

# Project Smith

Evaluation of Community Development  
Vassall and Coldharbour Wards, Lambeth

Phase 1: October 2015 – March 2016

**November 2016**

## **Acknowledgements**

Project Smith Phase 1 was made possible through funding from Southwark and Lambeth Integrated Care (SLIC) programme. The success of the project is due to the hard work of the Vassall and Coldharbour Forum (VACF), Project Smith Steering Group, London Community Foundation, South East Local Care Network (LCN) and partner organisations, and most of all, the community within Vassall and Coldharbour wards.

## Introduction

Evidence suggests loneliness and isolation contribute to poor physical and mental health, and interventions which increase networks and social connections improve health and reduce illness and death rates. The evidence points to empowered and engaged communities playing a role in improving health and wellbeing, and increased prevention and resilience at a micro level.<sup>1</sup>

Evidence is however limited. A O'Mara-Eves et al (November 2013) Public Health Research Community engagement to reduce inequalities in health: a systematic review, meta-analysis and economic analysis - reports:

***Results from 131 studies included in a meta-analysis indicate that there is solid evidence that community engagement interventions have a positive impact on health behaviours, health consequences, self-efficacy and perceived social support outcomes, across various conditions. There is insufficient evidence – particularly for long-term outcomes and indirect beneficiaries – to determine whether one particular model of community engagement is likely to be more effective than any other. There are also insufficient data to test the effects on health inequalities, although there is some evidence to suggest that interventions that improve social inequalities (as measured by social support) also improve health behaviours. There is weak evidence from the effectiveness and process evaluations that certain implementation factors may affect intervention success. From the economic analysis, there is weak but inconsistent evidence that community engagement interventions are cost-effective.***

Evidence is being gathered in a systematic way by Evidence for Policy and Practice Information and Co-ordinating Centre (EPPI Centre) on behalf of the National Institute for Health and Care Excellence (NICE). Main conclusion from Review 1: Community engagement for health via coalitions, collaborations and partnerships - A systematic review (July 2015):

***'Synthesis of the evidence suggests that higher levels of community engagement are linked to greater beneficial effects than lower community engagement for interventions that target health outcomes amongst disadvantaged groups. Patterns of effects for other sub-sets of studies based on salient characteristics were difficult to identify, due to the small number of included studies. Overall, the breadth of the range of interventions, populations and outcomes presents a challenge for analysis and interpretation, and this is compounded by the unavailability of studies with high-quality methodology. The results, therefore, are necessarily tentative.'***

EPPI Centre is continuing the review into two further phases:

- Review 2 will synthesise data on the effectiveness and appropriateness of coalitions, collaborations and partnerships in improving health for disadvantaged populations
- Review 3 will synthesise data on the effectiveness and appropriateness of online community engagement via social media/social networking in improving health for disadvantaged populations

## Background in Lambeth

Lambeth is a cooperative Council and seeks citizen and local voluntary group opinion on services and changes in service. The current manifesto is explicit in wanting to work with local GPs and hospitals to encourage people to become 'Health Champions', to help residents keep well, and to reduce isolation and promote wellbeing for older people.

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<sup>1</sup> Think Local Act Personal: Building Community Capacity – Evidence, efficiency and cost-effectiveness (October 2012)

Lambeth CCG created the Big Lambeth Health Debate, a genuine conversation with residents in Lambeth about what was important to them regarding their health and wellbeing. This has informed commissioning as well as the strategic future of health services in Lambeth.

Lambeth Council and Clinical Commissioning Group (CCG) jointly commission a range of services via the Better Care Fund (BCF) and, with the introduction of the Committee in Common, have the impetus and strategic commitment in ensuring integration at scale.

Lambeth CCG has established and continues to develop three geographical Local Care Networks (LCN), North, South East and South West. The LCNs are primary care led in partnership with health, social care, interested voluntary sector, and Patient Participation Groups (PPG). The focus of the LCNs is to consider care provision that relates specifically to identified local need and provide a cost effective service response.

Lambeth has developed good working relationships with many local community groups via Lambeth Warm and Well in Winter (WWW). WWW has supported local groups with a small grants scheme, sharing health and social care messages during the winter months, and supported the introduction of Safe and Independent Living (SAIL) scheme via Age UK Lambeth (AUKL). SAIL is a hub scheme taking referrals from care agencies to support and signpost to appropriate services, including voluntary and community groups.

Lambeth and Southwark established an Early Action Commission in conjunction with the New Economics Foundation (NEF) to consider developing community resilience and explore how to shift local action and resources 'upstream' so that instead of coping with problems once they exist, more is done to prevent those problems from happening in the first place. The four recommendations are:

- Create resourceful communities where residents and groups are agents of change and in control, using their assets and connections.
- Create preventative places and quality neighbourhoods that have a positive impact.
- Create strong collaborative partnerships, working together, sharing knowledge, fostering respect and trust with a shared purpose.
- Early action becomes the cultural norm for local institutions.

Funding for community development came from the Southwark and Lambeth Integrated Care (SLIC) programme. SLIC focused one of its workstreams on supporting community and voluntary organisations (CVOs), with the aim to enable them to become effective providers. The SLIC programme closed March 2016.

### **Community development in Lambeth – Project Smith**

SLIC funding enabled the NHS and Council to model coproduction with a local community and individuals. The aim was to identify ways the local community and individuals felt that they could improve their health and well-being, strengthen their community and support each other – Project Smith. The funds were provided for a time limited project, October 2015-March 2016.

The Project Smith model works at street and neighbourhood level, taking a local approach to realising the community and its people have their own resources, ideas, enthusiasm and connections. With support, neighbourhoods have the potential to build on and improve their existing capabilities, local connections and thereby improve their own and others' health and well-being. The driver for the model is based on 'I statements' from residents in Lambeth who indicated what was important to them:

- 'I can manage my own health and wellbeing (or condition) and I am supported to do this, including having access to information and being able to stay healthy'
- 'I have systems in place to help at an early stage to avoid crisis and as small a disruption as possible if a crisis happens and I live independently'
- 'I feel part of a community'

Project Smith makes use of some well-established community development principles – empowerment; participation; inclusion, equality of opportunity and anti-discrimination, self-determination, and partnership. Additionally ones from the more recent Asset Based Community Development approaches - focus on community strengths and assets not needs and deficits, mobilise individual and community passions, skills, and assets, let the community drive the agenda, and build relationships (trust is key).

The Project Smith model works at street level, a local approach to realising the community and its people are assets, and with improved local connections, have the potential to improve their collective health and well-being.

The South East Local Care Network (LCN) area was chosen for the pilot. The LCN had indicated an interest in understanding and creating links with local community groups separately from Patient Participation Groups (PPGs). Both GPs and LCN manager had established good working relationships with Age UK Lambeth and supported the introduction of the Safe and Independent Living (SAIL) service in the locality to great effect.

Within the South East LCN, Vassall and Coldharbour wards were chosen with a population of approximately 31,000. These wards have high deprivation and poor health outcomes. In recent years these wards have seen massive social changes. There was also an organised and engaged local forum – Vassall and Colharbour Forum (VACF), and this was seen as an advantage to establishing connections with the community and individuals.

### **Project Smith model**

The initial target groups were older people, people with a long-term medical condition, including older adults with learning and physical disabilities and enduring mental health problems, and people who were isolated.

The £40,000 funding was used to support two specific workstreams:

- small grants programme
- development of a 'Community Connector' role

£20,000 - was provided to London Community Foundation (LCF) as the delivery agent for the small grants programme. Project Smith was a time limited project and grants needed to be awarded in a timely manner in order to enable the community groups to organise their events. The rationale for this decision was to enable these processes to take place as quickly as possible after the start of the project.

£10,000 - was set aside for the development of a 'Community Connector' programme; this proposed the recruitment and training of at least ten community members as connectors to achieve the Royal Society of Public Health (RSPH) Level 2 in Understanding Behaviour Change (UBC).

£10,000 – used for limited project evaluation, and to support additional community engagement and workshops.

## Small grants programme

Key to the project were community events organised through the small grants programme. Lambeth wanted to work in a very local way and engage with individuals and local groups. The rationale for the small grants programme was to coproduce projects at local level and to facilitate building relationships within the wards. VACF had recommended that by offering money via small grants there was more likelihood that the community would engage with the project and come forward to be involved.

The small grants programme was named 'Vassall & Coldharbour Health and Wellbeing Fund'. It was set up to prototype a different way of commissioning that would bring commissioners much closer to interested local communities and individuals, starting to build relationships and trust with NHS and Council. SLIC had spent considerable effort in attempting to make small groups commissionable, however much of the best community well-being work is delivered by individual and small organisations that do not have the capacity to tender for work. Therefore, the process was designed to enable the micro-VCOs to be 'commissioned' by overcoming regulations that need to be fulfilled in order to be contracted by a statutory body.

Applications for small grants were welcomed from individuals, groups of individuals and community groups in Vassall and Coldharbour wards, to put forward ideas that will help to reduce isolation, and/or help promote health and wellbeing for older residents in winter.

In particular, the grants programme was looking for ideas which address the following priorities, linked to the 'I statements':

- Helping people to manage their own health and wellbeing (or condition) and being supported to do so. This also included having access to the right information and support, and being able to stay healthy;
- Helping people to have the right things in place to help them to avoid a crisis, or to limit the impact of a crisis, particularly for people who are living independently;
- Helping people to feel that they are part of a community

The three priorities were identified by residents through the Big Lambeth Health debate and by SLIC <http://www.lambethccg.nhs.uk/news-and-publications/news/Pages/the-big-lambeth-health-debate-continues.aspx>

In keeping with Lambeth Council's ethos of co-production, the LCF was enlisted to co-ordinate the delivery and promotion of the small grants information via their many different community networks, reaching out to a more diverse cross section of the groups and individuals in Vassall and Coldharbour. LCF have administered a large number of small grants programmes within the borough for many years and have good working relationships with grassroots community groups.

The small grants programme was also promoted through VCO networks, Council and NHS networks such as the Green Champions, Active Communities, Lambeth & Southwark Well-being Network and via word of mouth. Invitations to apply to the £20,000 fund were put out in early December with a short deadline in order to meet funding requirements. Grants were available of between £500 and £5000 for short projects running between mid-December 2015 and February 2016. Despite the tight timescale, the applications for funding added up to over £60,000, from 28 groups.

Applicants were invited to meet members of the Project Smith team and LCF to discuss their project ideas before submitting their application. A multi-agency selection panel reviewed the applications, 13 grants were awarded (see Appendix 2 for list of recipients). An "ideas day" was also held at LCF, where potential applicants were invited to discuss their applications, ask advice, connect with project partners and receive support on completing the application; 12 groups and individual applicants attended the ideas day, whilst many more also received telephone support from LCF.

In addition to engaging with organisations that had well established relationships with the NHS such as Loughborough Junction Action Group (LJAG), Stockwell Good Neighbours and Vassall Seniors, the small grants programme enabled the Project Smith team to work with individuals and groups who were less known to them such as Happy Drums, Effra Residents and Inclusion Arts.

The project was also able to engage with people from across different ethnic groups and social classes within the area. Attendees reflected the local demographics, with some events being predominantly white, others mostly black whilst the remainder were very mixed, reflecting the diversity of older population the area. Though it needs to be noted some groups were underrepresented such as the Portuguese community; this will be addressed in future programmes by making links directly with these groups.

Some quite innovative events and activities were conceived. One organisation hosted a series of English language classes to enable older people to learn how to shop online safely for their groceries if they were unable to get out, and for people to be more confident about communicating in the community. Another group ran workshop with community members in Angell Town for a one-day event to share grief, conflict and losses.

**Key highlights:**

- £20,000 of funding was awarded across 13 applications comprising nine groups and four individuals
- Two individuals accessed the support of a nurture organisation and two delivered their projects independently
- Grant sizes ranged from £713 to £4497
- Grantees had an average annual income of £35,447.82

As a result of the awards made:

- 1666 people came to the projects events
- 151 beneficiaries reported accessing an activity for the first time
- 80% of beneficiaries were resident in Vassall or Coldharbour wards
- Connections were established between the groups who supported each other with promotion of events, offers of venues and catering, and sharing advice and tips
- Two Community Connectors were recruited via small grants events
- Grantees reported a range of outcomes including:
  - A reduction in isolation of beneficiaries
  - New friendships formed which lasted beyond the life of the project funding
  - Existing groups were able to engage new local residents and reduce waiting lists
  - A positive atmosphere at the events/sessions which lifted the mood of the attendees
  - Improvements in levels of English leading to improved ability to address other difficulties such as reporting housing repairs for example

### Case Study: Grief and Conflict events on Angell Town Estate

Myatt's Field Project support the grief and well-being events for residents living on the Angell Town estate; these comprised of a coffee morning, a social evening which involved conflict discussion, and a day long wellbeing event that consisted of massages, drumming, seed planting, and discussions on grief, conflict and moving forward. They were open to local residents of any age living on the estate.

Key Achievements :

- 18 people attended the coffee morning
- 15 – 18 people attended the social evening
- 50 people attended the wellbeing day

The project raised awareness and provided support around wellbeing and grief encouraging participants to acknowledge it.

Witnessing other people's grief encouraged connection, trust, and broke down barriers reducing a sense of isolation.

The project addressed all forms of grief including both the obvious such as bereavement or relationship breakdown, and the less obvious such as unmet desire for children or conflict with a neighbour.

Those involved in setting up this project have agreed to continue meeting as they have recognised the value it has brought in connecting people and addressing local issues. Project Smith will be encouraging them to consider how they may build on this in the next wave of small grants funding.



A lot of the events were activity based; these is because there was good awareness that people enjoy 'doing' things such as crafts, exercise and cooking as they are things that attract people to events. Due to the timeframe many were for the continuation of activities that they already did rather than new ideas. Cooked meals and food at events were seen as a particular reason to attend.

Applicants were encouraged to consider doing joint bids where activities were similar to increase the funding they had available for the event. Individuals who wanted to run activities were able to go through nurture organisations as the grant conditions did not allow the funding of individuals. VACF acted as a nurture organisation for two successful applicants, it had originally been for one but VACF had to step in to replace another nurture organisation that was experiencing some administrative difficulties as like with many small VCS organisations, they are heavily reliant on volunteers.



### Case Study: Memory Feast – Maria’s story

Maria was referred by Age UK Lambeth and invited to attend the feast, but felt weak in the cold weather. Her son cancelled on her behalf via email. The Project Co-ordinator telephoned her before the second feast to invite her to attend. She accepted but called half an hour before the start time to explain that she was feeling a bit down. The Co-ordinator persuaded her and arranged a taxi to collect her. She got confused and insisted the cab driver take her to a different location so the organisers ‘On The Record’ sent a volunteer to find her.

At the feast they learned that Maria had not been out of her home since September when her husband of 60 years died. She had cared for him until the end. Her bereavement was heightened by complex health issues (she recovered from bowel cancer, and she has ulcers and arthritis). Maria reported that she was so glad she came, despite worrying that she would not have the energy to enjoy herself. The volunteers on her table were briefed to pay special attention to her memories of rural Irish food and her experience of moving to London as an excited 18-year-old. Maria was reassured she could let one of the volunteers know as soon as she felt weak and wanted a taxi home. A young volunteer helpfully shared her own experience of talking herself out of social invitations, and reflected “Now I try not to think too much, I just go. You’ll probably enjoy it when you get there, and if you don’t you can always leave.”

When called after the feast, Maria said the fairy lights reminded her of Christmas and she loved the freshly baked bread. She enjoyed chatting to the local volunteers and feels a lot more confident about going out now. She said her neighbour, who doesn’t speak much English, often invites her to her home but she doesn’t go. She said that she’s struggling to get over her grief, it “whirls round and round” in her head when she’s stuck indoors. After the success of attending the feast and discussing

it in the follow up call she decided she would visit the neighbour the same afternoon. On the Record also referred Maria to South London Cares and the grief project funded by Vassall and Coldharbour Health and Wellbeing Fund. The chef has offered to take her an extra loaf next time he bakes bread and one of the younger members of the Vassall pensioners' lunch club was asked if he would consider escorting her to the club.



Healthwatch Lambeth undertook 24 one-to-one interviews either by phone or face-to-face and 1 focus group, with event participants. All interviewees who recalled taking part in an activity and all the focus group members reported positive experiences of the project due to a range of factors:

- Enjoyable sessions: *'The sessions helped them socialise and they really enjoy the music'* and *'I went to more than 1 which suggests I liked it!'*
- Opportunities to learn: *'I improved my writing'* and *'It was an opportunity to look at holistic wellbeing'*
- Appropriate and good quality activities: *'It was the right pace for the group'* and *'It was a beautiful feast – the food was fantastic'*
- Good facilitation: *'She's very skilled in dealing with older people and those with particular needs'* and *'The people made you so welcome. When you are older, people treat you like you do not exist'*
- No session charges: *'Most people are reluctant to pay for this type of activity so it was good that it was free'*
- Bringing people together: *'The community spirit was wonderful'* and *'We created a safe space for people to express all the things they were feeling'*.

One of the grant conditions was that recipients had to provide a brief summary report on their event to the LCF. This was to ensure that the funding was spent for the intended purpose and afforded an opportunity to capture feedback from participants, staff and volunteers on what they found useful and any recommendations they would make for future small grants programmes. Groups were not asked to undertake any form of in-depth monitoring. Members of the Project Smith steering group were assigned projects to visit, support their activity and report back upon as part of the evaluation.

#### Key learning:

- A longer lead in time would likely facilitate the opportunity to fund more new initiatives rather than ones that had been ongoing for a long time such as the tai-chi classes.
- Where a programme had been going a long time groups would need to indicate how they intend to reach new people.

- The concept of outcomes based projects was hard to communicate, together with the need to demonstrate success

### Community Connectors

The Community Connector programme is a localised version of a Health Champion programme, and is being developed specifically via Project Smith. Health Champions are people who, with training and support, voluntarily bring their ability to relate to people and their own life experience to transform health and well-being in their communities. This can include linking people up with relevant wellbeing and health services, local community groups and organisations and social groups.

The Royal Society of Public Health (RSPH) have created training course which support this kind of role; the standard course for Health Champions is the RSPH L2 Understanding Behaviour Change (UBC). Holders of this qualification have the knowledge and understanding necessary to work effectively in helping people who need support and encouragement to make positive changes in their lives, including how to help them in the objective of adopting and maintaining a healthier lifestyle.

A description of the job role for a Health Champion was sought from other programmes in London to see what core attributes and competencies were needed. Additionally, a developmental workshop was held with representatives from the VCS across Lambeth and Southwark to find out what they thought. The attributes at the workshop mirrored those from the job description, however the key one that came up was credibility. (See Appendix 3 for Community Connector role description). Community Connectors received training and support to give them the skills needed to be able to talk to people about wellbeing, the things that they can do for themselves, and places to go to access help and support doing this.

The first cohort of connectors was recruited through existing community networks that existed in the wards, websites such as Love Lambeth, VACF and via community events funded through the small grants programme.

The Connectors are a network of local individuals who were already active in their local community and this is a way of bringing them together to support and link their initiatives. Connectors have the ability to link people with services, and services with people, helping to create connections that could provide a safety net of social support, and improving health and wellbeing at a local level.

Community Connectors act as a link between other wellbeing programmes and organisations in Vassall Coldharbour such as the Primary Care Navigators, Healthy Living Pharmacies, Community Health Champions, Street Champions and Parent Champions etc. the first cohort of trainees included Money Champions, Street Champions, Digi-Buddies and Parent Champions.

Fourteen people signed up to be Connectors and all fourteen completed the training, the initial target had been that at least five people would complete the training. The training was delivered over four short days (to accommodate the needs of people with caring responsibilities) at different sites across the wards. The rationale for delivery at different locations is to familiarise the Connectors with different organisations and community assets in the wards.

#### Key highlights:

- 14 Connectors were trained in the first cohort, encompassing a range of backgrounds, professions and community involvement
- 13 Connectors have taken the exam, with all passing on their first go
- Additional people contacted about the training and were not eligible to train in the wards, but wanted to know about any future training
- Connectors have identified neighbours and friends who are interested in the training

- Connectors have reported that the training has enabled them to undertake their other community volunteering roles with more confidence
- NHS recognition that local people and groups can have an impact on their community health and wellbeing
- Co-production – the power is with the individual

As part of their ongoing training and supervision the Connectors are provided with monthly supervision 'safaris'. As with the initial training, the 'safaris' take place at different sites across Vassall and Coldharbour. The intention is that this will link the Connectors and services that host organisation for that 'safari' session. External speakers will be invited to share their knowledge, experiences and information with the Connectors. This is based on successful models used elsewhere in London and facilitates links between people and services.

Locally the Connectors have reported that they are now more aware of community centres and meeting places that they never knew existed despite being resident in the area for many years.

The Connectors have been working with VACF and LJAG at ways to promote and map activities and events online. Additionally, they have support the Primary Care Navigator training programme by participating in their training programme as community representatives.

The intention is to base the Community Connectors with the VACF at Myatt's Field Depot in Myatt's Field Park, thus further embedding the programme with the community.

Project Smith is working with Connectors to explore a three strand approach to evaluating the impact and outcomes from the role:

- What has been the impact on the connector? i.e. has it made a difference to their life in a positive way, such as a health impact, employment or other change they have felt has been beneficial
- What intervention did they provide with whom? i.e. who did they connect with and what did they do?
- Where did this impact? i.e. where in the system would the impact of this connection be felt? Such as DWP if someone got a job, Age UK Lambeth if there was a SAIL referral etc.

#### **Case Study – Street Champion becomes a Community Connector**

J is a Street Champion. She got involved in the community connector programme after being referred to the Project Smith project team by the Street Champion Co-ordinator at Lambeth Council.

J was initially invited along with another Street Champion to attend a Project Smith Team meeting to share their experiences of being Street Champions and why she wanted to be support their community.

Through attendance at the meeting J heard about the Community Connectors and asked if she could apply. She felt it would be ideal for her voluntary work in the community, potentially give her a step towards building skills to get back into employment. J was an enthusiastic recruit and advocating for the programme, through her connections another Mum from the school J's children attends heard about the programme and then signed up following a chance meeting with the Project Manager at a V&C Small Grants funded community event.

J was thrilled to learn she got top marks for her RSPH UBC exam. She has been linking other Connectors with community assets in the south of Coldharbour ward to enable them to run events. She has been looking at how she might gain further skills to gain employment in within the community

health navigator type role.

**Key Learning:**

- There is already a network of natural connectors that are a resource to be nurtured
- Community Connectors are an opportunity to link the various disparate and unconnected community champion initiatives
- The training has consolidated the connectors knowledge and they are able to see themselves as an asset
- Separate RSPH UBC training is needed for VCS staff to enable the Community Connector training be solely focused on local residents and with people who wish to become connectors rather than just a qualification in their CV
- Finding low cost or no cost training and meeting venues for the Connectors are essential

**Community Engagement**

In addition to the small grants programme funded events three larger community events took part. These were delivered by the Participation Agency with the VACF. The initial event took place at the beginning of the small grants process in November 2015; it was a workshop to bring people together to spark ideas and conversations between groups and individuals. This workshop provided a first link to the members of VACF and the community.

Creating a creative buzz was crucial as it motivated people to express their ideas in a short space of time, which was essential due to the short time scale for grants applications to be received.

The other two events were part of the evaluation process for SLIC to sense check the feeling on what residents were thinking and helping confirm with the Project Smith team the types of initiatives and interventions were essential to help reduce social isolation and improve well-being locally. They did not garner much more useful information for the project and the funds may have been better used for project evaluation.

The small grants funded events took place across the wards. Recipients given a grant could hold the event themselves at a location of their choice where they felt that they would best reach the target audience. Venues included a theatre, community centres and church halls, dance studio, library and in the street. Each activity was created to suit that particular organisation's cultural and other specific needs. Some of the small grants were to run classes including dance and craft classes which meant the more people could participate as they heard about the activity whilst it was taking place.

The skills of the Project Smith Steering Group members were central to effective public engagement at the events. Trust is an important issue, and the funded groups expressed surprise and delight that representatives from the LCN, CCG, Council, LCF and SLIC attended events and joined in with participants and organisers.

The close involvement of the Steering Group members with the community events and their participants was integral to relationship building for the Council and NHS with the diverse communities in the wards. Attending community events and getting involved is often the most practical way to engage with some people too; individual conversations are particularly useful for people who are hearing impaired, have learning disabilities or English as second language.

**Key learning:**

- Trust is essential for meaningful engagement, the NHS brand holds a lot of sway and is seen as neutral. Relationships cannot be forced; it is good to have an 'offer' for the community.
- Flexibility is essential and a willingness to engage people and groups at their level; this means working evenings and weekends.

- Utilising the range of other networks and champions has meant that different voices have been heard rather than the larger VCS groups.
- This is an ongoing process and credibility is essential; there have been numerous initiatives therefore it is essential to have a view of the bigger picture.

## Connections

Project Smith has facilitated organisations and individuals working together in a different way. The LCF have a large and influential role within the borough, with a range of funds and programmes that they administer impacting on the health and well-being of local people.

Through Project Smith a closer working relationship has been developed between Integrated Commissioning at Lambeth CCG and Council with the LCF. This has led to the consolidation of a number of small grants programmes in Lambeth into the one larger Lambeth Health and Well-being Fund. This fund includes looking at how to ensure people who live on the extra-care facilities in the wards are integrated into the wider community through a specialist funding workstream plus the integration of the Lambeth Happiness and Well-being. The principles of the 'Five Ways to Well-being' underpin this joint fund, as well the focus on improving health and reducing isolation via the '1 statements'.

Additionally, the involvement of Healthwatch Lambeth in the project group has been a new way for the CCG and Healthwatch to develop a well-being programme, Healthwatch have been an objective friend and provided useful support for the sounding and sense checking of the project. They are trusted by the public and therefore been able to undertake interviews and speak with groups about the impact of the project. It is envisaged that this role will continue.

Central to the success of Project Smith in Vassall and Coldharbour has been role of the VACF in supporting the whole initiative. Without them championing Project Smith and facilitating the links with the community it is unlikely that it would have been successful. This highlights the need for identifying and working with the key grass roots organisations in a locality that have credibility and trust.

A key success of this is the prospect of the VACF and the Myatt's Field Park Project being temporarily based at the Akermann Health Centre, whilst their premises are renovated. Without Project Smith this new and positive relationship with the GP practice and South East LCN would not exist. The first meeting Connector meeting at the Akerman resulted in one of the Connectors signing up to their practices PPG.

Additionally, the connections that have been made through the Connectors programme are helping to create a more connected safety net of services and organisations. The Brixton Impact Hub are linked with the initiative, as are a larger number of organisations such as South London Cares, Age UK Lambeth, Loughborough Farm, Primary Care Navigators Programme and Money Champions at St Luke's Hub; although these relationships are still in their infancy the conversations have begun about how all these initiatives can capture their impact and support those people who volunteer their time to make a difference to people in Vassall & Coldharbour.

The ethos of the project was very much about working with those people who wish to work with others in a spirit of openness and co-production; it is important to thank those who engage and encourage their continued engagement by recognising their participation and value throughout.

## Key learning:

- Connections are multilayered: to enable to the connections made at a grass roots level work there needs to be functional relationship between groups and services within the wards - thus reducing barriers for people and helping community cohesion.

## 1. Challenges

### 5.1 Timescale

The time limited funding meant that the Project had to be developed and delivered quite quickly with all activity delivered by 31<sup>st</sup> March 2016. Good practice guidance from LCF recommends that the application period for small grants programmes should be about 3 months to facilitate more developmental work with potential applicants to enable them to submit stronger bids that are able to demonstrate that their activities would meet the desired outcomes of the funders. A longer timeframe would likely have resulted in more applicants and projects with new ideas funded, they would have had longer to promote and run their activities thus recruit more beneficiaries.

The ground work for the Community Connector programme took longer than anticipated; this was because although the model being developed was based in something that already existed it was completely new; the role description and supporting promotional material had to be in place before the recruitment process started. It was not possible to deliver the whole Community Connector training programme before the end of the financial year and the final part had to be carried over into April; this was because both half-term and Easter holidays fell during the training period.

#### Key learning:

- A longer timeframe would have facilitated a stronger programme, in particular in terms of enabling more engagement with the community, the ability to source and develop a more robust evaluation and monitoring programme and the recruitment of a wider pool of Community Connectors.
- A longer timeframe would support local individuals and groups to consider and plan for more effective outcomes based work.

### 5.2 Managing expectations

Project Smith is an exciting initiative that is challenging the orthodoxy of how health and well-being programmes are normally commissioned and delivered. This has meant that some of the expectations of what can be achieved in such a short timeframe and captured to measure the impact may not be realised. There was a view held by some partners that Project Smith would change the way in which commissioners would commission the VCS; this may happen longer term however there needs to be an evidence base created to show that this way of working with the VCS and communities on a micro level has an impact on health and wellbeing.

Additionally, there was a lack of awareness that there needs to be some form of structure that is funded to co-ordinate the Community Connectors and that this needs to be ongoing. Without this 'structure', volunteer programmes tend to fold and the purpose of the activity lost. The Health Champion/ Community Connector model is being seen as a way to facilitate change and improve the well-being of the community – however the Connectors are normal residents with busy lives as parents, carers and doing other voluntary work, therefore whilst they may be able to achieve this there must not be an undue pressure placed on them to perform and the programme itself seen as a sole solution.

There is a lack of coordination which makes partnership challenging, particularly over short time frames e.g. programmes working in isolation, little sharing of best practice, funding making local communities competitive. Working on new programmes that are trying out new ways of working can be challenging for people who wish to see immediate results or are wedded to the traditional outcome

markers for success such as smoking quitters, people signed up for exercise programmes. Project Smith does not offer a quick fix: it is about trying something new as other programmes focused on disease prevention have not worked.

**Key learning:**

- There would be the potential for stronger community engagement and applications for small grants or to be community connectors from individuals and groups who do not normally engage in this type of process.

### 5.3 Measuring impact

The timeframe and limited funding for Project Smith has meant that the outcome measures for the programme are limited. Project Smith has addressed local health and wellbeing in its broadest sense by creating and recognising social capital. It has established and promoted positive relationships, breaking down barriers, started to build trust however there needs to be a longer time frame to assess success in both the short and long term.

Project Smith achieved a lot in a short space of time and is able to provide qualitative data, however the systems were not able to be established to measure any quantitative impact on public services.

Working with Healthwatch Lambeth, it would be good to look at the impact on health service utilisation – for example A&E or GP attendance by people who have participated in activities: this is something that is being developed for the next stage (with participants' consent).

A longer timeframe for the programme would enable more detailed evaluation and monitoring processes to be developed. For example, one action might be to look at A&E usage within the Vassall & Coldharbour wards by people within the target age ranges for the programme.

The funding to evaluate the programme ended on 31<sup>st</sup> March with the closure of SLIC. Due to changes within Public Health, they are unable to provide as much input into shaping the evaluation and monitoring as would have been desirable.

Conversations are taking place between Public Health and the London Southbank University to scope out the possibility of more in-depth evaluation for the next phase over at least two years. Being able to evidence the impact of micro well-being interventions remains a challenge. The Project Smith team are working with other agencies in the borough, such as South London Care's and the Money Champions (co-ordinated by West London Mission on behalf of Lambeth Council) programme to explore ways in which they can monitor the impact of these community based initiatives. This may include pooling of resources to purchase a suitable resource.

**Key Learning**

- There needs to flexibility when measuring the impact and outcomes from community health and resilience programmes; it is easier to look at individual cases rather than the population as a whole. Working with other community resilience programmes mean that there may be more scope to purchase a robust solution.
- Development of measurable impact on public services i.e. health, needs to be intrinsic to Project Smith and requires funding together with the understanding that impact will need to be looked at over time.

### 5.4 Venue costs

One of the largest expenses for the programme is venue space; be this for small grants funded activities, the community engagement events or the training space for the delivering of the Community Connector training. This issue come up very frequently and is often a prohibiting factor for

events to take place. Additionally, some venues are difficult to access and not very user friendly. One of the conditions Project Smith was stipulating to participants was to make their venues available free to other groups and organisations participating in the project. This is difficult when they have overheads to meet or need to arrange people to open and lock a venue.

### Key learning

- Suitable and accessible low or no cost meeting places for community initiatives are essential and venue hire costs will continue to be a major barrier to many community activities.

### Project Smith in 2016/17

Project Smith has been successful despite the short delivery timeframe and being commissioned during the twilight of SLIC. The project addressed local health and wellbeing in its broadest sense using the Five Ways to Well-Being to underpin the work and ethos of the activities. The success was due to a number of factors:

- Strategic buy in from Council and CCG to the concept and process.
- A clear focus for the project and willingness of partners to try something new.
- Positive relationships between those involved, which broke down barriers and has built trust. VACF is in discussion with South East LCN about basing the Myatt's Field Project at Akerman Health Centre whilst their premises are refurbished.
- Delivery of coproduced projects that have real local impact and make sense to residents (local being within walking distance; 'where I live'). The LCF are creating a joint Lambeth Health and Well-being fund as a result of the learning from the Project Smith small grants programme and the successful community engagement.
- Working alongside the community; the role of VACF has been pivotal; there are now links between the NHS and the community that did not exist before, such links with local pharmacies, the PPG Network and also via Healthwatch Lambeth.

Engagement with a broad range of local resident's community groups has been a major success. This has enabled improved relations between the Council and NHS with some communities who are feeling vulnerable due to the rapid changes that are taking place in the borough. A familiar face and with a willingness to go to where people and groups meet is very positive. For example, members of Project Smith Steering group attended evening and weekend community meetings, participating in activities and therefore led to increased credibility with the local community.

### As a result of the learning from phase one of Project Smith the following is recommended:

- **A longer lead in time for the small grants programme can be used to facilitate the opportunity to identify and fund new initiatives, particularly ones that focus on reaching people who are not already connected to groups and organisations.**
- **The next phase of Community Connectors recruitment needs to ensure that more men come forward as trainees and that there is even broader diversity in recruits.**
- **Within Vassall & Coldharbour the relationship with VACF is nurtured and this close working arrangement is developed with the equivalent organisations in the North locality when Project Smith expands to that area.**
- **Build on the relationship with the LCF to continue the smooth and fair running of the small grants programmes and to facilitate links with other individuals and organisations who may wish to find well-being interventions in Lambeth.**

- **Identify an external provider (and funding) to support the development of robust monitoring and evaluation workstreams for Project Smith.**
- **Continue to recognise that Project Smith is a new way of coproduction between the NHS and Council with the community for the improved of their health and well-being; therefore, the programme needs time to embed and the permission to try things differently.**

## Appendix 1 Project Smith Steering Group

### Core Membership

- Jennifer Burgess – NHS Lambeth and LB Lambeth – Integrated Older People's Commissioning Manager
- Fraser Serle – NHS Lambeth/ LB Lambeth – Programme Support
- Sarah McCulloch – LB Lambeth - Senior Commissioning Officer, Health Improvement
- Josepha Reynolds – LB Lambeth – National Management Trainee
- Will Nicholson – SLIC Resilient Communities Lead
- Jane Duncan-Ribeiro – Lambeth Street Champion
- Paul Springer – SLIC Independent Facilitator
- Mahroof Kazi – CCG, Locality Manager (SE)
- Kate Damiral – Healthwatch Lambeth
- Laura Mitchell – London Community Foundation
- Victoria Sherwin – Chair of Vassall and Coldharbour Forum
- Wai Hai Lam - Development Worker, Lambeth Patient Participation Group Network

### Additional members

- Sue Sheehan – LB Lambeth – Senior Policy Officer
- Belinda Sosinowicz – Public Service Works @ Participation Agency
- Ginny Hume - Older People's Commissioning Manager
- Jason Prentis – Partnerships and Community Development Officer – LB Lambeth
- Lorraine Harrison – LB Lambeth – Public Health Engagement Officer

## Appendix 2 Small Grants Recipients

On the Record	Memory Kitchen events. Local people shared their food memories which were used as inspiration for two community feasts, cooked by a professional chef.
Effra Residents	Winter Warmers events. These allowed people to discuss their problems, provide information on health and wellbeing, physical and creative movement classes and a written histories and recipes session.
Myatt's Field Park Project	One-day grief event. Worked with community members in Angell Town for a one-day event to share grief, conflict and losses.
Vassall Senior Citizens	Provided meeting space, massages and tai-chi classes to support older residents.
Happy Drums	Drum workshops built confidence and give participants opportunities for self-expression.
Brixton People's Kitchen	Information leaflets with ideas on how to reduce food waste, places to find fresh fruit and veg, nutrition, location of Saturday meals, how to get involved.
Friends of Tate Library Brixton	Winter workshops engaged with the vulnerable adults who use the facilities at the library.
Maria Moran	Yoga and pilates lessons focused on age or work caused injury.
Inclusion Arts	Creativity workshops produced recipes and link with local food growing activity, with a final food making activity at the Loughborough Centre to share ideas.
Longfield Hall Trust	Beginners dance classes for local adults.
Stockwell Good Neighbours	Provided aerobics classes for older residents with speakers from health organisations giving a talk at each session.
Loughborough Junction Action Group	Craft classes where older residents passed on their skills.
John Torjisson, with Myatt's Field Park Project as a nurture organisation	Weekly English lessons at the Loughborough Centre that focused on participants being confident enough to go into the community.

## Appendix 3 Community Connector Role Description

### Vassall and Coldharbour Community Connectors Role Description

#### 1. Role summary

Community Connectors link people in their local community with activities and organisations that can help improve their quality of life. This can include linking people up with relevant wellbeing and health services, local community groups and organisation and social groups. Community Connectors are also a link between other wellbeing programmes and organisations in Vassall Coldharbour such as Navigators, Healthy Living Pharmacies and Health Champions.

#### 2. Skills and Experience required

- Good communications skills, including being able to talk to people on a one-to-one basis and to groups
- Ability to get on with people from all backgrounds
- Be respectful and value all people and in all situations
- Be able to respect confidentiality
- Ability to work effectively as an individual and as part of a team
- Ability to use own initiative to prepare for and attend events
- Basic ability to use a computer

#### 3. Commitment

Community Connectors need to attend and complete the 4-days training provided, agree to have DBS check if they do not have one already and to support the project by recording what they do.

The Community Connector programme is designed to enable those people who already are involved in volunteering in the community to take part and develop a new skill to complement what they do already. All Community Connectors will be expected provide regular feedback on what they have been doing and attend monthly supervision sessions.

#### 4. We will provide

**Training:** To be given the knowledge and skills to be a Community Connector. This includes undertaking a 4-day training programme and includes the Royal Society of Public Health Level 2 Award – Understanding Health Behaviour Change.

**Support:** You will be supported in the role and receive ongoing support and regular supervision. *We will organise a DBS check if you do not have one already.*

**References:** Should you require confirmation of your involvement in the Community Connector programme.