

Agenda Item	4iii.
Report No	CP/14/20

HIGHLAND COUNCIL

Committee: Communities and Place

Date: 25 November 2020

Report Title: Progress report on the Framework for Community Participation and Involvement

Report By: Executive Chief Officer Communities and Place

1. Purpose/Executive Summary

1.1 One of the Council's core strategic commitments is to improve our working with communities and encourage greater involvement in service design, priority setting and delivery. This is also reflected in the Council's Recovery Plan, with Community Empowerment a key priority. As part of the Recovery Plan, this Committee agreed a [framework for engagement and involvement](#) with our communities for the months ahead. This will help us to better understand the impact of covid on our communities and individual groups; to understand the learning from the response efforts; to understand need and actions required to mitigate impacts on specific groups and to serve as a basis for establishing priorities for communities moving forwards. A further aim of this approach is to build on the strength of community support and action over the past few months and improve and create sustainable working relationships with communities and their involvement in Council decisions and services overall in the future.

1.2 This report provides Members with:

- an update on the reach and methods used to date. This includes 14 community conversations with a range of local and regional community bodies, engagement with HIE and the informal feedback gathered from anchor organisations, a telephone survey of a random sample of people seeking support during lockdown, a survey undertaken by the Highland Senior Citizens Network and a follow-up focus group run by the Council with the HSCN Board, a survey undertaken by Inclusion Scotland (including Highland residents), feedback from HLH from its youth work provision, care experienced young people and Highland Youth Parliament Executive Group;
- some of the key messages emerging and key areas for progressing from the feedback received to date. These are building community networks, improving communication, addressing the increasing challenge and issues related to mental

health and wellbeing and addressing food insecurity, food poverty and fuel poverty; and

- an outline of work underway to broaden and deepen our engagement with more people.

2. Recommendations

2.1 Members are asked to:

- consider and discuss the feedback from engagement work undertaken to date in sections 5 and 6 of the report;
- note the work planned and currently underway and that an update report on further outcomes from the various engagement strands will be presented to the next meeting of the Communities and Place Committee;
- note key areas for action and development as a result of the feedback received so far.

3. Implications

3.1 Resource: Most engagement work will be undertaken internally or in partnership with our Third Sector or Community Planning Partners. Wherever possible, this will be incorporated into existing work with service users and groups. It is important that engagement work of this nature is embedded within service structures going forward. Some external support is likely to be needed for specific communities of interest where expertise in engagement is required and possibly Citizen Panel analysis. The costs of this will be met from within existing resources.

3.2 Legal: This work will contribute to developing our next set of Equality Outcomes due in April May 2021 which will support our compliance with legal equality duties and community empowerment legislation.

3.3 Community (Equality, Poverty and Rural): The Equality and Human Rights Commission continues to remind public bodies of their ongoing statutory duties when making decisions during and regarding the pandemic to take account of the Public Sector Duty to consider eliminating discrimination, advancing equality and fostering good relations. Additionally, the Fairer Scotland Duty requires the Council to take socio-economic disadvantage into account when making strategic decisions. An important outcome of this engagement therefore is that the feedback will help inform the Equality Impact Assessment and Fairer Scotland Duty Assessment of the Council's Recovery Plan. Engagement with equalities groups will also help to inform individual priorities of the recovery plan and the review of the Council's Equalities Outcomes, due April 2021.

3.4 Climate Change / Carbon Clever and Gaelic - There are not considered to be any implications.

3.5 Risk: There may be some challenges in engaging with particularly vulnerable groups. It is therefore proposed to work with trusted third parties or seek external support in order to mitigate this risk.

4. Background

4.1 One of the Council's key strategic priorities within its Corporate Plan is to:

Work to invigorate local democracy and put our communities at the heart of the design and delivery of services at a local level. We will also develop the capacity of communities to decide and deliver their local priorities.

The empowerment theme of the Council's Recovery Plan focuses on developing this priority further but within the context of the ongoing pandemic and with a view to recovery and renewal. This focuses on taking forward our placed based approach to planning, designing and delivering services which would include: new ways of working with communities, including whether there are new ways of running services locally; new ways of supporting community groups and bodies; and greater involvement of communities in service design, priority setting and delivery.

4.2 An engagement framework to support this overall approach was agreed at the July Recovery Board and subsequently at this Committee in August. The framework will support the aim of better understanding the experience and impacts of covid-19 on our communities and individuals. It will also help gather learning from the response efforts, understand needs and potential areas for action in order to mitigate the impacts of the virus and the associated measures introduced to restrict its spread. Three strands of engagement were set out:

- Engagement with communities – including individuals, community groups and people using Council covid services.
- Engagement with communities of interest – recognising that some groups and individuals within our communities have experienced greater impacts as a result of covid than others.
- Engagement with Business – with core sectors in the community, key representative groups and in specific places.

This report concentrates on the feedback and learning from the first two strands, recognising that engagement with business and the learning from this is addressed through the Highland Economic Recovery Partnership and other related forums.

5. Engaging with Communities

5.1 This strand of engagement focuses on hearing from the general public, community groups – particularly those who have been involved and supported their communities throughout the pandemic – and also recipients of support. A clear aim is to understand the learning from the pandemic but also understand the impacts and experience of covid.

5.2 Engagement with Groups

Between the end of August and mid-September a series of 14 community conversations were held with groups who had been providing support during the covid lockdown period and beyond. Some were established pan-Highland third sector organisations, some service delivery third sector organisations, others Community

Councils or Community Trusts and finally a number of new organisations who had responded specifically to provide support to their community during the emergency period. There was a mixture of groups with paid staff and volunteers, some who were able to attract funding to employ a paid development worker but many co-ordinated and organised purely by volunteers. Many are still operating and currently preparing for the winter months ahead. These conversations were led by the Council Leader and Chair of this Committee in conjunction with each Area Chair.

5.3 Key themes from these 14 community conversations and the sessions from groups in attendance at Area Committees during the summer period are summarised below. This feedback looks specifically at what worked well, what could have worked better, future challenges and areas for further development. These are explored in more detail in appendix 1.

5.4 **Learning from Covid - what worked well**

Key messages from groups on what worked well included:

Strength of community response

- Overwhelming community response at grass route level across the area (339 active local groups recorded but additionally many informal also in place) with strong support within communities through volunteering.
- Rapid standing up of response groups and the flexibility of local provision to adapt and respond to changing position and learning of need within communities.

Local solutions for local places

- Bottom up approach to defining community needs led to solutions designed to support the local area.
- Where local volunteer groups engaged directly with their communities, this built trust, confidence and supported local solutions.

Strong local networks

- Importance of pre-existing community capacity and trusted networks of colleagues to draw on – third and public sector.
- Development of new covid focused networks comprised of existing and new community organisations.
- Throughout the period the sharing of experiences and learning through networks provided peer support and ensured effective co-ordination of activity.

Adaptation of services

- Ability of existing support organisations (e.g. carers groups, mental health support groups, youth support) to adapt their services and provide them virtually or via telephony to ensure continuity and continued support for client groups

Additionality of response

- Whilst the focus for the majority was on ensuring the wellbeing of people through food/medicine provision and befriending/social contact support, in some communities a wide range of community-based support developed.

5.5 **Learning from covid - What could have worked better**

Groups were also able to identify where things could have worked better:

Communication

- Communication was identified as an area that had worked well for some – welcoming communication with the Council - but not for others.
- Some groups reported that in the beginning, the constant changing picture was confusing and challenging and messaging from the Council could have been clearer and more frequent.
- In some areas the lack of communication early on led to a lack of focus and co-ordination, resulting in duplication of provision and effort.
- Some feedback suggested clearer guidance and contacts are required for local groups – particularly new ones or those not previously involved in welfare support – for support with mental health/wellbeing issues they were observing within their communities

Identifying need

- In some instances, support was provided universally within some communities rather than identifying or targeting those in specific need. This has been changing in subsequent months.

Gaps in provision

- With community-based services unable to operate in their normal way, or some unable to operate at all, this led to gaps within provision supporting the most vulnerable e.g. lunch clubs, vulnerable family groups/networks, peer support networks.

Stigma

- A strong feeling from some groups that not everyone requiring support accepted it or reached out for it, potentially as a result of the stigma associated with doing so, and often needing to do so for the first time.

5.6 **Challenges and Areas for Focus Moving Forward**

Digital Connectivity

- Whilst enabling many groups to continue operating and developing innovative practice to reduce social isolation, the lack of digital connectivity for many is an ongoing challenge. There is a strong feeling that this is exacerbating social isolation and people's ability to access support services that can no longer be provided face to face. This has particular implications for disabled people, – more likely to not be on-line – for older people and for young people.

Mental Health and Wellbeing

- A steady growth in mental health and wellbeing issues is being observed across the area. This ranges from a reduction in feelings of wellbeing and increased anxiety through to mental health crisis, recurrence of existing issues and new and emerging issues for individuals. Issues being exacerbated by lockdown and social isolation and financial concerns.
- Mental health support is also required for some volunteers and staff where the prolonged response efforts are having a negative impact.
- Feedback suggests demand is increasing for certain support services particularly for carers, befriending/social contact and mental health support groups.
- There is also demand for clear guidance on how community groups and volunteers can best support individuals and signpost to services.

End of furlough (conversations took place prior to October announcement)

- Concerns at the forthcoming end of furlough and the potential impact on communities - particularly in terms of food insecurity, fuel poverty and the need for wellbeing support.

Volunteer fatigue

- Significant concern over burnout of key volunteers, often extending themselves over multiple local groups and a prolonged period.

Funding

- Whilst the wide range of funding available during the lockdown and early part of the pandemic was welcomed, concerns now exist at the uncertainty over future funding sources and how groups can continue resilience provision into the winter months without support.
- Importance of targeting funding to where need is greatest and co-ordination of funding efforts to ensure no duplication.
- Groups reported concerns regarding sustaining basic operation as a result of impact to their regular income.

Communication and Collaboration

- Importance of communication going forward – looking to the Council for regular updates and as an authoritative source given the scale of information available.
- Importance of collaboration and co-ordination through local networks between community, third sector, public sector partners and appropriate private sector businesses e.g. supermarkets/local stores.

5.7 *Engagement with Anchor Organisations*

Highlands and Islands Enterprise co-ordinated and managed the Supporting Communities Fund which awarded over £1.4m to organisations across Highland. Funding was awarded to 'Anchor Organisations' who then co-ordinated funding to

smaller local groups within their area. A number of the groups engaged in the community conversations the Council held were also anchor organisations.

- 5.8 Informal information gathering by HIE from anchor organisations identified a range of key points which align well with the messages emerging from the Council's community conversations. These include:
- Higher demand than expected for meals, food banks, essentials but evidence emerging that some of this is related to financial issues for individuals as a result of self-employment/redundancies. Concerns expressed at the impact the end of furlough may bring.
 - Concerns at volunteer fatigue both in terms of individuals returning to work and volunteer burnout.
 - Concerns regarding mental health and the potential support networks needed going forward. Online training for volunteers being delivered on how to support vulnerable residents.
 - Focus on food within communities –growth of food larders, recycling food no longer required from business, a focus on growing it locally and sourcing locally produced food.
 - Importance of local funding to develop local solutions to managing the crisis and also recovery.

5.9 *Feedback from Individuals*

Work began at the beginning of November to undertake a telephone survey with individuals who had sought support during the lockdown period from the Council. Individuals would have been in contact via the Council's helpline to seek support. 60 individuals will be called as part of the survey; 30 shielding and 30 non-shielding clients. The sample has also been drawn to provide geographic representation across Highland. Individuals have been randomly selected within the above parameters.

- 5.10 Key areas for questioning include:
- What people's experience was during lockdown; what worked well for them but also what was challenging?
 - What support did they receive from the Council, how they heard about this and what was their experience?
 - What is important to them in the coming months?

5.11 At the time of writing, the survey has only recently commenced however the early messages from those who had been shielding were particularly positive regarding the helpline and how helpful it had been in directing people needing support. Detailed feedback will be provided to the next committee.

6. **Engaging with Communities of Interest**

6.1 It is good practice with any engagement to design an approach to ensure that the voice of groups with protected characteristics (as defined in the Equality Act 2010) and people who are excluded from participating due to disadvantage relating to social or economic factors, is heard. We also know that there is an emerging body of

evidence about those who are most at risk of covid and also those most likely to be impacted economically, socially and personally by decisions and policies in response to the pandemic. This includes: young people, older people, disabled people (including those with mental ill health), black minority ethnic groups (BME), people experiencing domestic abuse, carers and people experiencing homelessness. It is important that we hear from groups who are likely to have experienced a disproportionate impact as a result of covid.

6.2 Below is a summary of feedback from a range of key groups to date. This has involved working with partners and lead third sector groups already engaging with their communities.

6.3 **Older People**

Highland Senior Citizens Network (HSCN) is a network of local voices to represent the views of older people. They work with their membership to hear the issues and concerns of older people and advocate on their behalf. They also provide opportunities to bring people together to share ideas and provide mutual support. HSCN undertook a survey in August to explore their Members' views and experiences of lockdown and to consider key areas of support required in the future. This received 44 responses which they were happy to share with the Council. The Council followed this up with a focus group with HSCN Board members and development workers which explored a number of the issues identified in the survey in more detail. Whilst a number of the messages from community groups focused on impacts and experience of particular groups, this survey and engagement was focused specifically on the experience of older people.

6.4 Areas of concern or challenge identified by respondents included:

- Accessing shopping and money – with no friends or family available, and difficulties accessing supermarket deliveries, accessing supplies was challenging.
- Health – not able to access core health services, this included hospital-based appointments but also non-covid related GP appointments.
- Mixed messaging – confusion regarding messaging and the difference between early advice for certain groups to 'self-isolate' and subsequently shielding.
- Digital access – the move and reliance to things online proved difficult for many to adapt to, even if they had access to technology. However, many did not have appropriate technology and whilst some would wish access, there are other individuals who do not want online access.
- Social isolation and loneliness – one of the biggest challenges shared; not able to see or meet with people in normal ways or through normal networks. No human contact and no *physical* contact with anyone. Not physically able to go for daily exercise and to see others.
- Lack of normal routine – linked to social isolation and removal of normal social aspects of life e.g. not able to make the normal visits for shopping, supplies, services and see people.

6.5 A range of things were identified by respondents that made things better during lockdown. These included:

- Family and friends to provide support – social support, support with accessing shopping and supplies
- Community/neighbour support – local groups providing shopping services/delivering meals or neighbours doing the shopping, local shops delivering, social contact:
“One thing COVID did was bring out the best in people”
- Contact with others – through phone, letters, online technology
- Routine – keeping busy, daily walks around neighbourhood providing contact with others

6.6 Individuals were asked what was important going forward:

- Importance of social contact – with families and friends but also through peer support networks, local groups being able to come back together. Support to connect was noted as important.
- Services restarting – a particular focus on NHS services being available but more generally libraries, dentistry, hairdressing, optician etc.
- Availability of information – supporting people to get online and making it easier, information being available locally in other formats – keeping people informed is vital and consistent messaging crucial

6.7 Whilst a number of the issues identified, both what worked well and what was difficult, were similar to those expressed by the wider population, there was also some aspects and focus that appear to be of greater significance to older people. This will be explored in more detail as further learning takes place but key areas to highlight:

- The strength of feeling of isolation was significant. Many across the network followed the original advice provided by the Government for over 70s and chose to isolate for the period and therefore had limited outside contact. The main ask of HSCN going forward is to bring people back together.
- Linked to this, and remaining at home, was the loss of independence and reliance on others. Being able to resume normal activities was seen as important for a number of older people, this included volunteering which many were unable to do over the period however for others there is now increased anxiety about going out and resuming normal activities.
- Increasing the sense of isolation was the loss of individual natural ‘advocates’ where people would turn for advice and support. This could be as a result of not being able to see friends and family but also local groups or organisations where staff had been furloughed and were not working.
- The shift to reliance on digital is significant as older people are less likely to be online. Whilst some would wish to, others are not interested. The focus on digital has increased the feelings of social isolation however finding alternative approaches have been difficult.

6.8 **Disabled People**

Inclusion Scotland is a national disabled people's organisation. It is led by disabled people with the aim of influencing decision makers and supporting disabled people to be decision makers. In April, Inclusion Scotland undertook a survey of disabled people and their carers across Scotland. Over 822 people responded, with 119 responses from Highland.

6.9 Further work planned with Inclusion Scotland is outlined below but key messages from this survey early in the pandemic highlighted:

- Changes to social care support – around half of respondents indicated that covid had had an impact on their support - both formal and informal.
- Caring – 40% of respondents indicated they had new or increased caring responsibilities.
- Food and medicines - 64% indicated that the pandemic had had an impact on access to food and medicine supplies as they were not prioritised for supermarket deliveries or classed as 'clinically vulnerable' (shielding) which enabled national support.
- Social isolation – disabled people with and without pre-existing mental health conditions were finding lockdown extremely stressful.
- Job loss - a number of respondents were concerned about the loss of employment.

6.10 Analysis from the Highland responses focused on the impact on social care specifically, and also on children and families. This further highlighted:

- 40% of Highland respondents also reported changes in social care support
- Feedback also reflected changes in overall normal supports including support workers no longer able to attend, families and friends not available to provide support and particular challenges for those with self-directed support with carers self-isolating/issues with accessing PPE.
- Some families with a disabled child or young person highlighted negative impacts as a result of changes in routine, the loss of additional supports around learning outwith the school environment and the loss of opportunities to socialise.
- Similar to feedback from the HSCN survey, concerns were expressed around the lack of routine health appointments.
- The issues regarding care and support and loss of normal interactions were particularly impacting upon individual wellbeing
- Similar to HSCN, concerns were noted at the loss of independence as a result of measures to address covid.

6.11 Inclusion Scotland's conference has been postponed until the new year but the Council is working in partnership with organisers for the event, and the online forums planned prior to the event, to explore further the experience of disabled people in response to covid and current challenges facing the community.

6.12 ***Children and Young people***

Work to gather the views and experience of young people and the impacts of covid are ongoing. However, the following provides an outline of some emerging issues.

6.13 ***Youth Work***

Work with children and young people has continued through the lockdown period and over the summer through youth work services provided by High Life Highland and the Voluntary Youth Network. Virtual platforms have been used for peer support and 1-2-1 engagement, ongoing face to face engagement for vulnerable young people and socially distanced outdoor activities over the summer months for local groups. There has been specific ongoing support with care experienced young people through weekly group sessions and 1-2-1 support sessions and also a targeting of support in more deprived communities.

6.14 Through engagement with young people and feedback from the Highland Youth Parliament Executive Group, the following key issues and concerns from young people have been emerging which also mirror national youth survey findings:

- Mental health and wellbeing – similar issues as across the population as a whole, there has been a significant impact on the mental wellbeing of young people as a result of pandemic and identifying a particular increase in anxiety.
- Fears for the future – concerns regarding the gaps in education and the impact this will have on employment and training opportunities and their life in the future, contributing to stress and anxiety.
- Exam stress and anxiety and how the disruption to education would impact on outcomes.
- Social relationships – the difficulties of managing conflict at home and being at home is not necessarily a safe place for all.
- Digital exclusion - (phone, computer, broadband, social media) disempowering for many young people but also an emerging theme of digital exhaustion and the need to reduce online engagement.
- Gaps in normal supports for particular groups e.g. LGBTQ+.

Youth forums are now just beginning to recommence and direct engagement with young people is planned through them in the weeks ahead in order to better understand experienced but also key priorities for moving forward.

6.15 ***Care Experienced Young People***

There are similar themes emerging from work undertaken with care experienced young people to date. National reports on the impact of Covid-19 and the associated measures to reduce its spread have identified common themes for care experienced children and young people including young people leaving, or who have left care.

These include:

- Poverty, including food poverty and insecurity, access to social security, bills and debt (including care experienced parents and kinship carers)
Information and participation

- Health and Wellbeing, in particular mental health concerns, loneliness, and isolation
- Provision of care
- Reduced access to Support
- Digital exclusion
- Childcare provision for care experienced parents

6.16 These national messages reflect local learning and engagement to date has highlighted mental health being a key area of priority. Whilst there are similar themes to wider feedback from young people, the particular focus on poverty and concerns associated with that are specific to care experienced young people. Further work is planned to engage with CEYP in the months ahead to better understand experience.

7. **Work Underway and Planned**

7.1 The above provides a summary of the work undertaken directly and of findings from partner organisations to date. There is a range of further work currently underway or planned for the coming weeks and early into next year. This includes:

7.2 ***Engagement work underway:***

- Survey to third sector community support groups exploring key themes from the community conversations
- Survey of recipients of support through the Council's helpline and hub teams
- Focus groups with staff providing humanitarian response on experience and reflections

7.3 ***Engagement work planned:***

- Feedback from Black, Asian and Minority Ethnic communities including Highland's refugee community.
- Engagement with disabled people through Inclusion Scotland Highland's annual conference.
- Engagement with youth workers and youth forums
- As part of ongoing engagement with the Gypsy Traveller community on site development, understanding of specific impacts and experience of covid.
- As part of existing engagement with homeless support providers and housing staff, understanding of client experience and impacts of covid.

7.4 Further feedback and joint themes across the engagement undertaken will be presented to the next meeting of this Committee.

8. **Next Steps**

8.1 As noted in section in section 7, further work is both planned and underway to explore the impacts and experience of people as a result of covid. The next update report to this Committee in February will attempt to draw common themes and trends across all the engagement strands but also to consider potential actions and next steps, including

how the evidence can support our next set of Equality Outcomes in 2021. However, from the work undertaken so far, there are already key themes emerging and actions to progress.

- 8.2
- Building on community networks – building on the strength of community support/peer networks in place as a place to work better together and facilitating the development of networks in areas whether these are not currently in place.
 - Improving communication of key messages and information to groups and the wider community sector but also sources of information on where to access key supports for supporting communities e.g. social care, mental wellbeing.
 - Addressing the increasing challenge and issues related to mental health and wellbeing. As noted in item X on the agenda on the Humanitarian and Welfare Needs update, work is already underway related to developing a new approach to supporting children and young people's mental health and wider partnership work is being taken forward with regards information resources, training and suicide postvention work.
 - Addressing food insecurity, food poverty and fuel poverty. Ongoing joint work to support individuals and families is crucial. As outlined in item 5 there are a range of supports which remain in place including continuing to work and support third sector organisations with food and financial support to continue operating. A further strand is ensuring groups are aware of the range of support systems in place, available for individuals facing financial insecurity and work with partner organisations is almost complete to develop a guide to signpost to the range of supports available.

Designation: Executive Chief Officer Communities and Place

Date: 9-11-20

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Engagement Work:

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Highland Senior Citizens Network
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Appendix 1: Community Conversation Learning from Covid Feedback

Community Conversation – Learning from Covid Feedback

Learning from Covid - what worked well

Strength of community response

- Overwhelming community response at grass route level across the area (339 active local groups recorded but many informal also in place) with strong support within communities through volunteering.
- Rapid standing up of response groups, drawing on variable degrees of local community capacity – particularly expertise and resources for governance and processes.
- Flexibility of local provision to adapt and respond to changing position and learning of need within communities.

Accessibility of funding

- Wide range of funding sources available (Supporting Communities, Wellbeing, Highland Council) and available quickly supported community-based response. Simplicity of application and speed of award important.

Local solutions for local places

- Bottom up approach to defining community needs led to solutions designed to support the local area e.g.:
 - Direct meal service in vulnerable/deprived communities or to former lunch club/day care centre communities
 - Remote volunteer led shopping delivery service for remote rural north coast community where no other delivery service available
- Where local volunteer groups were able to effectively communicate with their communities, this led to local confidence and supported local solutions. This depended on trust grounded in accurate, validated information, which was kept up to date. E.g. surveys of residents' needs, or an online summary of local businesses available services and through regular contact.

Communication

- Communication directly with residents through a range of mechanisms to ensure the message is shared and people were aware of the supports available.
- Communication through key local contacts e.g. Council Ward Manager, to share messages, information and advice.

Strong local networks

- Importance of pre-existing community capacity and trusted networks of colleagues to draw on – third and public sector.
- Ability to co-opt existing resources: personnel and expertise, policies, procedures, meeting space, organisational capacity for meetings, etc.

- Development of new covid focused networks comprised of existing and new community organisations.
- Sharing of experience and learning throughout period through networks provided peer support and ensured effective co-ordination of activity.
- Networks assisted in the identification of where help was required and also uncovering need that was not known about before.
- Collaboration between existing service support organisations and networks ensured onward referrals for individuals identified as requiring specific support.

Model of good practice

- A model to follow was identified as a key feature of success – the Ballachulish Community Support model/approach was shared as good practice across the area early in the pandemic and adopted by a range of groups. (*Can be shared if wished*)

Adaptation of services

- Ability of existing support organisations (e.g. carers groups, mental health support groups, youth support) to adapt their services and provide them virtually or via telephony to ensure continuity and continued support for client groups
 - Programme for self-care through the arts
 - Counselling services
 - Befriending support
 - Mental health first aid and wellbeing workshops
 - 1-1 support sessions
 - Youth group engagement – cooking, fun days

Growth of community food tables/larders/fridges

- Significant growth in food tables/larders/fridges within communities both through existing infrastructure and new developments.
- Significant support to stock this provision – local people, supermarkets, local suppliers, Council.
- Strength of anonymity of this provision – a strong feeling less stigma associated with seeking support through these mechanisms.
- Where staffed provision, supports social contact (particularly for elderly) where no other in place.

Additionality of response

- Whilst the focus for the majority was on ensuring the wellbeing of people through food/medicine provision and befriending/social contact support, in some communities a wide range of community-based support developed:
 - Activity packs for school aged children
 - Activity packs for carers
 - Pop-up swap shops
 - Community food growing

Learning from covid - What could have worked better

Early messaging and communication

- Some groups reported that in the beginning the constant changing picture was confusing and challenging and messaging from the Council could have been clearer and more frequent. Guidance was needed over the direction to take.
- In some areas the lack of communication early on led to a lack of focus and co-ordination, resulting in duplication of provision and effort.

Identifying need

- In some instances, support was provided universally within some communities rather than identifying or targeting those in specific need. This has been changing in subsequent months.

Gaps in provision

- With community-based services unable to operate in their normal way, or some unable to operate at all, this led to gaps within provision supporting the most vulnerable e.g. lunch clubs, vulnerable family groups/networks.
- Some concern that with a strong focus on elderly, vulnerable young families were potentially missed in the provision of local support.
- Some concerns at loss or reduction of social care support.

Over-provision of volunteers

- With both local and national calls for volunteers, a huge number of people came forward to volunteer but many were underutilised.

Routes for support

- Some feedback suggested clearer guidance and contacts was required for local groups – particularly new ones or those not previously involved in welfare support – for support with mental health/wellbeing issues they were observing within their communities.
- Some groups had concerns about the availability and capacity of statutory support services to respond where referrals were needed.

Stigma

- A strong feeling from some groups that not everyone requiring support accepted it or reached out for it, potentially as a result of the stigma associated with doing so and often needing to do so for the first time. This is a known issue in rural communities. It was commented that some people would have been asking for such support for the first time and found this difficult.

Challenges and Areas for Focus Moving Forward

Digital Connectivity

- Technology has enabled many groups to continue networks and connections online. Some innovative practice has developed to improve connections and reduce social isolation e.g. groups utilising resilience funding to provide tablets to care homes and home care organisations to support family contact.
- Lack of digital connectivity for many is an ongoing challenge and a strong feeling this is exacerbating social isolation and people's ability to access support services that can no longer be provided face to face. Particular implications for disabled people – more likely to not be on-line – and for young people. A strong sense of poverty issues being exacerbated due to focus of online based services.

Mental Health and Wellbeing

- A steady growth in mental health and wellbeing issues being observed across the area. This ranges from wellbeing and anxiety through to mental health crisis, recurrence of existing issues and new and emerging issues for individuals. Issues being exacerbated by lockdown and social isolation.
- Mental health support also required for some volunteers and staff where the prolonged response efforts are having a negative impact.
- Feedback suggests demand is increasing for certain support services particularly for carers, befriending/social contact and mental health support groups.
- There is also demand for clear guidance on how community groups and volunteers can best support individuals and signpost to services.

End of furlough (conversations took place prior to October announcement)

- Concerns at the forthcoming end of furlough and the potential impact on communities - particularly in terms of food insecurity and fuel poverty.
- A need to target support going forward and a focus on social and wellbeing issues facing individuals. For some, the importance going forward is not physical support but wellbeing support.

Volunteer fatigue

- Significant concern over burnout of key volunteers, often extending themselves over multiple local groups and a prolonged period.
 - Mental health concerns
 - Local resilience highly dependent on key individuals
 - Significant volunteer involvement at a coordinating role across groups at area level – gatekeepers, experts, grant writers, book keepers

Funding

- Concerns at uncertainty over future funding sources and how groups can continue resilience provision into the winter months without support.
- Importance of targeting funding to where need is greatest and co-ordination of funding efforts to ensure no duplication.
- Importance for funding for individuals – welfare/fuel poverty – but emerging groups of individuals who were previously employed and therefore don't meet the criteria through existing Scottish Welfare Fund routes. *(Note: as existing criteria has not changed to meet the current circumstances.)*
- Groups reported concerns regarding sustaining basic operation as a result of impact to their regular income.

Communication and Collaboration

- Importance of communication going forward – looking to the Council for regular updates and authoritative source given scale of information available.
 - Importance of collaboration and co-ordination through local networks between community, third sector, public sector partners and appropriate private sector businesses e.g. supermarkets/local stores. Building on and developing networks that exist and establishing networks for ongoing communication where these are not in place. Sharing of resources, volunteer resource, knowledge and peer support is essential.
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