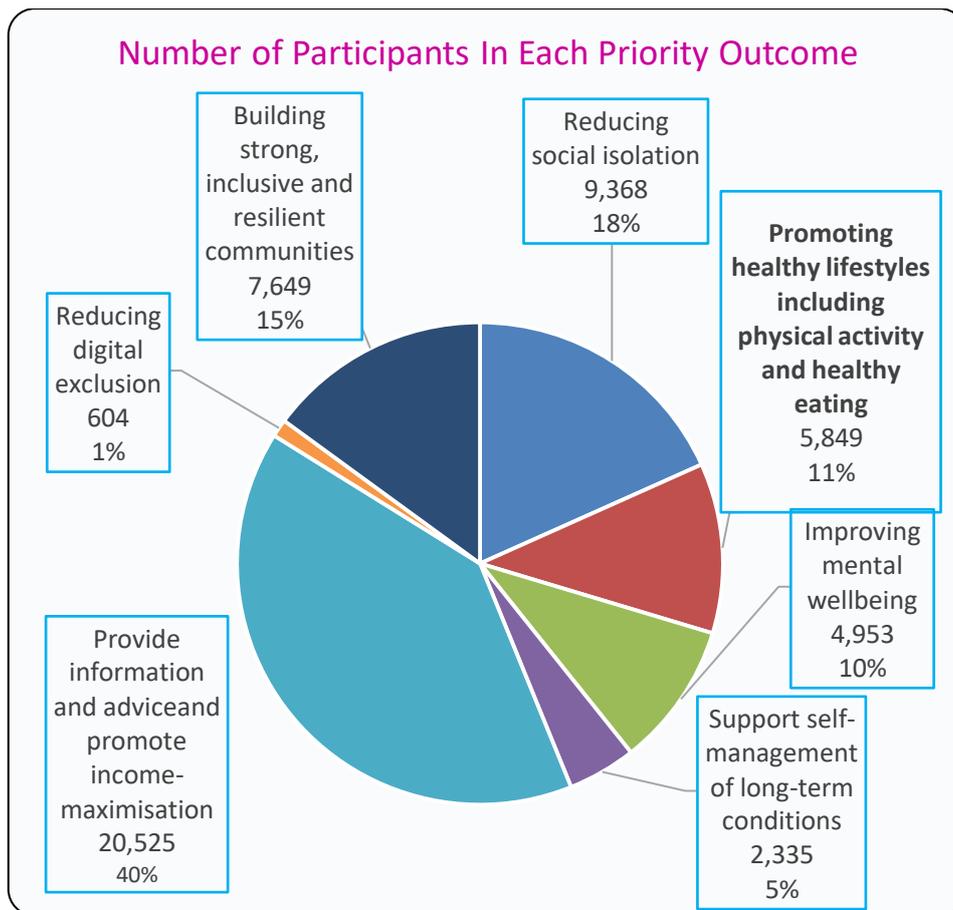
3 Monitoring and Evaluation Methodology

- 3.1 Following the first year of activities, organisations completed and returned end of year reports to demonstrate their targets and impacts achieved, using both quantitative and qualitative data:
- Self-Monitoring Annual Returns (SMARs) demonstrating Key Performance Indicators
 - Case Studies (a sample of which are contained within Appendix 2)
 - Results from service user surveys which used the Standard Impact Assessment Questions (see Appendix 3)
- 3.2 The information provided through these returns was collated across the programme to produce this report.

4 Results Overview

Number of Service Users

- 4.3 In 2019/20, a total of 51,283* participants took part in activities/used services funded through the Programme. The pie chart below provides a breakdown of the number of participants for each priority outcome.



*Two organisations did not complete returns as they were under managerial changes.

- 4.4 Health outcomes are influenced by a combination of fundamental determinants including behaviour, environmental and physical influences and social factors which are often interconnected. For example, providing a healthy eating course may help someone improve their diet and lead to improved physical health but the course may also have secondary benefits of reducing their social isolation and improving their mental health and well-being. As such, many of the activities undertaken often help achieve more than one priority outcome. In preparing the diagram above, activities were categorised by their main intended primary outcome.
- 4.1 Appendix 1 lists the funded projects with a brief description of the type of work carried. This helps demonstrate the scale and diverse range of activities implemented through the Programme.

5 Performance

Output Targets

- 5.1 Output targets for each activity were agreed by the organisation and the funder at project outset. These are set at a level which is challenging but realistic and are included in organisational funding agreements. In 2019/20, 686 output targets were set across the grant programme and 585 (85%) of these were met.

Customer Satisfaction

- 5.2 Organisations reported their Key Performance Indicators, including customer satisfaction feedback, in their SMAR (Self-Monitoring Annual Return). From the respondents, 39 organisations were able to record a user satisfaction score. From this, the average user satisfaction score was found to be 92%.

Additional Benefits

- 5.3 Funding Leverage was also reported. The results show that for every pound awarded through the programme, organisations brought in a further £2.97 to the city. This equates to an additional benefit of funding leverage, estimated at over £13m.
- 5.4 Many of the organisations depend on volunteers to help deliver their programmes. Volunteer hours added a further 33% of hours worked by paid staff and without their involvement, the wide range of service provision would just not be possible. Volunteering also adds a financial value and it is estimated that the resultant financial value which volunteering brings is over £2.5m. Equally important are the many benefits which volunteering brings to the individuals themselves such as improved confidence and well-being, increased skills and increased social connections.

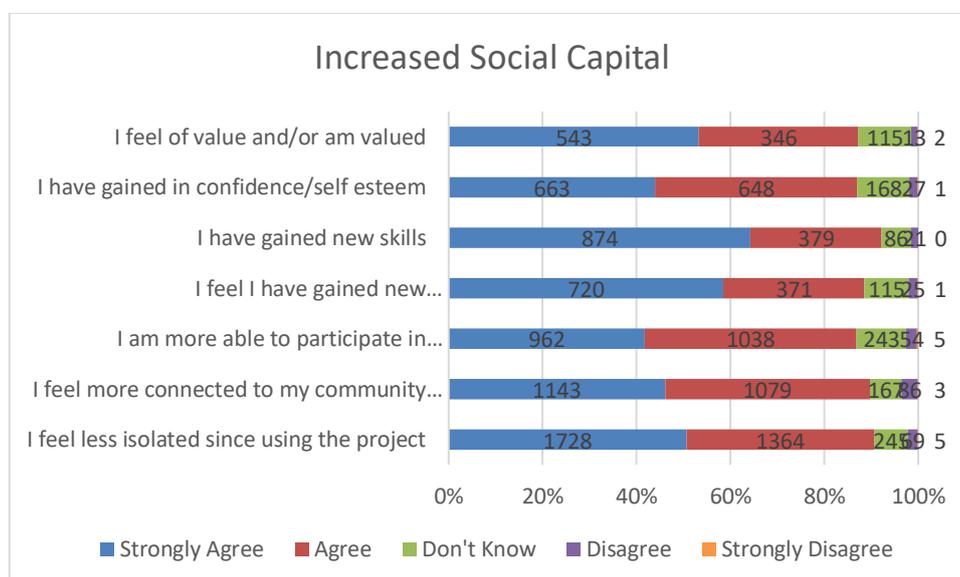
6 Impacts

- 6.1 At the project outset, each organisation is required to set targets for the impacts which they anticipate individuals will achieve through participation in their activities. These impact targets are included in the organisation's funding agreement. To measure the actual impacts achieved, organisations carried out service user surveys using the relevant Standard Impact Assessment Questions (SIAQs). These were co-produced with the third sector in Edinburgh, see Appendix 3.
- 6.2 The results gathered from the organisations demonstrate the positive health and well-being impacts on individuals from using the grant funded services. The collated results show that 91% of all the impact targets set were met.

- 6.3 However, due to the coronavirus pandemic the number of surveys carried out was not as full and comprehensive as had been hoped. Some organisations found that they could not get access to their completed surveys, some were unable to complete the end of year surveys as they needed to do this face to face and some did not have the resources to complete comprehensive surveys due to the more immediate pressures of adapting services to accommodate social distances guidelines whilst trying to maintain services for those most vulnerable.
- 6.3 Despite these problems encountered due to the pandemic, over 50,000 survey questions were asked. An average of 83% of participants surveyed, agreed or strongly agreed that the service they used had the intended positive impact on them.
- 6.4 A breakdown of the results from the SIAQs is given below for each priority outcome.

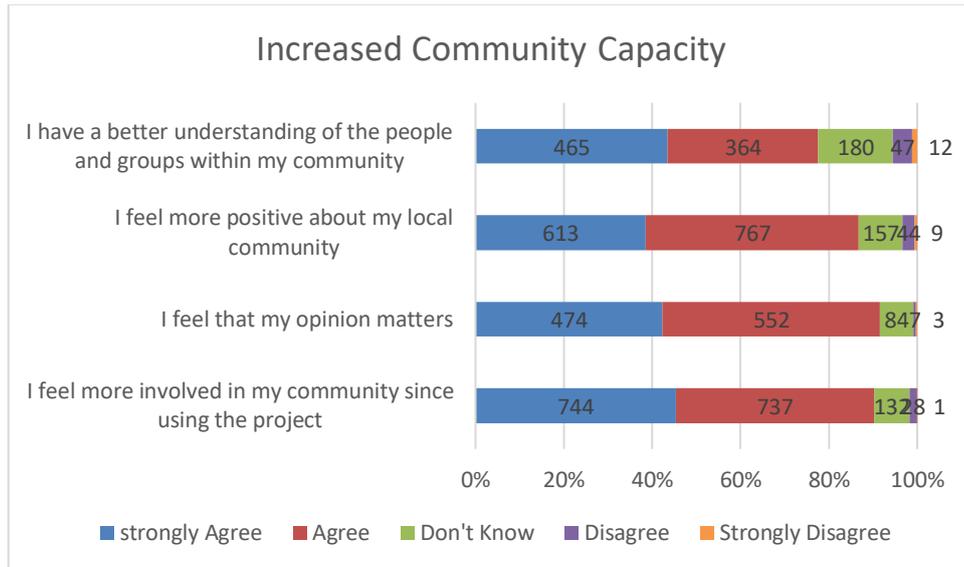
Priority Outcome 1: “Increased social capital: reduced social isolation; increased community participation and volunteering”

The results from the Standard Impact Assessment Questions in relation to Priority Outcome 1 are given below and show that 89% of people surveyed strongly agreed or agreed that that the service they participated in achieved the desired positive impact.



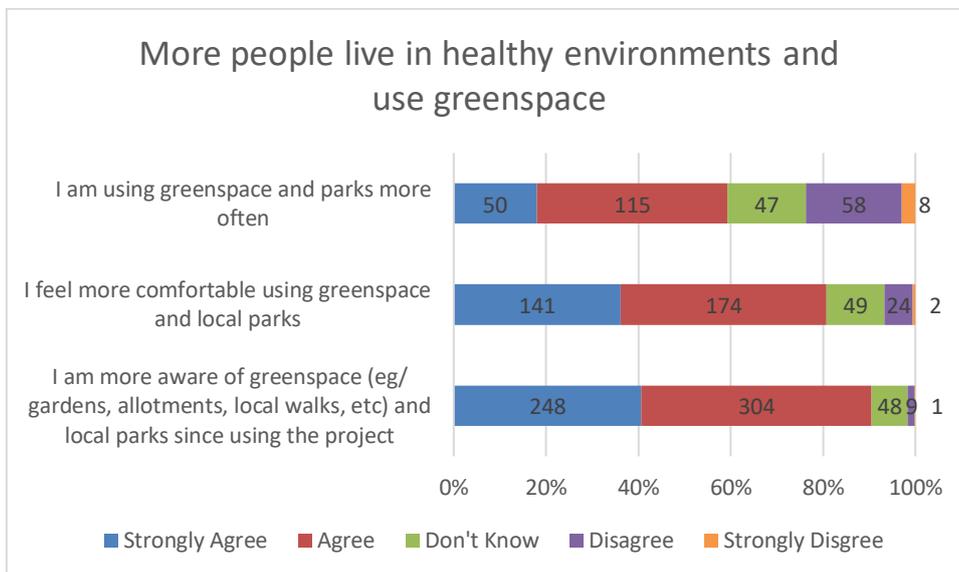
Priority Outcome 2: “Increased community capacity: communities of place and interest and cultural bridging”

The results from the SIAQs show that 87% of respondents who used services aimed at increasing community capacity agreed or strongly agreed that the desired positive impact had been achieved.



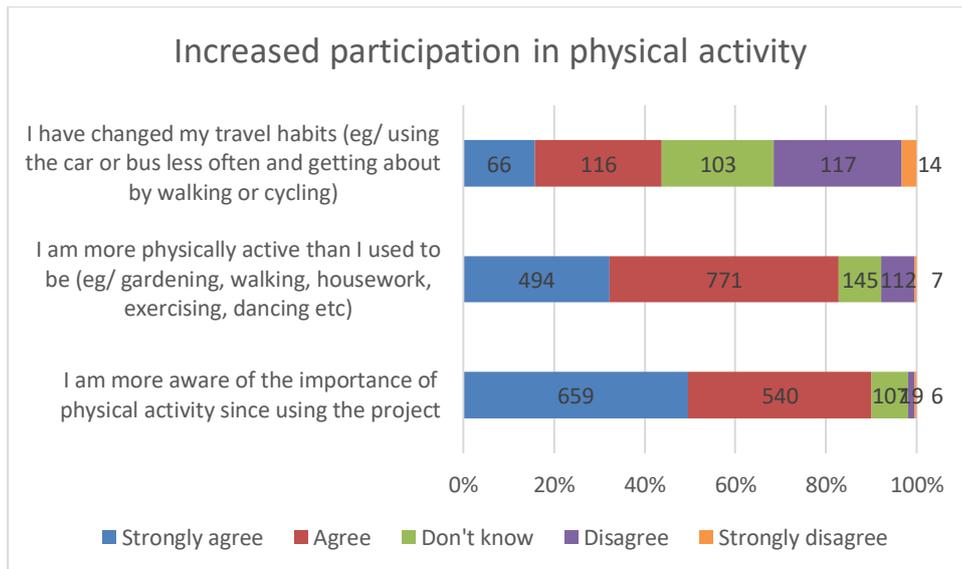
Priority Outcome 4 “More people live in healthy environments and use greenspace”

An average of 81% of participants surveyed in relation to Priority Outcome 4, agreed or strongly agreed that the service they used had a positive impact on their use of greenspace.



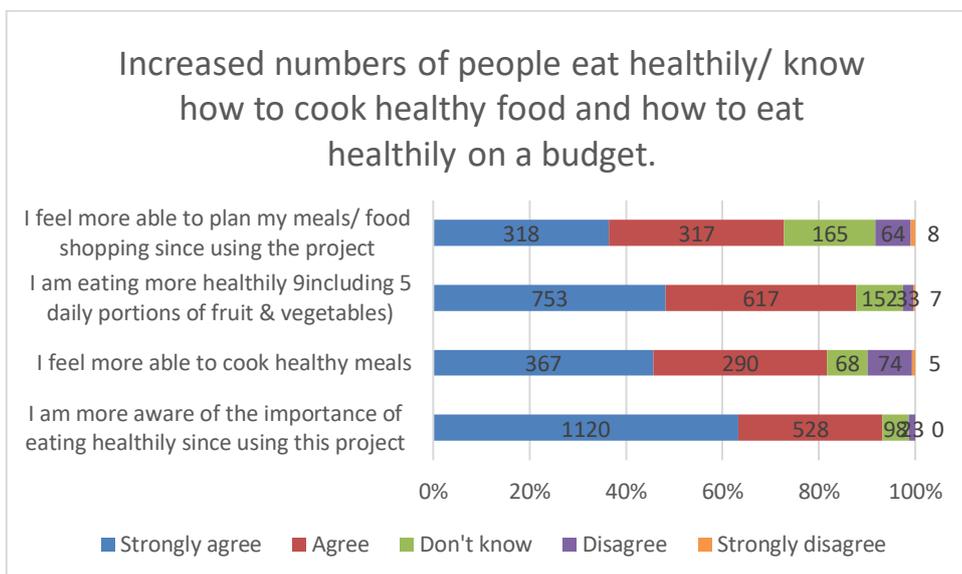
Priority Outcome 5 “increased participation in physical activity: including walking, cycling, dance, active travel, and gardening”

An average of 81% of participants surveyed noted a positive impact in relation to increased physical activity.



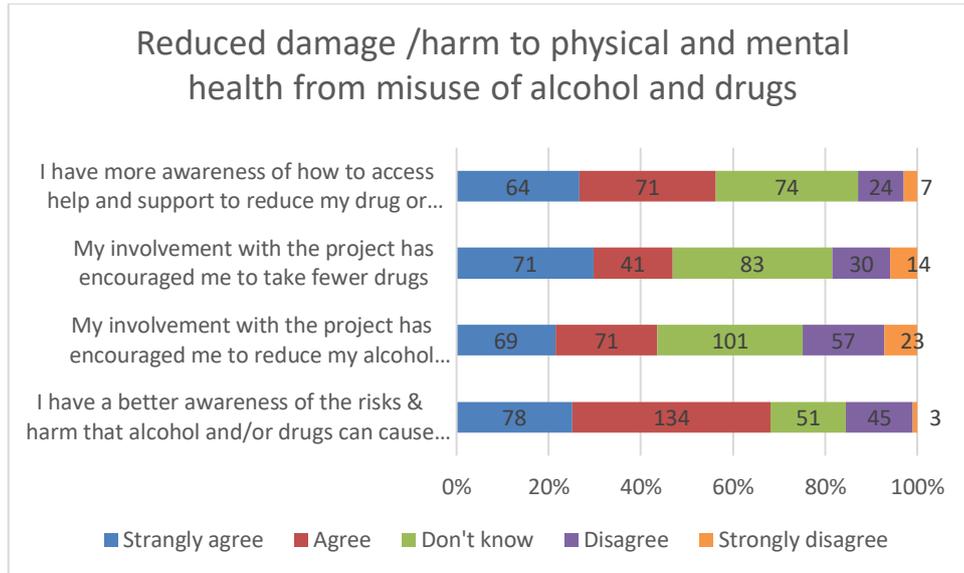
Priority Outcome 6 “Increased number of people eat healthily; increased number of people know how to cook healthy food and how to eat healthily on a budget”

An average of 86% of those people surveyed agreed or strongly agreed that the activity they had taken part in had contributed positively to improving their knowledge and uptake of healthy eating.

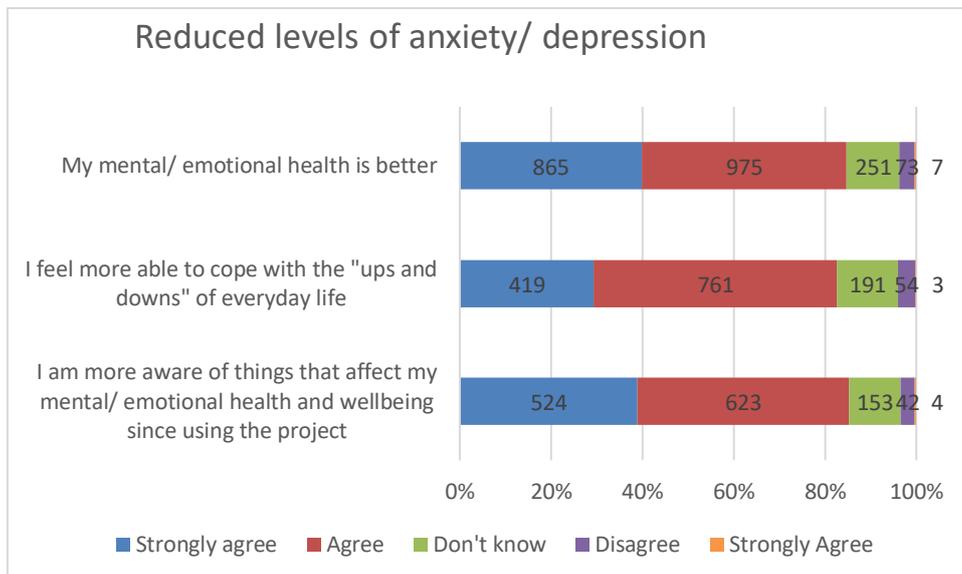


Priority Outcome 7 – “Reduced damage to physical and mental health from misuse of alcohol and drugs”

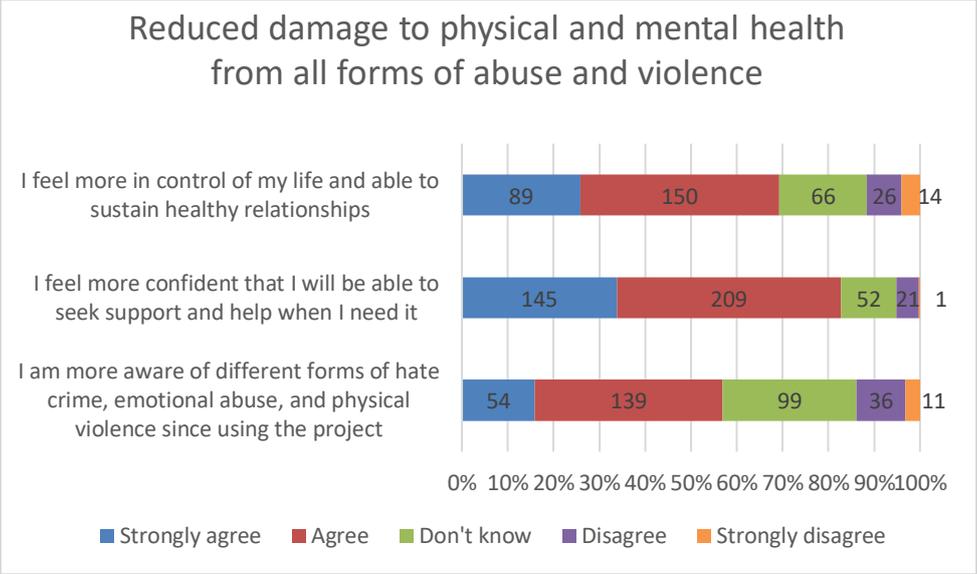
The percentage of people surveyed who agreed or strongly agreed that the services which they had attended had had a positive impact on them was 54%.



Priority Outcome 8 – “Reduced levels of anxiety and depression”
 The results from the SIAQs for this outcome are shown below and it was found that 84% of those surveyed agreed or strongly agreed that the service had participated in had a positive impact on them in relation to reduced anxiety and depression.

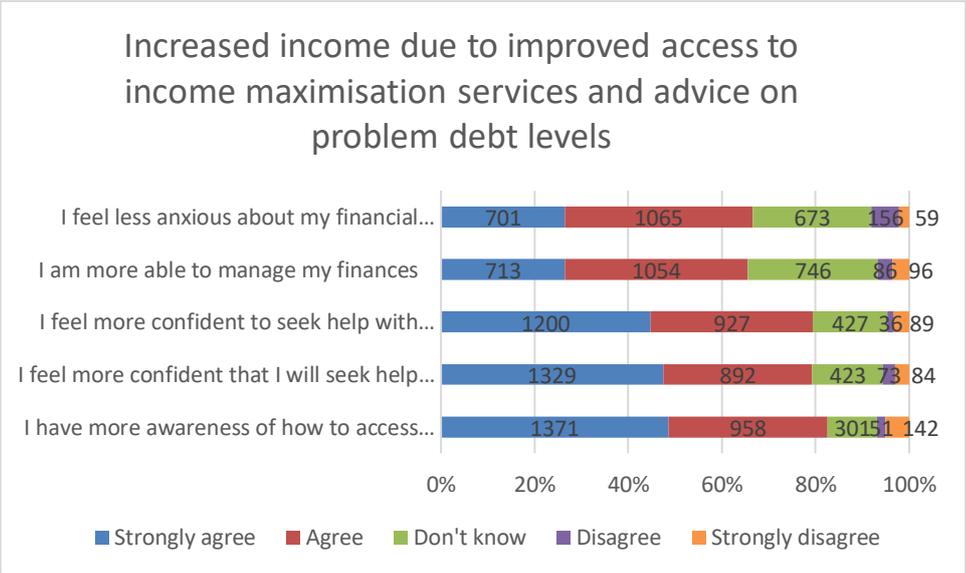


Priority Outcome 9 – reduced damage to physical and mental health from all forms of abuse and violence
 The results from the SIAQs in relation to Priority Outcome 9 are given below. 71% of respondents strongly agreed or agreed that the service had had a positive impact on them in relation to Priority Outcome 9.



Priority Outcome 10- *“Increased income due to improved access to income maximisation services and advice on problem debt levels”*

The results from the SIAQs show that an average of 75% of those who used a service aimed at Priority 10 - increasing income, strongly agreed or agreed that the service had the intended positive outcome.



The client income gains for all clients using the 3 Income Maximisation funded organisations was £11.6m in 1920/21.

7 National Health and Wellbeing Outcomes

7.1 The activities carried out through the grant programme also work directly to achieve the National Health and Wellbeing Outcomes, particularly those noted in the table below.

NATIONAL OUTCOME	ACHEIVEMENT
<p>Outcome 1: People are able to look after and improve their own health and wellbeing and live in good health for longer</p>	<p>The Grant Programme has influenced people’s ability to look after and take more responsibility for their own health through preventative work which provides information and support to encourage healthy lifestyles. This includes activities to reduce alcohol intake, improve diet, improve mental health, help to access technology and increase physical activity. The programme also addresses the environmental and social factors that can act as barriers to health and wellbeing, for example, improving greenspace and maximising income.</p>
<p>Outcome 2 People, including those with disabilities, long term conditions or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.</p>	<p>Recent evidence supports the view that people wish to maintain their independence and remain at home, and in their communities, for as long as possible. To help achieve this, the Grant Programme has increased and created community capacity and resilience so that people can receive the care and support they need locally to help them stay independent. Services include, for example, telephone support, community connecting, support to gain independent living skills, physical and social opportunities, falls prevention support and advice, support for carers, days services, visiting services, self-management programmes, information and one to one support amongst others.</p>
<p>Outcome 3. People who use health and social care services have positive experiences of those services, and have their dignity respected</p>	<p>The monitoring report has demonstrated that service users experienced a positive experience when using the grant funded services with an average user satisfaction rate of 92% across the Grant Programme. Ensuring positive experiences for service users is a high priority of the programme and as such funding applications were assessed on a number of criteria, one of which was the extent to which organisations would seek feedback from their users to further develop and improve services. Activity and impact targets are set each year and any targets which have not been met are highlighted and identified as areas for improvement.</p>
<p>Outcome 4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services</p>	<p>Grants through the programme are awarded to trusted local organisations who work with their community and have the experience to know how to achieve the best outcomes for their clients and improve quality of life. Through the user surveys it was found that across the programme an average of 83% of participants surveyed, agreed or strongly agreed that the service they used had the intended positive impact on them. The survey included questions surrounding the key</p>

	<p>components of a good quality of life including leisure and social interactions, personal income, physical environment, personal confidence and health</p>
<p>Outcome 5. Health and social care services contribute to reducing health inequalities</p>	<p>Data continues to highlight the extent of inequality in Edinburgh including stark figures which show that premature death in Edinburgh remains significantly higher in deprived areas compared to affluent areas. To narrow the gap, the Grant Programme provides a focus on eliminating the underlying causes of poor health and inequalities where possible. Poor health can be a result of various factors including diet, smoking or other life style choices, but also the result of other underlying factors such as people's aspirations, sense of control and cultural factors. The programme not only provides services which encourage healthy diet, increased physical activity and maximisation of individual's income, for example, but also builds resilient and sustainable communities increases social capital, helps build community capacity and encourages individuals to take responsibility for their own health, maximise their capabilities and have control over their lives.</p>
<p>Outcome 6 People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being</p>	<p>Although carers often feel positive about their role, the demands of caring can have an adverse impact on carers' health and well-being. The Grant Programme supports a number of activities which help meet the needs of carers at various levels – emotional, physical and economic - and also provided activities for those being cared for to allow much needed respite for carers.</p>
<p>Outcome 9. Resources are used effectively and efficiently in the provision of health and social care services</p>	<p>To ensure effective use of the limited grant budget, the criteria for grant funding was co-produced with stakeholders. A stringent grants assessment process was then followed - all applications were “scored” by a 3-person panel in line with the criteria agreed. A Moderation Group, with an external independent Chair, then considered the scores to ensure consistency and equity across the applications and align the allocation of resources with the IJB's strategic priorities.</p> <p>In addition, grant funded organisations carry out evaluations and reviews of their services including seeking feedback from their service users, to allow continuous improvement of their services.</p>

1 Edinburgh Context

Edinburgh shows better than average levels of health and wellbeing, compared against Scottish averages, however levels of **health inequality** are worse than the Scottish average. Residents in the most deprived areas of the city experience lower life expectancy, higher levels of premature mortality, fewer years spent in good health, higher levels of incidence of mental health and other disorders than those in affluent parts of the city. Data on life expectancy shows a gap between the most and least deprived areas in Edinburgh of 10 years. (but up to 21.4 years between men in the most and least affluent small areas).

Edinburgh's population is expected to increase faster than any other city in Scotland and the number of residents who are aged 85+ is expected to more than double over the next 20 years placing more pressure on publicly funded health and social care services. **Preventative measures** have been shown to be cost-effective and can reduce the future demand for health and social care services.

5 Strategic Plan Priorities

- Prevention and Early Intervention
- Reducing Health Inequalities

6 National Outcomes

People can look after their own health and live in good health longer

- People are able to live, independently and at home
- People who use services have positive experiences of those services
- Services are centred on helping improve the quality of life

4 Programme Outcomes

89% Increased Social Capital
 87% Increased Community Capacity
 81% environments and use greenspace
 81% Increased participation in physical activity
 86% More people eat healthily
 54% Reduced damage/harm from misuse of alcohol and drugs
 84% Reduced levels of anxiety/ depression
 71% Reduced damage from all forms of abuse and violence
 75% Increased income due to improved access to advice

2 Programme objectives – prevent poor health and well-being outcomes and tackle the root causes of health inequalities, by supporting and encouraging people to:

- achieve their full potential, stay resilient and take more responsibility for their own health and wellbeing
- make choices that increase their chances of staying healthy for as long as possible
- utilise recovery and self-management approaches if they do experience ill health.

By both supporting those whose health is at greatest risk from inequality and by **tackling the root causes of health inequalities**, we aim to:

- support individuals to maximise their capabilities and have control over their lives
- create healthy and sustainable communities that can resist the effects of inequality on health and wellbeing
- ensure that core Health and Social Care services are delivered in a way that reduces and does not worsen health inequality, and
- recognise that some sections of the population need targeted support in order to address the causes and effects of inequalities.

Priorities

- Reducing social isolation
- Promoting healthy lifestyles
- Improving mental wellbeing
- Supported self-management
- Information and advice
- Reducing digital exclusion
- Building strong,

Resources

Investment of £4.6m in the first year of a 3-year programme

68 grants awarded

For every pound awarded through the programme, organisations brought in a further £2.97 to the city

Volunteer hours contributed a further 33% of hours worked by paid staff

Average user satisfaction rate was 92%

Activities

- *Help and advice to improve physical and mental health including: 1 to 1 support sessions; Helplines; Drop-ins; websites, leaflets; Peer support; referral; listening*
- *Volunteering training and opportunities*
- *Social activities (community events, outings, day services)*
- *Support to manage long term conditions*
- *Activities to improve greenspace and the home environment*
- *Supporting people to participate and connect (community cafes; learning programmes)*
- *Learning and skill sharing (such as cooking on a budget)*
 - *Income maximisation support and advice*
- *awareness raising (such as anti-stigma activities)*
- *Digital activity skills and support*
- *Physical activity groups*

Outputs

85% of output targets were met

Number of people using services: 51,283

9368 – Reduce social isolation
 5849 – Promote healthy lifestyles including physical activity and healthy eating
 4953 – Improve mental wellbeing
 2335 - Support self-management of long- term condition
 20523 - Provide information and advice and promote income maximisation
 604 - Reduce digital exclusion
 7649 - Build strong, inclusive and resilient communities

3 Impacts

	%
I feel less isolated since using the project	91
I feel more connected to my community	90
I am more able to participate in community activities	87
I feel I have gained new friendships/contacts I can call on	89
I have gained new skills	92
I have gained in confidence/self esteem	87
I feel of value and/or am valued	87
I feel more involved in my community since using the project	90
I feel that my opinion matters	92
I feel more positive about my local community	87
I better understand the people and groups within my community	78
I am more aware of greenspace	90
I feel more comfortable using greenspace and local parks	81
I am using greenspace and parks more often	59
I am more aware of the importance of physical activity	90
I am more physically active than I used to be	83
I have changed my travel habits	44
I am more aware of the importance of eating healthily	93
I feel more able to cook healthy meals	82
I am eating more healthily	88
I feel more able to plan my meals/ food shopping	73
I am more aware of the risks & harm that alcohol and/or drugs	68
I am encouraged to reduce my alcohol consumption	44
I am encouraged to take fewer drugs	47
I can access help and support to reduce my drug or alcohol use	56
I am more aware of things that affect my mental/ emotional health	85
I feel more able to cope with the "ups and downs" of everyday life	83
My mental/ emotional health is better	85
I am more aware of forms of hate crime, abuse and violence	57
I am more able to seek support and help when I need it	83
I am more in control of my life & able to sustain healthy relationship	69
I am more aware of help with welfare benefits and debt issues	83
I am more confident that I will seek help with welfare benefits	79
I am more confident to seek help with debt issues before crisis point	79
I am more able to manage my finances	66
I feel less anxious about my financial situation	67

9 Conclusions and Way Forward

- 9.1 It has been demonstrated that the Grant Programme for 2019-20 delivered a valuable and diverse range of activities which benefited approximately 50,000 people and helped achieve the key priority outcomes of reducing health inequality and enabling prevention and early intervention.
- 9.2 Organisations performed well during 2019-20 and it was found 85% of the activity targets and 91% of the impact targets were met. The targets were set jointly between the funder and the organisation and were set to a challenging yet achievable standard.
- 9.3 The effectiveness of the programme is augmented through the additional benefit of funding leverage, estimated at over £13m. Volunteer hours added a further 33% of hours to those worked by paid staff adding significant social value and a monetary value estimated at over £2.5m.
- 9.4 Although the amount of leverage brought in through the grants is extensive, ongoing work to encourage organisations to consider their financial sustainability and seek funding from all available sources should be continued.
- 9.5 Where targets were not met, further examination of the reasons is carried out by the organisations as part of their continuous process of learning and improvement. The main recurring issues preventing targets being achieved included poor weather, loss of volunteers who (help) run activities, staff moving on and the impact of the Coronavirus pandemic.
- 9.6 The pandemic and social distancing restrictions meant that some services could not be run as planned in the final month of the financial year. Organisations were however quick to adapt to the restrictions imposed to contain the virus and strived to find new ways to operate. Some organisations, especially those whose users were particularly vulnerable, moved away from face to face delivery at an early stage and introduced alternative delivery methods where possible. Some organisations found that their services could no longer be delivered safely and within guidelines and so suspended their services. In some cases, where it was not possible to deliver the usual services, organisations diverted their staff from their normal roles to working on emergency responses to the pandemic for example food preparation and delivery of food parcels. The rapid, agile and intelligent response to the pandemic by the sector helped ensure that those most need were and continue to be supported.
- 9.6 Through the use of the suite of Standard Impact Assessment Questions (SIAQs) it was possible to measure the direct impact of the services provided. These are detailed in the body of the report. The results show that the impact on service users was considerable with an average of 83% of service users who were surveyed agreeing or strongly agreeing

that the service they used had brought about the intended positive impact.

The Way Forward

- 9.7 In addition to measuring the health inequality and prevention outcomes of the Programme, there is a growing need to also quantify the consequential cost savings which the projects have brought. Initial discussions regarding this have taken place however it has proven to be extremely difficult to develop measures which would be suitable for all activities. The use of case studies is an effective way of demonstrating benefits and savings and a selection of case studies are included in Appendix 2.
- 9.8 Opportunities should be taken to review the various grant monitoring and evaluation systems currently in use by the Partnership with a view to determining whether they are effective, valid and a justified use of resources for future grant programmes. Depending on the type of monitoring and evaluation that might be required, further consideration should be given to establishing an aligned, whole system approach, which is resource efficient and able to measure outcomes (both quantitatively and qualitatively) with minimum additional burden. Any future process developed should enable a continuous process of learning and reflection and utilise data which would also be of use to grant funded organisations when applying for funding from other sources.
- 9.9 If it is decided that this current monitoring and evaluation system is continued to be used, further SIAQ questions should be developed to incorporate questions to evidence impacts around reducing digital exclusion and supporting self-management of long-term conditions.
- 9.9 The Coronavirus pandemic and lockdown measures have had, and continue to have, a significant operational impact on grant funded organisations. Targets in funding agreements were for a 3-year period however it is recognised that for some organisations, the targets may have to be re-visited and re-set as they continue to adapt to changing restrictions.
- 9.9 A recent survey carried out, the [Coronavirus Survey Report by the Third Sector Interface Network Scotland](#) provides further understanding of the impact of coronavirus on the Third Sector. It is clear that the sector has been highly adaptive during this period and has risen to the challenge through collaboration and support for each other. However, the reported loss of funds is threatening the future of voluntary organisations with half of organisations experiencing a reduction in income from fundraising. Now more than ever it is important that we continue to support the third sector organisations who have helped build resilient communities and have shown that they are able to respond quickly and effectively to the current pandemic and any future health shock.

Appendix 1 – Projects Funded Through CEC Health Inequalities Programme, 2019/20

Organisation	Project	Activities	Amount
ACE IT	Digital Inclusion for Older People	<p>The project will enhance digital knowledge, skills and well being in older people with staff, volunteers and other organisations via four services.</p> <ul style="list-style-type: none"> • Moose in the Hoose for residents in care homes • Office - based one to one training sessions • Scam workshops with Changeworks • Outreach for older workers and people in retirement establishments 	£62,225
Art In Healthcare - Room for Art	Room for Art	Room For Art is a series of visual arts workshops delivered by artists throughout Edinburgh using an 'art on prescription' approach and an occupational therapy supported model of 1:1s to support self-management. Participants will be referred by professionals in statutory and third sectors working in partnership with Art in Healthcare.	£50,221
Autism Initiatives	Diagnosis and support for autistic adults without a learning disability	The Project will assist Mental Health Teams (MHTs), and the Lothian Adult ADHD and Autism Resource Team (LAAART), in Edinburgh by meeting those seeking an autism diagnosis; gathering information to support MHTs in their assessments; diagnosing those who do not meet their criteria for functional impairment, and providing post-diagnostic support.	£93,626
Bethany Christian Trust	Passing the Baton Project	Through volunteer befriending and community groups for isolated and lonely individuals, the project aims to decrease social isolation and prevent homelessness in Edinburgh.	£49,314

Bridgend Farmhouse	Community kitchen	Creating a community kitchen as an engagement tool to connect and engage a multi-generational, multi-cultural, multi-ability food community supporting each other to learn, gain confidence, reduce social isolation, and help each other become part of the wider community. Using local collaborations and food as the focus for building community capacity	£24,978
Calton Welfare Services	Welfare Services for Socially Isolated Older People	The project will provide a Club for Socially Isolated Older People and a Day Care Service for Dementia sufferers, as well as providing Welfare Advice and Information for our service users and their carers and socially isolated older people in our area, and events throughout the year for older people.	£16,000
Care for Carers	Stepping Out Residential and Short Breaks for Carers	To provide information, support and a range of organised, structured and supported short breaks (residential, day and evening breaks) to unpaid carers in Edinburgh. The short breaks aim to support and improve carers mental and physical wellbeing and enable them to feel able to maintain and sustain their caring role.	£71,535
Caring In Craigmillar	Phonelink	We plan to extend "Phonelink"; our unique telephone support service, to all Edinburgh localities. CiC, currently offers reassuring & supportive phone calls, twice daily, 365 days, to vulnerable & elderly clients, living in their own homes with long term health conditions, additional support needs or at risk of social isolation	£76,919
Changeworks	Heat Heroes	Heat Heroes provides support to people vulnerable to health impacts of living in fuel poverty. A team of 12 volunteers will be trained to support 1650 people to be in control of their energy costs, helping them be affordably warm and prevent health issues caused by living in cold/damp homes.	£53,188
Community One Stop Shop	COSS	The project will deliver our existing project and ancillary services. We provide advice and advocacy for clients living in poverty and challenging circumstances within the Broomhouse and South West area. Continued provision of our Food Bank and support services, and our outreach	£23,000

		services. We currently receive two small grants but as suggested have amalgamated them both for the purpose of this application for the first time.	
Community Renewal Trust	Health Case Management (HCM)	Continuation and improvement of Edinburgh's HCM service: intensive support for GPs' 2% most complex adult cases. Our open-ended long-term community-based one-to-one support assesses need, introduces people to services and reduces demand for Primary Care. Our staff are experts in compassionate-listening, coaching, self-management and recovery techniques to foster resilience and wellbeing.	£49,063
Cruse Bereavement Care Scotland	Edinburgh Bereavement Services	Cruse Scotland will provide a community-based listening/counselling support for over 850 people who are bereaved across Edinburgh. On average clients will receive six sessions, which will improve their mental well-being and reduce their visits to GPs services. The service is delivered by highly trained volunteers at an accredited standard.	£34,000
Currie Day Centre	Day Centre for Older People	To enable Currie Day Centre to continue to run every Friday as a crucial and unique service for frail and isolated older people living in Currie, Balerno and Juniper Green. Transport is provided, with a programme of stimulating activities, social opportunities and a nutritious two-course lunch.	£12,880
Cyrenians –	Golden Years Community Connecting Service	A preventative service to reduce loneliness and social isolation in older people by connecting them with their community and in turn reduce the number of people who need support of statutory services and increase the number of people who can live at home for as long as possible.	£54,792
Drake Music Scotland	Musicspace	We propose to deliver Musicspace – a programme giving 80 disabled young people and adults in the Craigmillar area access to group music making activities which have proven benefits to mental health and wellbeing, physical coordination and social inclusion.	£18,000

Edinburgh & Lothians Greenspace Trust	Healthy Lifestyles in South Edinburgh	The project is to provide a programme of outdoor activities that promote physical activity and healthy eating for those who face health inequalities. The work involves developing the successful programme that has been running since 2013.	£104,559
Edinburgh Community Food	Healthier Food, Healthier Lives, Healthier Futures	The project will promote healthy lifestyles by delivering community food and health work across Edinburgh. The key components will be a range of cooking courses, nutrition workshops, health promotion sessions, training and support. We will also provide greater access to affordable healthy food within communities.	£161,528
Edinburgh Community Health Forum	Tackling health inequalities by building a stronger and more resilient 3 rd sector	To continue the work of the Forum which provides and coordinates tailored support, information and training to Forum members who are the managers of locally based community led health projects and to raise awareness strategically about the importance of addressing health inequalities.	£49,438
Edinburgh Garden Partners	Befriending Through Gardening	EGP and Edinburgh and Lothians Regional Equality Council (ELREC) will jointly deliver a befriending model, creating relationships through shared gardening within the black and minority ethnic (BME) communities. Using EGP's established and successful model, 15 befriending partnerships will be created annually between socially isolated, predominantly older garden owners and volunteers.	£22,970
Edinburgh Headway Group	Early Intervention ABI Rehabilitation Support Project	To provide an early intervention rehabilitation project for 20 adults in total with an Acquired Brain Injury to improve everyday functioning and encourage reintegration into the community. Our preventative support includes: independent living skills, physical activities, social opportunities, therapeutic creative activities, advocacy, complementary therapies and 1:1 Community Outreach.	£44,024

Edinburgh Leisure	Steady Steps	Edinburgh Leisure are seeking funding for Steady Steps, a 16-week group based physical activity and exercise falls prevention programme which focuses on improving strength and balance to deliver positive health and social outcomes for around 2,328 older adults over three years.	£117,007
Edinburgh Rape Crisis Centre	Rape Crisis support Service	The project will support the provision of our specialist, trauma-informed rape crisis support service for women, non-binary and trans people who have experienced sexual violence, including rape, sexual assault and childhood sexual abuse/exploitation. The proposed activities of the service include trauma support, counselling, advocacy and group support.	£73,512
Eric Liddell Centre	Caring for Carers Befriending Service	An emotional, physical and practical programme to support unpaid carers across Edinburgh delivered by the Eric Liddell Centre (ELC). This proposal will build on established experience/service delivery and increase the level of support being offered to carers throughout Edinburgh. Provide emotional support through linking, matching and ongoing support service in which volunteer befrienders offer a socially supportive relationship to befriendees	£24,456
FAIR Ltd (Family Advice and Information Resource)	FAIR – Information and advice for people with learning disabilities and their carers	FAIR will: Provide a welfare rights and financial capability advice service. Produce an Easy Read Newsletter every 2 months that will include and share information from key stakeholders. Work in co-production with the Health and Social Care Partnership to consult on the Strategic Commissioning Plan for People with Learning Disabilities.	£89,257
Feniks: Counselling,	“Reach Out, Help Within”	This project aims to tackle mental health inequalities and social isolation amongst Polish and Central Eastern European people in Edinburgh. We	£68,221

Personal Development and Support Services Ltd	Supporting Central Eastern European community in Edinburgh	will employ two therapists/counsellors, a CEE Mental Health Service manager and a community development worker to improve the provision of the mental health services, integration and cultural-bridging within the city.	
Fresh Start	Fresh Start: helping people make a home for themselves	Working with partners across Edinburgh and with volunteer teams, we will support people previously homeless to 'make a home' in new tenancies providing goods and practical support to 5,000+ households and 1000+ places on gardening, cooking, and employability activities. Service-users develop key lifeskills and access ongoing social and emotional support.	£85,430
Gorgie City Farm	Valued Volunteering	The volunteering program provides training and employability skills for some of society's most disadvantaged people. We will provide person centred volunteer training suited to their needs and abilities. Outcomes will include greater community engagement, reduced isolation and new skills. Organisation ceased to operate in 19/20	£30,520
Gowrie Care Ltd	Futures Hub	An accessible resource hub where vulnerable people who are, have been or are at risk of becoming homeless, can be supported to learn independent living skills and experience social, recreational, employment and educational opportunities they would otherwise be excluded from. Promoting health & wellbeing, tenancy sustainment, recovery and social inclusion	£59,199
Harlaw Monday Group	Harlaw Monday Group Day Care Centre	The proposal is to continue to operate a day care centre on one day per week for those elderly people living in the Balerno, Currie and Juniper Green areas who have been diagnosed with mild to moderate dementia or cognitive impairment.	£6,616

Health All Round	Health All Round Community Health Initiative	HAR is a community health initiative covering the Sighthill/ Gorgie ward of Edinburgh. We deliver a range of services to improve the physical, emotional & social wellbeing of local people. We specifically target low income and other vulnerable groups.	£190,367
Health In Mind	Craigmillar Counselling	10 hours a week counselling offered to people with anxiety, depression and similar issues living in the Craigmillar /Portobello area. Self-referrals, and referrals through GP's, voluntary organisations, social work or other professionals accepted. This proposal funds direct counselling costs, with other staffing, direct costs and overhead funded by NHS Lothian.	£13,000
Home-Start Edinburgh West and South West (HSEW)	Promoting positive perinatal mental health	Access to family learning from a perinatal stage provides opportunities for parents/carers to gain confidence in their role and has a positive impact on mental health and children's learning outcomes/resilience. Promotion of attachment is offered through Baby Massage and Peep. Home-based support is available where required.	£24,910
LGBT Health and Wellbeing	Core Funding and Community Programme	The project will support LGBT Health's work to promote the health, wellbeing and equality of lesbian, gay, bisexual and transgender (LGBT) adults, as well as funding to continue established social capital work through our Edinburgh LGBT Community Programme of social, community engagement and volunteering activities.	£98,500
Libertus Services	Positive Futures - The Volunteering Project	The project is a collaboration of 2 well established projects with proven track records based within Libertus Services. Using the 5 principles of community development we aim to reduce social isolation, promote healthy lifestyles/mental wellbeing and build strong and inclusive communities by running groups for older people and recruiting volunteers	£121,806
Link Up	Link Up Women's Support Centre	Women's Mental Health & Wellbeing services including: <ul style="list-style-type: none"> • 2 weekly evening peer support groups • weekend healthy eating lunchtime drop-in • weekend one to one support and initial assessments 	£44,576

		<ul style="list-style-type: none"> • week day, evening and weekend counselling service creche services for mothers attending the weekend drop-in and counselling service	
Lothian Centre for Inclusive Living (LCIL)	Lothian Centre for Inclusive Living (LCIL)	<p>We will deliver comprehensive benefit checks and follow up support to physically disabled people.</p> <p>We will extend our Grapevine Disability Information Service to cover Universal Credit claims and raise awareness of the support we can provide, through collaborative working, with this new extremely complex benefit across the 4 localities.</p>	£23,151
MECOPP Jump Start	MECOPP Jump Start	The project will deliver a 'broad-based health literacy and health improvement service to Chinese people aged 40+ who are disadvantaged by age, disability or long-term health condition, economic or social circumstances through the provision of: health information sessions, educational workshops, physical activity programme and supporting civic engagement	£31,446
MECOPP BME Carer Support	MECOPP BME Carer Support	Carer support service for Black and Minority Ethnic carers (primarily South Asian and Chinese) to include casework support, telephone based multi-lingual advice and information and carer training. Training on 'achieving cultural competency' will also be provided to health and social care staff.	£64,794
Multi-Cultural Family Base	Multi-Cultural Family Base – Syrian Men's Mental Health Group	<p>Group supporting Syrian men newly arrived to Edinburgh under the United Nations Scheme for Vulnerable Persons Relocation.</p> <p>The group will support 15 men per week with issues including integration, employment and English language. The project will also offer outreach and befriending, including for men who cannot attend the weekly sessions.</p>	£16,352

Murrayfield Dementia Project	Murrayfield Dementia Project	Day resource for those with dementia	£54,815
Om Music Sanctuary Om Music Sanctuary	Om Music Sanctuary Om Music Sanctuary	Om offers opportunities to learn and play music, for the mental health community. This funding will be for a free programme of weekly individual/group lessons, band rehearsals, weekly/Saturday 'Music Café' and concerts in the Stafford Centre. Om opened Nov/17, and we already have 70+ registered members.	£11,226
Pilmey Development Project	Pilmey Development Project (PDP) – Older Peoples Services	PDP will deliver activities, services and opportunities within Leith and North East Edinburgh, reducing social isolation, promoting participation and inclusion of socially isolated older people in need of community-based support, using low level, preventative, early intervention and self-help approaches, which improves their quality of life.	£71,029
Pilton Equalities Project Mental Health	The Mental Health & Wellbeing Support Service (Neighbourhood Group)	The Service will provide support to older people with enduring mental health problems; who may have significant issues with substance dependencies; to remain and participate in the community. The service aims to increase individual capacity; improve group co-operation and socialization; raise skills and confidence; encourage wellbeing preventing readmission to hospital.	£86,076
Pilton Equalities Project Day Care Services	Pilton Equalities Project Day Care Services	PEP will operate 5 daycare clubs, a weekend provision, a visiting/assessment service across North Edinburgh for vulnerable older adults; reducing isolation and enabling older people to stay in their homes longer, and enhancing a level of independence and socialisation. This supports CEC's Reshaping Care for Older Peoples prevention strategy.	£84,100
Portobello Monday Centre	Portobello Monday Centre	The project will provide informal day-care once a week for our members (10 to 12) who suffer from dementia, whilst at the same time giving some	£4,188

		valued respite for their carers. The service is run entirely by volunteers for members resident in the Portobello area.	
Portobello Older People's Project	Portobello Older People's Project	Portobello Older Peoples Project is a lunch/social club that gives older people the opportunity to have the company of others and enjoy a hot meal. It supports people who are isolated and the aims are to reduce loneliness and social isolation, increase social connectivity and improve health & wellbeing.	£15,074
Positive Help	Positive Help	Positive Help will deliver needs-led services to vulnerable adults affected by HIV/AIDS and Hepatitis C. Supportive Transport and Home Support enables service users to live independently, positively engage with health services, thus improving wellbeing and quality of life. These services deliver best value and reduce pressures on NHS and Council services.	£47,665
Queensferry Churches Care in the Community	Queensferry Churches Care in the Community	Develop a Community Hub for older people living in the rural areas of South Queensferry, Dalmeny, Kirkliston, Newbridge, Ratho Village and Station. To ensure that older people are well connected, have a variety of support services and volunteering opportunities, therefore enabling them to participate and remain active in their communities.	£40,429
Rowan Alba Limited	Rowan Alba Limited	CARDS is a city-wide volunteer led service which supports people with Alcohol Related Brain Damage (ARBD), who are at risk of developing ARBD and people whose alcohol use puts them at risk. We require funding to continue to deliver this service across all localities and improve health outcomes for people who use this service	£48,951
Scottish Huntington's Association	Lothian Huntington's Disease Service	The Lothian Huntington's Disease service will deliver an integrated Health & Social Care model of person-centred care-management to people impacted by Huntington's disease across Edinburgh City. Providing specialist assessment, expert advice, information and one to one support	£32,452

		to reduce social isolation, increased resilience, improved quality of life and well-being	
Sikh Sanjog	Health and Wellbeing Group	The Health and Wellbeing Group, partnering with health organisations, will deliver a programme focussing on preventative measures by providing a safe space for ethnic minority women to access bespoke activities, designed to support their mental and physical health and wellbeing, reduce isolation and loneliness, increase confidence and develop interpersonal skills.	£24,392
South Edinburgh Amenities Group SEAG	South Edinburgh Amenities Group SEAG	Utilise our specially adapted minibuses to enable elderly, frail and other vulnerable groups of people in our communities to access a range of 30 voluntary sector, lunch clubs, day centres, and dementia services, which will contribute to the passengers' mental and physical well-being and therefore reduce their social isolation.	£70,902
South Edinburgh Day Centre Volunteer Forum	South Edinburgh Day Centre Volunteer Forum (SEDCVF)	The grant is to assist with the running costs of five local day groups for people aged 60+ who are socially isolated in the SE area of Edinburgh. The grant will be to employ trained care staff, transport and volunteer expenses.	£25,000
Support in Mind Scotland RAISE for Carers	Support in Mind Scotland RAISE for Carers	We will deliver an integrated support, information and education service for carers of people with mental health problems/mental illness Reception: open access; Assessment: compassionate response and review; Information: rights and services; Support: crisis, emotional and practical; Empowerment: rights, advocacy and resilience for the future	£22,630

The Broomhouse Centre The Beacon Club	The Broomhouse Centre The Beacon Club	We are seeking funding to develop The Beacon Club: our services for older people with dementia in South West Edinburgh which prevents this long-term condition affecting their quality of life in old age.	£51,681
The Broomhouse Centre on behalf of Vintage Vibes Consortium	The Broomhouse Centre on behalf of Vintage Vibes Consortium	A city-wide project to tackle isolation in Edinburgh's loneliest over 60s through creating long term, locally based one-to-one friendships based on shared interests. This is a Vintage Vibes Consortium application for 2.5 Service Coordinators for 3-year period. The Consortium is a partnership between LifeCare and The Broomhouse Centre.	£41,603
The Broomhouse Health Strategy Group	Supporting Healthier Lifestyles	To improve physical and mental health and wellbeing in SW Edinburgh, a recognised area of deprivation, we will deliver a programme of volunteering, healthy eating and exercise services. Our comprehensive package of support will also help vulnerable people overcome barriers to effective parenting, build positive relationships and develop resilience.	£56,958
The Dove Centre	The Dove Centre	The Dove Centre is a social day centre whose aims are to help older people remain as independent as they can be through a variety of socially inclusive activities, learning, volunteering, fresh meals and fully accessible transport.	£126,118
The Health Agency	The Health Agency	The Health Agency is an organisation that aims to promote and develop a community led approach to health improvement in an area that experiences a high level of social and economic deprivation.	£175,188
The Living Memory Association	The Living Memory Association	We will use reminiscence projects to decrease isolation and improve the health and quality of life of isolated older people and their carers. We will run groups, a 'drop in 'facility, recruit older volunteers and work with those who are housebound offering a whole range of activities and ongoing support.	£24,665

The Open Door Senior Men's Group	The Open Door Senior Men's Group	The group will continue to provide a safe and supportive space for men over the age of 60, who are at risk of social isolation, to meet, make friends and participate in a programme of shared activities one afternoon per week.	£6,341
The Ripple Project	The Ripple Project	Using a community-led approach the Ripple aims to improve the quality of life for all ages living in our community by helping people to help themselves.	£89,675
The Welcoming Association	The Welcoming Association	Welcoming Health is a programme of volunteer-led health and wellbeing activities for migrants and refugees in Edinburgh. It is designed to promote active lifestyles, improve wellbeing, reduce isolation and build community between locals and newcomers to the city.	£15,461
Venture Scotland	Venture Scotland	We will deliver four weekend residential experiences, four extended 5-day residential experiences plus 32 x full-day outdoor activity sessions across Edinburgh's four areas. The programme is designed to build physical, emotional and mental wellbeing, resilience, development of problem-solving skills, building positive relationships and the opportunity to experience meaning and accomplishment.	£45,002
VOCAL	VOCAL	This application seeks funding to allow an additional 100+ carers a year to access and benefit from professional counselling, to respond to a growing need for counselling support and help carers manage the severe emotional impacts of many caring situation arising from changing relationships and the effects guilt, anger and social isolation.	£49,497
Waverley Care	Waverley Care	This project will support populations affected by HIV and Hepatitis C to live healthy positive lives and to achieve their full potential. Through outreach, self-management programmes, peer mentoring, befriending and volunteer opportunities, we will address the health and social inequalities that impact on people affected by these conditions.	£191,753

SUB TOTAL			£3,768,251.00
CHAI, Citizens Advice Edinburgh, Granton Information Centre, NHS Lothian	Income Maximisation – Welfare and Debt Advice		£828,467
TOTAL			£4,596,718.00

Appendix 2 - Case Studies

Case Study – Fresh Start

Joanne is in her 40s and lives alone. She had an eating disorder when she initially got involved with Fresh Start in 2017 after receiving information about their services from her Occupational Therapist. She took part in a Fresh Start cooking course but then her health deteriorated, and she couldn't continue.

Two years later she felt she was well enough to come back to Fresh Start. She had felt positive about the earlier experience even though she could not carry on. In 2019 Joanne completed a 4-week cooking class where she worked in a small group with a volunteer learning to cook and then eat together. Joanne then felt confident enough to join in the 8-week Cook Club. The Cook Club uses produce donated from Fareshare, from Fresh Start gardens (in season) and purchased supplies for participants to come together to cook up to 6 meals. These are then shared out between everyone to take home for the week ahead/store in their freezer. The groups are led by experienced volunteers who create a relaxed, friendly and sociable environment for everyone attending, providing lots of individual support to enable people to participate.

Attending the cooking courses helped Joanne socially and she is now cooking more in her home. She no longer relies on microwave meals and is back to cooking at least part of her meal from scratch which makes her feel better.

Case Study – Steady Steps

Bett, who is in her 90s, was referred to Steady Steps after she had a bad fall which resulted in a stay in hospital. Prior to attending Steady Steps, Bett struggled to walk and this impacted on her day-to-day life. She couldn't do very much around the house and leaving the house to go to the shops or run errands was impossible. She described herself as 'housebound' and felt isolated as a result.

When her physio suggested a referral to Steady Steps, Bett wasn't sure what to expect but was willing to give anything a go. On arriving at her first class Bett felt reassured as the instructor took time to talk to her about everything that was going to happen and suggest alternatives to the exercises Bett couldn't do.

Bett is now able to walk more easily and has regained her independence. Prior to COVID-19, she was able to get buses and do all her own shopping. The friends she has made through attending the classes have been as important as the physical gains.

Case Study – Venture Scotland

John had been living a chaotic lifestyle with very little structure before he came to Venture Scotland (VS). He was trying to deal both with his own issues and family problems and felt trapped. John ended up spending his time drinking so he didn't have to think about his problems or how to change anything in his life.

John was angry, depressed, isolated and felt 'broken'. Eventually he reached crisis point and tried to kill himself. He ended up in hospital and went through various mental health programmes before being introduced to Venture Scotland by his link worker.

The structured programme has four different group stages: Challenge, Discover, Explore and Leadership. All parts of the programme offer opportunities to take part in outdoor activities such as rock climbing and coasteering as well as group wilderness residentials.

The Discover element introduced learning about mental health and involved a five-day stay at the VS bothy (an old shepherd's cottage in Glen Etive, Scottish Highlands). John found 'Discover' much more intense than the first trip as it meant confronting more serious issues in some sessions and sharing things about himself with the group. After taking part in 'Discover' John realised that he needed to apply what he was learning at VS to his life, rather than just turning up to distract myself from his life and then expecting things to change by magic. In the final stage of the course 'Leadership', the group has a lot more independence and input, planning two expeditions. Group members learned new skills including first aid and navigation.

At the end of the programme, John said 'Aside from the various activities, Venture Scotland has helped me get from some of the absolute worst pits of despair that I have ever been in, to feeling like I'm a person again, like I'm an actual member of society.'

Case Study – South Edinburgh Lunch Club

Stephen lives by himself and was struggling with loneliness and isolation. Stephen's social worker referred him to the South Edinburgh lunch club.

The lunch club put things in place to enable Stephen to attend. At the start staff gave him a welfare call on the days he was attending to make sure he was up and ready for the transport to the club. They also paired Stephen with other people who had similar interests so that he felt welcome and included.

It took Stephen a while to integrate into the group. However, he spoke more each week, then started to take on more of a leadership role. He started assisting a volunteer with activities and became a mentor for new members coming into the service. Stephen also started taking part the exercise activities, despite his initial reluctance, as staff gave him a lot of encouragement and took it at his pace.

Stephen's personal outcomes were to get into more of a routine and to find ways to manage his anxiety. As a result of attending the club, Stephen has been able to introduce routines at home to help him

better manage his medication and meal planning. He also is coping better with his anxiety.

Case Study – Advice Workers in Health Settings

Julie is a 27-year-old single parent, living in temporary supported accommodation following incidents of domestic violence. She suffers from post-traumatic stress, agoraphobia, anxiety and depression. She attended the service along with her support worker to get advice in relation to her PIP application.

Because of her mental health issues, Julie found the interview itself very challenging and she required additional measures to be taken to ensure that the environment was safe and accessible for her to engage in the session. The adviser was sensitive to her needs and took time to understand how best to engage with her and the role the support worker could provide. Julie had been in receipt of DLA for many years. As well as providing income to support her career needs, this also included a mobility component for a bus pass, which is essential in supporting Julie to feel safe when travelling. Despite her long standing and evidenced disabilities, Julie was turned down in transition to PIP and so was supported to complete an application for a mandatory reconsideration.

The impact of this decision has been significant for Julie and added to her levels of distress and anxiety. This also placed Julie and her child in financial hardship. As a result of the accessibility of our services and the breadth of knowledge and expertise of the adviser Julie received the time, support and negotiation she required to deal with these issues and successfully appeal the decision.

Appendix 3 – Standard Impact Assessment Questions (SIAQs)

Notes

- Please select the questions that are relevant to your project activity
- The headings e.g. “Increased social capital”, are there for ease of reference- they need not be used with service users
- The use of the face symbols is optional. Alternatively you may wish to use only the wording on the scale i.e. “Strongly agree/ Agree-/Don’t Know/ Disagree/Strongly disagree”
- You may supplement the SIAQs with additional questions, and incorporate them into your usual format
- The definition of community should include both geographic communities and communities of interest

Standard Impact Assessment Questions

1. Increased Social Capital

a) I feel less isolated since using the project.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree

b) I feel more connected to my community (seeing more people, getting out and about more).

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree

c) I am more able to participate in community activities (eg. social activities, community events, groups, school life, adult learning, etc).

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree

Impact of volunteering

d) I feel I have gained new friendships/contacts I can call on

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree

e) I have gained new skills

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree

f) I have gained in confidence/self esteem

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree

g) I feel of value and /or am valued

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

2. Increased Community Capacity

a) I feel more involved in my community since using the project.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

b) I feel that my opinion matters.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

c) I feel more positive about my local community.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

d) I have a better understanding of the people and groups within my community
(e.g. black and minority ethnic, lesbian, gay, bisexual and transgender,
disabled, older, younger, carers, etc.).

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

3. Reduce the stigma surrounding poverty and health

NO questions developed

4. More people live in healthy environments and use greenspace

a) I am more aware of greenspace (e.g. gardens, allotments, local walks, etc.)
and local parks since using the project.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

b) I feel more comfortable using greenspace and local parks.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

c) I am using greenspace and local parks more often.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

5. Increased participation in physical activity

a) I am more aware of the importance of physical activity since using the project.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

b) I am more physically active than I used to be (e.g. gardening, walking, housework, exercising, dancing etc).

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

c) I have changed my travel habits e.g. using the car or bus less often and getting about by walking or cycling

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

d) In the past week, on how many days have you done a total of 30 min or more of physical activity which was enough to raise your breathing rate? This may include sport, exercise & brisk walking or cycling for recreation or to get to and from places.

1 2 3 4 5 6
7 None

6. Increased numbers of people eat healthily/ know how to cook healthy food and how to eat healthily on a budget.

a) I am more aware of the importance of eating healthily since using the project.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

b) I feel more able to cook healthy meals.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

c) I am eating more healthily (*including 5 daily portions of fruit & vegetables*).

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

d) I feel more able to plan my meals/food shopping since using the project.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree
    

7. Reduced damage /harm to physical and mental health from misuse of alcohol and drugs

a) I have a better awareness of the risks & harm that alcohol and or drugs can cause to my health and wellbeing since using the project.

Strongly Agree 😊😊	Agree 😊	Don't Know/Unsure 😐	Disagree 😞	Strongly Disagree 😞😞
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b) My involvement with the project has encouraged me to reduce my alcohol consumption

Strongly Agree 😊😊	Agree 😊	Don't Know/Unsure 😐	Disagree 😞	Strongly Disagree 😞😞
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c) My involvement with the project has encouraged me to take fewer drugs.

Strongly Agree 😊😊	Agree 😊	Don't Know/Unsure 😐	Disagree 😞	Strongly Disagree 😞😞
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d) I have more awareness of how to access help and support to reduce my drug or alcohol use.

Strongly Agree 😊😊	Agree 😊	Don't Know/Unsure 😐	Disagree 😞	Strongly Disagree 😞😞
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8. Reduced levels of anxiety/ depression

a) I am more aware of things that affect my mental/emotional health and wellbeing since using the project.

Strongly Agree 😊😊	Agree 😊	Don't Know/Unsure 😐	Disagree 😞	Strongly Disagree 😞😞
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b) I feel more able to cope with the “ups and downs” of everyday life.

Strongly Agree 😊😊	Agree 😊	Don't Know/Unsure 😐	Disagree 😞	Strongly Disagree 😞😞
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c) My mental/emotional health is better.

Strongly Agree 😊😊	Agree 😊	Don't Know/Unsure 😐	Disagree 😞	Strongly Disagree 😞😞
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9. Reduced damage to physical and mental health from all forms of abuse and violence

a) I am more aware of different forms of hate crime, emotional abuse and physical violence since using the project.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree

b) I feel more confident that I will be able to seek support and help when I need it.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree

c) I feel more in control of my life and able to sustain healthy relationships.

Strongly Agree Agree Don't Know/Unsure Disagree Strongly Disagree

10. Increased income due to improved access to income maximisation services and advice on problem debt levels.

a) I have more awareness of how to access help with welfare benefits and debt issues since using the project.

Strongly Disagree Disagree Don't Know/Unsure Agree Strongly Agree

b) I feel more confident that I will seek help with welfare benefits when I need it.

Strongly Disagree Disagree Don't Know/Unsure Agree Strongly Agree

c) I feel more confident to seek help with debt issues before a crisis is reached

Strongly Disagree Disagree Don't Know/Unsure Agree Strongly Agree

d) I am more able to manage my finances.

Strongly Disagree Disagree Don't Know/Unsure Agree Strongly Agree

e) I feel less anxious about my financial situation.

Strongly
Disagree


Disagree


Don't
Know/Unsure


Agree


Strongly Agree
