

EXECUTIVE

Date: Monday 22 January 2024

Time: 5.30 pm

Venue: Rennes Room, Civic Centre, Paris Street, Exeter

Members are invited to attend the above meeting to consider the items of business.

If you have an enquiry regarding any items on this agenda, please contact Mark Devin, Democratic Services Manager on 01392 265477.

Entry to the Civic Centre can be gained through the rear entrance, located at the back of the Customer Service Centre, Paris Street.

Membership -

Councillors Bialyk (Chair), Wright (Deputy Chair), Denning, Foale, Morse, Parkhouse, Pearce, Williams, R and Wood

Agenda

Part I: Items suggested for discussion with the press and public present

1 Apologies

To receive apologies for absence from Committee members.

2 Declarations of Interest

Councillors are reminded of the need to declare any disclosable pecuniary interests that relate to business on the agenda and which have not already been included in the register of interests, before any discussion takes place on the item. Unless the interest is sensitive, you must also disclose the nature of the interest. In accordance with the Council's Code of Conduct, you must then leave the room and must not participate in any further discussion of the item.

Councillors requiring clarification should seek the advice of the Monitoring Officer prior to the day of the meeting.

3 Local Government (Access to Information) Act 1985 - Exclusion of Press and Public

It is considered that the Committee would be unlikely to exclude the press and public during consideration of any of the items on the agenda, but if it should wish to do so, the following resolution should be passed:-

RECOMMENDED that, under Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the consideration of the particular item(s) on the grounds that it (they) involve(s) the likely disclosure

of exempt information as defined in the relevant paragraphs of Part 1, Schedule 12A of the Act

4 Safeguarding Policy

To consider the report of the Director Net Zero Exeter & City Management. (Pages 3 - 34)

5 Community Grants Programme Proposal 24/25

To consider the report of the Director of Culture, Leisure and Tourism (Pages 35 - 138)

Date of Next Meeting

The next scheduled meeting of the Executive will be held on **Tuesday 6 February 2024** at 5.30 pm in the Civic Centre.

A statement of the executive decisions taken at this meeting will be produced and published on the Council website as soon as reasonably practicable.

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REPORT TO EXECUTIVE

Date of Meeting: 22 January 2024

REPORT TO COUNCIL

Date of Meeting: 20 February 2024

Report of: Director for Net Zero and City Management

Title: Review of Safeguarding Policy

Is this a Key Decision?

No

Is this an Executive or Council Function?

Council

1. What is the report about?

1.1 To seek approval for the adoption of the revised Safeguarding Policy.

1.2 This report was previously presented to, and deferred by the Executive on 9 January 2024, pending further information relating to the central record relating to safeguarding.

2. Recommendations:

That Executive recommends and Council approves the revised Safeguarding Policy.

3. Reasons for the recommendation:

3.1 The safeguarding policy has been updated to ensure it reflects best practice in safeguarding and the recent updates to legislation and statutory guidance.

4. What are the resource implications including non financial resources

4.1 The report is an update on the policy. Resources are required to fund training and awareness raising programmes to ensure all staff understand their responsibilities and what to do to manage enquiries and referrals, and Disclosure and Barring Service checks for key staff. These have been found within existing budgets.

5. Section 151 Officer comments:

5.1 There are no additional financial implications arising out of the report.

6. What are the legal aspects?

6.1 The Children Act 2004 and specifically Section 11 of the Act places a duty on key people and public bodies, including district councils, to make arrangements to ensure that their functions are discharged having regard to the need to safeguard and promote the welfare of children.

6.2 Section 6 of the Care Act 2014 requires County Councils and their relevant partners including district councils, to co-operate with each other when exercising their respective functions where they are relevant to the care and support. This co-operation can be both at a strategic level and in relation to individual cases.

6.3 There is also other relevant legislation which applies to the issue of safeguarding under which the council has specific duties. Members will note that this legislation is listed in the policy document.

7. Monitoring Officer's comments:

The Monitoring Officer is supportive of the recommendations set out in this report.

8. Report details:

8.1 The city council has had a safeguarding policy in place since 2006 which has been subject to review and minor amendments. It was last reviewed in 2020.

8.2 The following amendments to the policy have been made to bring the document up to date:

- Updates throughout to reflect internal organisational changes as well as those to external partners.
- Paragraph 5.4 - Ensuring there is a secure central record relating to safeguarding referrals. This was originally flagged as a requirement by audit but has been removed because in practice it requires duplication of effort for teams that have their own databases. We are confident that there is excellent record keeping in services as demonstrated when we have asked for management reports for Domestic Homicide Reviews. Should Strategic Management Board require a report on the number and nature of cases this could be easily obtained as and when required.
- Paragraph 6.9, bullet point 4 - Listening to and taking account of the wishes and feelings of children and adults that [officers] work with, both in individual decisions and the development of service. This statement in relation to children is included in the government's statutory guidance, 'Working Together to safeguard children' (2018) and was raised as an issue to address in the Council's policy during the Section 11 Safeguarding Audit carried out by Devon Safeguarding Children Board in August 2022 in accordance with the Children Act 2004. As this policy covers both children and adults, the policy needs to refer specifically to both children and adults.
- Paragraph 6.9, bullet point 6 - Ensure the Council officers take account of the Section 11 Duty in the Children Act 2004 to make arrangements to ensure that the Council's functions are discharged with regard to the need to safeguard and promote the welfare of children in all decision making.
- Section 7 – This section which deals with events on council land now makes reference to the Council's Protocol on Dealing with Extremist Speakers and Events. Such a protocol is a requirement of the Prevent Duty under the Counter Terrorism Act 2015.
- Section 9 – A new section setting out the organisation's Corporate Parenting responsibility under the Children and Social Work Act 2017 in relation to certain children and young people.

- Section 10 – A new section setting out how the organisation will deal with any requests for work experience by young people and adults with care and support needs as well as employment of staff under 18 years of age.
- Section 11 – A new section setting out how the organisation will respond to requests for information from the Local Authority Designated Officer.
- Section 12 – A new section as well as information throughout the document, setting out the policy on how safeguarding training will be delivered to elected members, staff, contractors and volunteers. A matrix is also included at Appendix B of the Policy, which shows the current programme of safeguarding training.

8.3 The policy is subject to ongoing annual review in order to respond to changes in legislation and best practice.

8.4 Members will note that the Government is consulting on changes to its statutory guidance 'Working Together to safeguard children' which was last updated in July 2022. The updates to this document primarily relate to children's social care practices however there is an update on multiagency working which sets out key principles for all organisations involved in safeguarding children. The principles relate to strategic leaders, senior and middle managers and staff involved in direct practice. The multi-agency practice principles for strategic leaders are set out below to give a flavour of the requirements:

- **Collaborate:** Leaders develop a shared vision for how their services work together to deliver shared goals;
- **Learn:** Leaders use evidence from direct practice in their area so that they know and can evaluate what is and isn't working well for children and families;
- **Resource:** Leaders are ambitious about protecting children in their area and jointly prioritise and share resources accordingly;
- **Include:** Leaders create an inclusive culture where diversity is understood, and multi-agency and multi-disciplinary working is celebrated;
- **Mutual challenge:** Leaders hold each other and their teams to account and are held to account by their teams for the quality of the partnership-working and there are no significant updates for second tier authorities.

8.5 Members are asked to endorse the revised policy.

9. How does the decision contribute to the Council's Corporate Plan?

9.1 In promoting safeguarding and protecting the wellbeing of children, young people and adults with care and support needs the safeguarding policy meets contributes directly to three strands of the Corporate Plan:

- Lead a well-run council;
- Building great neighbourhoods; and
- Supporting active and healthy lifestyles.

10. What risks are there and how can they be reduced?

10.1 Failure to meet the requirements of the legislation could lead to children and adults at risk coming to significant harm. This could result in legal challenge to the Council.

10.2 The Strategic Management Board provides governance to the policy and resulting actions.

10.3 The council safeguarding officers work closely with both Torbay and Devon Safeguarding Adults Partnership, Devon Safeguarding Children Partnership, Safer Devon Partnership and other district councils. This ensures best practice and that the council is kept up to date with any issues.

11. Equality Act 2010 (The Act)

11.1 Under the Act's Public Sector Equalities Duty, decision makers are required to consider the need to:

- eliminate discrimination, harassment, victimisation and any other prohibited conduct;
- advance equality by encouraging participation, removing disadvantage, taking account of disabilities and meeting people's needs; and
- foster good relations between people by tackling prejudice and promoting understanding.

11.2 In order to comply with the general duty authorities must assess the impact on equality of decisions, policies and practices. These duties do not prevent the authority from reducing services where necessary, but they offer a way of developing proposals that consider the impacts on all members of the community.

11.3 In making decisions the authority must take into account the potential impact of that decision in relation to age, disability, race/ethnicity (includes Gypsies and Travellers), sex and gender, gender identity, religion and belief, sexual orientation, pregnant women and new and breastfeeding mothers, marriage and civil partnership status in coming to a decision.

11.4 In recommending this proposal potential impact has been identified on people with protected characteristics as determined by the Act and an Equalities Impact Assessment has been included in the background papers for Member's attention.

12. Carbon Footprint (Environmental) Implications:

12.1 No direct carbon/environmental impacts arising from the recommendations.

13. Are there any other options?

No.

Director for Net Zero and City Management, David Bartram

Author: Melinda Pogue-Jackson, Policy Officer – Community Safety, Safeguarding and Equality and Diversity

Local Government (Access to Information) Act 1972 (as amended)

Background papers used in compiling this report:-

- The Care Act 2014
- The Children Act 2004
- The Children and Social Work Act 2017.
- The Counter Terrorism Act 2015.
- The Modern Slavery Act 2015.
- The Anti-Social Behavior, Crime and Policing Act 2014.
- The Serious Crime Act 2015.
- The Domestic Abuse Act 2021.
- The Police, Crime, Sentencing and Courts Act (Serious Violence Duty).
- The Devon Adolescent Safety Framework.
- Devon County Council procedures for managing allegations against staff.
- The Statutory Taxi and Private Hire Vehicle Standards.

Contact for enquires:
Democratic Services (Committees)
Room 4.36
01392 265275

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Safeguarding Policy

This policy should be read with the Exeter City Council guides for managers and employees

This policy can be made available in large print and other formats such as printed on yellow paper, taped, Braille etc. as requested.

Policy development and Version details

V4 August 2023

| | |
|---------------------------------|--|
| Author | Melinda Pogue-Jackson, Policy Officer – Community Safety, Safeguarding and Equality and Diversity |
| Owner | David Bartram, Director |
| Review dates | June 2026 |
| Status for FOI | Open |
| Protected marking status | Unclassified |
| EQIA conducted | June 2023 |

1. Introduction

- 1.1 Exeter City Council believes that all children, young people and adults have the right to be safe, happy and healthy and deserve protection from abuse. The council is committed to safeguarding from harm all children, young people and adults with care and support needs (see definition in point 3.1 relating to the Care Act 2014) using any council services and involved in any of their activities, and to treat them with respect during their dealings with the councils, our partners and contractors.
- 1.2 We aim to act as an exemplar of safeguarding practice providing strong leadership and improving safeguarding standards through having a robust safeguarding policy and monitoring system.

2. Aims of the Policy

2.1 The aims of the policy are to:

- Clarify the roles and responsibilities of all parties within scope of the policy.
- Support the promotion of a safe working environment and a culture of care in which the rights of all children, young people and adults with care and support needs are protected and respected.
- Promote best practice in how employees, elected members and associated workers interact with children, young people and adults with care and support needs while providing Council services.
- Develop clear guidance and procedures for those employees, elected members and associated workers and ensure through training and support that they are aware of these and able to implement them.
- Provide a framework for developing partnerships with appropriate external bodies e.g. Devon Safeguarding Children Partnership and Torbay and Devon Safeguarding Adults Partnership, to ensure that the policy continues to reflect legal and best practice requirements in respect of the responsibility of care of children, young people and adults with care and support needs.

3. Scope of the Policy

3.1 The policy is in respect of Exeter City Council's responsibility towards:

- Children and young people, legally defined as any person under the age of 18. From this point the terms child or children will be used to refer to this group.
- Care leavers up to the age of 25. The primary function for providing services specifically for care leavers in Exeter rests with Devon County Council. However Exeter City Council recognises its role in providing services that care leavers may access in particular its homelessness and homeless prevention services.
- Adults with care and support needs are defined under the Care Act 2014 and for the purposes of this policy, as anyone over the age of 18 who:
 - has needs for care and support (whether or not the local authority is meeting any of those needs) **and**;
 - is experiencing, or at risk of, abuse or neglect; **and**
 - as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

- The employees of the council who have dealings with children, young people and adults with care and support needs and who are required to act in a position of trust and to act responsibly and within the law.
- The employees and elected members of the council who, while not required to act in a position of trust, may come into contact with members of these groups on a regular basis during the course of their work.
- Employees and elected members involved in decision making with regard to licensing.
- Volunteers and other workers involved in the provision of council services or who are granted licences by the council, but not employed by the council, including workers in organisations with whom the council has contracts for the delivery of services.

3.2 It covers all the functions and services of the council, its elected members, staff, partners and contractors.

3.3 This document is primarily concerned with protecting children, young people and adults with care and support needs from harm and providing guidance on how to deal with issues. However it is important to remember that safeguarding has a wider meaning which includes the promotion of welfare and taking action to enable all children, young people and adults with care and support needs to have the best life outcomes.

3.4 The policy does not cover health and safety issues related to safeguarding children such as use of play equipment or provision of food at events. Separate guidance on this and appropriate behaviours when dealing with children and adults with care and support needs, should be read in conjunction with this policy.

3.5 The policy does not cover safeguarding of council staff, elected members, contractors or volunteers which is dealt with separately under the Health and Safety Policy and associated procedures.

4. Legal Framework

4.1 This policy is based on Exeter City Council's responsibilities under:

4.1.1 The Care Act 2014 in particular Sections 42 to 46 related to safeguarding, further information can be found at: [Care Act 2014 \(legislation.gov.uk\)](http://www.legislation.gov.uk)

4.1.2 The Children Act 2004, specifically Section 11 which places a duty on key people and public bodies, including district councils, to make arrangements to ensure that their functions are discharged with regard to the need to safeguard and promote the welfare of children. Further information can be found at: <http://www.legislation.gov.uk/ukpga/2004/31/contents>

4.1.3 The Children and Social Work Act 2017 sets out how all local authorities should approach their Corporate Parenting responsibilities for looked after children and care leavers. For district councils this includes Housing, Leisure and Recreation and Local Taxation Collection as set out in the [statutory guidance](#).

4.1.4 The Counter Terrorism Act 2015 section 26 which places a duty on certain bodies, in the exercise of their functions, to have due regard to the need to prevent people from being drawn into terrorism. The Prevent Agenda is one of four strands which makes up the Governments counter-terrorism strategy. Further information can be found at: <http://www.legislation.gov.uk/ukpga/2015/6/contents>

- 4.1.5 The Modern Slavery Act 2015. Further information can be found at: <http://www.legislation.gov.uk/ukpga/2015/30/contents/enacted>
- 4.1.6 The Anti-Social Behaviour, Crime and Policing Act 2014 in particular Part 10 relating to forced marriage. Further information can be found at: <http://www.legislation.gov.uk/ukpga/2014/12/contents/enacted>
- 4.1.7 The Serious Crime Act 2015 particularly Part 5 (see Appendix A)
- 4.1.8 The Domestic Abuse Act 2021 Part 1 Sec 3 provides that children who witness domestic abuse are now counted as victims in their own right.
- 4.1.9 Serious Violence Duty within the Police, Crime, Sentencing and Courts Act 2022. The statutory guidance requires specified authorities (including district councils) to focus on youth violence when setting their definition of serious violence. It also encourages a focus on domestic abuse and sexual offences.
- 4.1.10 The Devon Adolescent Safety Framework provides a route to protect young people from extra familial violence such as exploitation and sits alongside the usual statutory child protection procedure that deal with intra familial abuse. <https://www.dcfp.org.uk/training-and-resources/policies-and-procedures/adolescent-safety-framework-safer-me/>
- 4.1.11 Devon County Council procedures for managing allegations against staff and Local Authority Designated Officer (LADO) role [Managing allegations against adults working with children \(for professionals\) – Education and Families \(devon.gov.uk\)](https://www.devon.gov.uk/education-and-families/managing-allegations-against-adults-working-with-children-for-professionals)
- 4.1.12 The Statutory Taxi and Private Hire Vehicle Standards <https://www.gov.uk/government/news/new-standards-to-improve-safety-for-taxi-and-private-hire-vehicle-passengers>

5. Supporting structures, policies and procedures

- 5.1 The Strategic Management Board has oversight of safeguarding practice within the council and responsibility to drive forward improvements. The Group meets fortnightly however a specific safeguarding agenda is presented to the Board four times a year.
- 5.2 The Director for Net Zero and City Management has been appointed Strategic Safeguarding Lead
- 5.3 In addition the council has appointed a Corporate Safeguarding Lead responsible for co-ordinating the implementation of the policy and providing a single point of contact for the safeguarding boards.
- 5.4 The Corporate Safeguarding Lead has responsibility for:
- Providing advice and guidance
 - acting as multi agency partner on the Local Safeguarding Children Board and Local Adult Safeguarding Board
 - advocating the importance of safeguarding across the organisation
 - ensuring all safeguarding policies, procedures and guidelines are promoted
- 5.5 In addition the Corporate Safeguarding Lead chairs a Safeguarding Representatives Group made up of a number of staff across different services of the council. This group will have an operational overview of safeguarding issues in service areas, together with actions that could be taken.

- 5.6 In the absence of the Corporate Safeguarding Lead the Environmental Health and Community Safety Manager will deputise for the corporate lead.
- 5.7 Safeguarding Representatives have responsibility for:
- Receiving concerns, discussing them with whoever has raised the concern and taking advice from the relevant partner agency/County Council service: this could include complex matters such as consent and whether parents/carers should be notified.
 - Making a decision about how to proceed and whether to make a formal referral. If there is disagreement on the appropriate course of action to take then the safeguarding lead has the final decision. Where staff are dissatisfied with the decision of the safeguarding lead, they should report their concerns to their line manager in the first instance and can still make a referral if they have strong concerns.
 - Ensuring the procedure is followed on such matters as making a referral, confidentiality and recording.
 - Working with colleagues to improve practice across the organisation.
 - In the event of an incident or query, should a safeguarding lead not be available, staff should go straight to relevant Devon County Council service. They can be supported by a senior manager but details of any incident must not be shared unless absolutely necessary.
 - Attending appropriate courses and updating of safeguarding legislation.
 - Providing additional input on the development of safeguarding training based on knowledge of emerging issues within services.
- 5.8 Any staff who have a safeguarding concern should in the first instance discuss the matter with any one of the Safeguarding Representatives who will make a decision whether or not to refer the matter to the appropriate external organisation. A suite of supporting procedural documents is made available to all staff on the council's intranet site.
- 5.9 The Community Safety Partnership, Safer Exeter (of which Exeter City Council is a statutory partner), also deals with some safeguarding issues on a city wide basis such as Domestic & Sexual Violence and Abuse, Modern Slavery, Child Exploitation and Preventing Violent Extremism. Both the Strategic and Corporate Safeguarding Leads sit on the Partnership so are able to ensure that strong links are maintained between the two policy areas.
- 5.10 This policy should also be used in conjunction with the following:
- Disciplinary Procedure
 - Grievance Procedure
 - Whistle Blowing Policy
 - IT Acceptable Use Policy
 - Equality and Diversity Policy
 - Complaints & Feedback Procedure
 - Health & Safety at Work guidance
 - Modern Slavery Transparency Statement
 - Taxi and Private Hire Policy

6. Responsibilities

- 6.1 Responsibility for the implementation of this policy lies at all levels of the council.

6.2 Members

6.3 Elected members are collectively responsible for ensuring that the council has a policy, which adequately provides protection for children and adults with care and support needs in receipt of its services and for the regular review of this policy in the light of changes to legislation or regulation.

6.4 Each Exeter City Councillor has the personal responsibility to comply with the policy.

6.5 Elected Members should report any concerns to the Strategic or Corporate Safeguarding Leads.

6.6 Members of the Licensing Committee have responsibility for ensuring that those taxi and private hire vehicle drivers to whom they grant licences are fit and proper people to hold such licences.

6.7 The Councillor Development Steering Group will provide information on the training needs of elected members and preferred methods of learning

6.8 Officers

6.9 All employees and particularly those working with children and adults with care and support needs are responsible for:

- Ensuring that they are familiar with and understand the policies and procedures relating to their work with or in the vicinity of children and adults with care and support needs.
- Ensuring that they feel confident in working within this environment and working with their managers to ensure that they have the knowledge and skills to carry out their tasks in this context.
- Treating all those children and adults with whom they come into contact while carrying out their work equally and with respect.
- Listening to and taking account of the wishes and feelings of children and adults that they work with, both in individual decisions and the development of service
- Reporting to a Safeguarding Representative, any concerns they may have about abuse or a lack of care of children and adults with care and support needs either from other staff, from carers, parents or those in place of a parent or between members of the group.
- Ensure they take account of the Section 11 Duty in the Children Act 2004 to make arrangements to ensure that the Council's functions are discharged with regard to the need to safeguard and promote the welfare of children in all decision making.

6.10 The Chief Executive has overall responsibility for the organisation's safeguarding arrangements.

6.11 Strategic Management Board is required to ensure good governance of the organisation and has responsibility to make sure this policy is consistently applied and taken into account when setting strategic direction and reviewing performance.

6.12 Members of Strategic Management Board are also responsible for:

- Implementation of this policy and ensuring that all necessary procedures and practices are in place to provide adequate protection both for the individuals in these groups but also protection for the employees involved with them.
- Ensuring that the procurement framework for the authority includes expectations upon contractors to demonstrate effective safeguarding practices for all their staff.

- Identifying, commissioning and monitoring the Council's safeguarding training needs and attainment of the required training standards.

6.13 Tier 3 Service Leads are responsible for:

- Identifying those services and posts that are likely to have an involvement with children and adults with care and support needs, and undertaking an appropriate risk assessment of posts in respect of DBS disclosure requirements.
- Ensuring that those people appointed by them to the district council, whose normal duties fall into the definition of Regulated Activity as defined in the Safeguarding Vulnerable Groups Act 2006 and amended by the Protection of Freedoms Act 2012, are subject to the appropriate level of DBS disclosure and are appropriately qualified and/or trained in working with these groups.
- Ensuring that proper records are kept of any incidents occurring within their service and that these are held securely and/or passed on to the council's Human Resources team if the incident involves a member of staff.
- Ensuring that employees, volunteers and other workers dealing with these groups are adequately trained and aware of their responsibilities in this area.
- Ensuring that external contractors delivering council services and licensees are aware of the council's expectation that workers are aware of and abide by the standards of behaviour expected of council employees.
- Ensuring that carers and/or parents of the children and adults with care and support needs are aware that, in providing services, council employees are not normally acting in place of a parent, except in relation to events for unaccompanied children who have been formally registered.
- Ensuring the carers and/or parents of the children and adults with care and support needs who are in direct receipt of council services ¹ are made aware that services will be delivered in line with this policy.
- Ensuring that any evidence or complaint of abuse or lack of care is reported to the appropriate body e.g. Devon County Council, Safeguarding Board or the Police, and to council's Human Resources team where employees, volunteers and contractors are involved and to the Monitoring Officer where elected members are involved.
- Ensuring that employees and others do not work with children or adults with care and support needs on regulated activities without an appropriate Disclosure & Barring Service (DBS) disclosure.
- Working with other associated agencies to ensure the proper transfer of information relating to dealings with children and adults with care and support needs, where necessary.
- Ensuring that adequate supervision and support is available to those who have been directly involved in dealing with safeguarding cases, including a debrief of the case and any relevant outcomes.

6.14 Human Resources are responsible for:

- Working with senior managers in maintaining a record of those posts, requiring a DBS disclosure together with the level of disclosure required.

¹ For example: this would include arranging accommodation for a vulnerable adult or holding an event for children at the museum. It would not include arranging accommodation for a family with children where the contract is with the parents/carers.

- Developing robust Safer Recruitment policy and practises and ensuring that information pertinent to working with these groups is obtained during the recruitment procedure.
- Ensuring that DBS Disclosures are carried out in compliance with legislation and DBS guidance.
- Supporting senior managers in dealing with allegations of abuse or lack of care by staff.
- Referring information to the DBS and Local Authority Designated Officer (LADO) about employees who have been dismissed or removed from working with vulnerable groups (or would have been had they not left/resigned) as a result of a relevant caution/conviction, conduct that has harmed or put a child/vulnerable adult at risk of harm, or satisfied the 'Harm Test' in relation to vulnerable groups.

6.15 Volunteers and other workers are responsible for:

- Working with employees of the council, to the same standard, in ensuring the safety and well-being of children and adults with care and support needs within their scope.
- Participating in any training or development opportunities offered to them to improve their knowledge of skills in this area.

6.16 Contractors, suppliers, consultants and licensees are responsible for:

- Working with employees of the council, to the same standard, in ensuring the safety and well-being of children and adults with care and support needs within their scope.
- Participating in any training or development opportunities offered to them to improve their knowledge of skills in this area.

6.17 A requirement to comply with safeguarding legislation will be included in all contracts and service level/delivery agreements. Failure to comply may lead to the termination of contracts. Organisations doing business with us are welcome to adopt our safeguarding policy for their own use.

7. Events and land hire

7.1 Any organisation who has lease agreements or regularly hire out or lease council facilities or open spaces, should have appropriate safeguarding procedures in place. They should ensure any volunteer or employee that has unsupervised contact with children, young people or adults with care and support needs undertakes a DBS check. They will also be required to demonstrate that they have read the Council's Protocol on Dealing with Extremist Speakers and Events (see Appendix B) and will be encouraged to utilise the Council's [Event Checklist Risk Assessment](#).

7.2 Any safeguarding concerns on council land should be reported to a Safeguarding Representative. (Not negating a need to call Police in a safeguarding emergency) Safeguarding Representatives are able to provide further advice and support to groups or organisations.

7.3 Details of these requirements are set out in the Exeter City Council Events Hire Policy.

8. Grant applications

8.1 Safeguarding policies and procedures are required from all grant funded organisations. Satisfactory DBS checks for employees and volunteers may also be requested of any organisation or group, working with children, young people and adults with care and support needs who seek funding from the council.

- 8.2 As a minimum, an organisation will be expected to have a policy statement or procedure relating to safeguarding. Commissioned, contracted or grant funded organisations with minimal contact with children, young people and vulnerable adults may wish to adopt the councils Safeguarding Policy and procedures if deemed suitable.

9. Corporate Parenting

- 9.1 Section 1 of the Children and Social Work Act 2017 applies a set of Corporate Parenting principles to any council “whenever they exercise a function in relation to looked-after children or care leavers”. For a district council the primary impact of this is in relation to the duty to accommodate, council tax support, access to leisure and employment skills development.
- 9.2 The corporate parenting principles set out seven principles that local authorities must have regard to when exercising their functions in relation to looked after children and young people, as follows:
- to act in the best interests, and promote the physical and mental health and wellbeing, of those children and young people
 - to encourage those children and young people to express their views, wishes and feelings
 - to take into account the views, wishes and feelings of those children and young people
 - to help those children and young people gain access to, and make the best use of, services provided by the local authority and its relevant partners
 - to promote high aspirations, and seek to secure the best outcomes, for those children and young people
 - for those children and young people to be safe, and for stability in their home lives, relationships and education or work; and
 - to prepare those children and young people for adulthood and independent living
- 9.3 The lead officer for Corporate Parenting is the Strategic Safeguarding Lead and the lead member is the Portfolio Holder for Corporate and Democratic Services and Environmental Health which includes Safeguarding.
- 9.4 Section 2 of the Children and Social Work Act 2017 requires each local authority to consult on and publish a local offer for its care leavers. The local offer should provide information about all the services and support that is available to care leavers from the local authority, including information about both their statutory entitlements as well as any discretionary support that a local authority chooses to provide.

10. Work experience placements and employees under 18 years of age

- 10.1 The following principles apply when setting up work experience placements for people under the age of 18 or adults with care and support needs:
- All placements can only be agreed between Human Resources and the school, college or other organisation supporting the individual
 - Line Managers must prepare, and Human Resources must approve, the requisite documentation before any placement can start
 - “Requisite documentation” includes relevant Risk Assessments, the agreed Work Programme and confirmation that there are appropriate numbers of enhanced DBS-checked employees available
 - “Appropriate numbers” must be adequate enough to ensure that an individual is not left unsupervised at **any** time. In order to provide adequate cover, this requires at least 2 DBS checked employees being available for the duration of the time the individual is on site
 - If the above cannot be met, then the request will be denied.

- 10.2 All paid and volunteering roles with the Council are risk assessed at recruitment stage. Any applications from people under the age of 18 will be assessed for safeguarding risks in line with the Council's recruitment and volunteering policies.
- 10.3 The minimum age for any work experience, volunteering or paid role with the council is 16 years of age.

11. The LADO process

- 11.1 The Local Authority Designated Officer (LADO) is a statutory role which sits within Devon County Council Children Services. The LADO is responsible for co-ordinating the response to concerns that an adult who works with children may have caused them or could cause them harm. The LADO also gives advice and guidance to employers, organisations and other individuals who have concerns about the behaviour of an adult who works with children and young people. Included in this group are volunteers, agency staff and foster carers as well as people who are in a position of authority and have regular contact with children.
- 11.2 The LADO should be alerted to all cases in which it is alleged that a person who works with children has:
- behaved in a way that has harmed, or may have harmed, a child
 - possibly committed a criminal offence against children, or related to a child
 - behaved towards a child or children in a way that indicated they may pose a risk of harm to children.
 - behaved or may have behaved in a way that indicates that they may not be suitable to work with children.
- 11.3 Allegations of non-recent abuse should be referred in the same way as contemporary concerns.
- 11.4 If an Exeter City Council staff member or elected member becomes aware of a situation as outlined in 11.2 above they should immediately alert the Director with responsibility for Legal (Monitoring Officer), the Strategic Safeguarding Lead and either:
- the Service Lead for Human Resources where a member of staff is involved, or
 - the Service Lead for Environmental Health and Community Safety in cases which involve a licence issued by the authority,
- who then inform the LADO within 1 working day.
- 11.5 Having assessed the referral the LADO may arrange one or more Managing Allegations Meetings liaising with the police and other agencies as necessary. Attendance at a LADO Managing Allegations Meeting should be always be made by two officers together to ensure that if total confidentiality is required (e.g. to safeguard an ongoing police investigation) the weight of responsibility does not fall to one officer alone.

12. Safeguarding Training

- 12.1 At recruitment, the council assesses the skills, experience and previous training of the applicant in order to appoint the most suitable person for the job. Training needs are reviewed at the recruitment of new starters and then formally on an annual basis during appraisals.
- 12.2 Safeguarding training supports the protection and welfare of children, young people and adults with care and support needs. Training on safety issues related to children such as use of play equipment or provision of food at events, as well as safeguarding of council staff, elected

members, contractors or volunteers is dealt with separately under the Health and Safety Policy and associated procedures.

12.3 A matrix is included at Appendix B setting out the current plan for training across the organisation. This matrix is subject to regular review and updated by the Strategic Management Board in light of legislative changes or availability of appropriate training courses.

12.4 Induction Training

12.4.1 All employees and volunteers will be inducted in the contents of this Policy by the Service Lead or Team Leader with particular emphasis on their personal responsibilities.

12.4.2 All new elected members will be directed to this Policy as part of the Member's Handbook and their induction by the Democratic Services Team Leader Support.

12.4.3 All new employees, volunteers and elected members also receive a mandatory general safeguarding induction. This will either take the form of an Elearning course or will be delivered by the Service Lead or Team Leader. This training is required irrespective of whether the individual has undertaken recent similar training in another role, for example as a school governor or sports coach.

12.4.4 The course will cover:

- their legal duties, as set down in safeguarding legislation (refer to main Safeguarding Policy)
- how to recognise signs of abuse or neglect
- how to report concerns

12.5 Specific Responsibilities

12.5.1 Where an individual takes on specific safeguarding responsibilities, for example Safeguarding Representatives, they will receive relevant safeguarding training in these responsibilities.

12.5.2 Elected members and staff who are members of the Licensing Committee will undertake mandatory subject specific safeguarding training as a requirement of that role.

12.6 Refresher Training

12.6.1 All staff, volunteers and elected members will be required to undertake mandatory refresher training every three years.

12.7 Consultation and Communication

12.7.1 Exeter City Council consults with Employees and Trade Unions about the planning and organisation of safeguarding training through the Corporate Safeguarding Group and the Safeguarding Representatives Group (comprising Employee Representatives and Trade Union Representatives).

12.7.2 Any recommendations for new or revised safeguarding training are made to the Strategic Management Board through the Safeguarding Representatives Meeting or the Councillor Development Steering Group as appropriate.

12.8 Training Needs, Coordination of Training and Competency of Trainers

12.8.1 All safeguarding training is provided by competent instructors and takes place during working hours. The identification of general training needs is a line management function and follows a risk based approach. The table at Appendix C provides guidance on training that is:

- Mandatory for all members of staff,
- Essential for Specific Roles
- Desirable for Specific Roles

(Advice and information is available from the Corporate Safeguarding Lead.)

12.8.2 Day to day coordination of the staff training programme is carried out by the Human Resources Adviser Team Leader with the support of the Corporate Safeguarding Lead.

12.8.3 The effectiveness of training is evaluated by the use of end of course assessments and feedback forms for management review. Records of training, including the date, name of delegate, tutor details and contents of the course, are held by the Human Resources Adviser Team Leader and Democratic Services Team Leader.

12.8.4 For in-house taught courses the lesson plans, syllabus and course material are jointly held by the Human Resources Adviser Team Leader, Democratic Services Team Leader and the Corporate Safeguarding Lead.

12.8.5 Where Exeter City Council does not have the necessary in-house competence to undertake a specific task or specialist work, we will engage specialist contractors who have been assessed for their competence.

12.9 Exceptions to mandatory training and support for delegates

12.9.1 Some people may find the subject matter of safeguarding training triggers unwanted memories and emotions for them because of personal experiences or because of mental health issues. Where this is the case staff should work with their manager and/or the HR Adviser Team Leader to find an alternative method of ensuring they understand the basic principles of safeguarding and how to refer cases without going into the detail.

12.9.2 They are not expected to divulge details of their experience and it will be sufficient to declare that they find the subject matter “too upsetting”.

12.9.3 All staff, volunteers and elected members should be provided with the opportunity to discuss the learning from these courses with colleagues in a supportive environment by their Service Lead, Team Leader or Group Leader.

12.9.4 All courses will begin with a warning about the content and advice on organisations to contact if individuals feel they need support.

13. **Review**

13.1 This policy and the related guidance will be reviewed every three years or sooner if required by the Safeguarding Representatives Group and Strategic Management Board. This will include an on-going review of guidance, both nationally and locally, to ensure the Council meets requirements to safeguard children, young people and adults, and there are appropriate procedures and protocols in place.

13.2 The Council's scrutiny function will also have a role in scrutinising and challenging where appropriate the implementation of the Corporate Safeguarding Policy.

Serious Crime Act 2015

Part 5 Protection of children and others

Protection of children

- 66. Child cruelty offence
- 67. Sexual communication with a child
- 68. Child sexual exploitation
- 69. Possession of a paedophile manual

Female genital mutilation

- 70. Offence of female genital mutilation: extra-territorial acts
- 71. Anonymity for victims of female genital mutilation
- 72. Offence of failing to protect girl from risk of genital mutilation
- 73. Female genital mutilation protection orders
- 74. Duty to notify police of female genital mutilation
- 75. Guidance about female genital mutilation

Domestic Abuse

- 76. Controlling or coercive behavior in an intimate or family relationship
- 77. Guidance about investigation of offences under section 76

Further information can be found at: <http://www.legislation.gov.uk/ukpga/2015/9/contents/enacted>

Protocol on Dealing with Extremist Speakers and Events

Since 2015, the Exeter City Council has had a statutory duty to “have due regard to the need to prevent people from being drawn into terrorism”. This includes ensuring that publicly-owned venues and resources do not provide a platform for extremists and are not used to disseminate extremist views.

Policy Statement

Exeter City Council will not permit its premises or land to be let:

- For events or functions attended by people whose presence may cause civil unrest or detrimental community tension;
- To an organisation or individual which has been banned by law.

The council also reserves the right to cancel any booking where it considers:

1. That such events may be contrary to the interest of the general public or contrary to any law or act of Parliament. Any bookings will also be subject to consideration from the police to ensure the safety of the community is assessed against the request for a premise or land hire.
2. The users of the premises / land may do something that may cause or pose a risk of loss, damage or significant expense to the council or harm the reputation of the Council.

Procedure

If the organisation or individual making the booking is not already known to the staff member processing the premises/land booking, then the staff member must:

1. Establish what the premises/land will be used for and what type of event the customer is wishing to hold.
2. Establish if the name given is linked to any community group or organisation
3. Request a copy of the programme details and names of any speakers.
4. Request all contact details (address, mobile, home and business contact number).
5. If the customer is not a local resident, establish why they are holding an event in this area.
6. Ask the customer if they have used any other premises/land in the country, if so contact the previous venue(s) to establish what the event was.

If the answers received raise concerns that the event may be controversial or extremist in nature then staff should alert the Prevent Lead (Policy Officer - Community Safety, Safeguarding and Equality & Diversity), Service Lead - Environmental Health and Community Safety and Environmental Health and Community Safety Managers, by email.

The relevant service Director in conjunction with the Premises or Operational Manager (with advice from the Chair of the Safety Advisory Group and Prevent Lead) will make the final decision on whether an event can go ahead.

This decision will be shared in advance of being communicated to the booking organisation with other known venue providers and the Council's communications team.

Training Needs Guidance Table (Including Refresher Training)

| Programme / Course | Mandatory Essential Desirable | Employment Group | Numbers of delegates and cost |
|--|--|--|---|
| Induction and general awareness training | | | |
| Induction 1st Day – link to Safeguarding Policy | Mandatory (<i>Checklist with Manager</i>) | All staff, volunteers and elected members (<i>No refresher</i>) <i>All signposted to Safeguarding Policy and procedure documents</i> | No cost. Delivered by relevant manager who must have undertaken the mandatory training below. |
| Safeguarding Children and Adults In house E-Academy course | Mandatory (1 hour max) | All office staff, volunteers and elected members (January/February 2022 then refresher every three years (Jan/Feb 2025)) | 563 employees with email (approx.) 39 councillors Costed as part of contract with platform provider (Learning Nexus). This may not be appropriate for all staff with email. Some only have email on a phone and may be better placed to do a Toolbox Talk. Service Leads working with Safeguarding Reps will need to provide information on which staff should be included. |
| Tool-Box-Talks | Mandatory (30 minutes) | All manual staff without council email address (<i>Refresher every three years</i>): Waste: - Waste Operations Loaders / Drivers (all posts below Supervisor level) - MRF Operatives | No cost. Delivered by relevant manager or Safeguarding Rep where the service has one, using Exeter City Council slides and script: Note that manager and reps should have undertaken the training themselves before delivering it to others. Delivered by Waste Operations Manager |

| | | | |
|---|---|--|--|
| | | <p>Leisure:</p> <ul style="list-style-type: none"> - Leisure Employees (all posts below Duty Manager level) <p>Public & Green Spaces:</p> <ul style="list-style-type: none"> - Public & Green Space Specialist Skills - Public & Green Space Mechanical Skills - Public & Green Space Operators <p>RAMM:</p> <ul style="list-style-type: none"> - RAMM Cleaners - Casual RAMM Assistants - Casual RAMM Retail Assistants <p>Facilities & Markets:</p> <ul style="list-style-type: none"> - Casual Car Boot Supervisors - Casual Central Controllers - Casual Bar – Corn Exchange - Casual Market Assistants - Casual Quay House - Casual Underground Passages | <p>Delivered by Leisure Centre General and Duty Managers</p> <p>Delivered by Public & Green Spaces Charge Hands (already trainer trained)</p> <p>Delivered by RAMM Managers and Safeguarding Reps</p> <p>Delivered by Facilities and Markets Managers and Safeguarding Rep</p> |
| <p>Preventing Violent Extremism In house E-Academy course which will include Home Office video</p> <p>Tool-Box-Talks</p> | <p>Mandatory (1 hour max)</p> <p>Mandatory (30 minutes)</p> | <p>All office staff, volunteers and elected members (January/February 2022 then refresher every three years (Jan/Feb 2025))</p> <p>All manual staff (<i>Refresher every three years</i>). See <i>Safeguarding Children above</i>.</p> | <p>As above</p> <p>As above.</p> |
| <p>Safeguarding and Licensing Induction for Licensing Committee elected members and staff</p> | <p>Mandatory (2 hours)</p> | <p>All Licensing Committee elected members and staff (<i>Refresher year</i>)</p> | <p>Local provider has been identified at cost of £200 per session</p> |

| | | | |
|--|----------------------------|--|--|
| Role Specific and advanced level Training (<i>Training needs will be identified and organised by Service Leads following staff Performance and Development reviews</i>) | | | |
| Group 2 Responding to allegations and role of the LADO e-learning Devon County Council/Devon Safeguarding Children Board DEL course | Mandatory | Strategic Management Board including the Strategic Safeguarding Lead and Directors with responsibility for Licensing and Legal Corporate Safeguarding Lead Monitoring Officer Service Lead Legal and Deputy Monitoring Officer Service Lead Environmental Health (including Licensing) and Community Safety which includes Licensing and Deputy Service Lead Human Resources | £5 per Devon Safeguarding Children Partnership licence for approx. 15 staff = £75 |
| Themed topics for front line staff to be updated | | | |
| Dealing with Domestic Abuse disclosures – Priority - following recent cases involving staff flagged by service reps to the Corporate Safeguarding Lead, it has been recognised that training on how to manage these situations is needed. | Mandatory | Four domestic abuse leads HR All managers | Use local service provider Fear Free – cost and length and format of course to be confirmed. |
| Dealing with sexual abuse disclosures and interviewing for witness statements | Essential | Four domestic abuse leads Environmental Health Licensing Team | Devon Rape Crisis £85 per delegate |
| Domestic Violence and Abuse (DVA) | Mandatory (approx. 1 hour) | Safeguarding Representatives Group and all customer facing staff who are either working with children, families and adults | Devon County Council Domestic Abuse ELearning Level 1 included in DeL license fee. |

| | | | |
|---|-----------|--|---|
| | Desirable | <p>with care and support needs where they would be in a position to identify DVA or have it disclosed to them.</p> <ul style="list-style-type: none"> • Customer Services • Housing Needs • Housing Assets, Lettings and Leasehold • Benefits, Payments and Collections • Environmental Health, Private Sector Housing and Licensing <p>Elected members will be invited to undertake the training to build on knowledge from the mandatory courses.</p> | |
| Mental Capacity Act | Essential | All staff dealing with adults with care and support needs should be aware of how to assess for capacity when requiring decisions. | Free Mental Capacity Act training available online by Hounslow and Richmond Community Healthcare NHS Trust |
| Suicide Prevention | Essential | All front facing staff and others to be decided and rolled out by Service/Team Leads as needed. | Free suicide awareness training, https://www.zerosuicidealliance.com/training Link in with Suicide Prevention Partnership |
| <p>Mental Health (particular focus on anxiety and depression rather than psychosis or schizophrenia)</p> <ul style="list-style-type: none"> • What to look out for • Services available • How to respond | | <p>All Members of Safeguarding Representative Group</p> <p>Housing Needs</p> <p>Housing</p> <p>Customer Services</p> <p>Income Collection</p> | <p>DCHOP may be delivering a session for Housing Needs so this may be appropriate for other services.</p> <p>Connect 5 (Public Health) may also be appropriate.</p> |
| Self-Neglect | | | These are topics that have either been requested by managers or are emerging issues that need more in depth training for some front line staff. All are available as multi-agency |
| Substance misuse | | | |
| Safeguarding at events | | | |
| Safer recruitment | | | |

| | | | |
|---|--|--|--|
| Adverse Childhood Experience and Trauma Informed Practice | | | training via Devon County Council or free bite size training delivered by Devon Community Safety Partnerships. |
| Modern Slavery | | | |

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Equality Impact Assessment: Review of Safeguarding Policy

The Equality Act 2010 includes a general duty which requires public authorities, in the exercise of their functions, to have due regard to the need to:

- **Eliminate discrimination**, harassment and victimisation and any other conduct that is prohibited by or under the Act.
- **Advance equality of opportunity** between people who share a relevant protected characteristic and people who do not share it.
- **Foster good relations** between people who share a relevant protected characteristic and those who do not

In order to comply with the general duty authorities must assess the impact on equality of decisions, policies and practices. These duties do not prevent the authority from reducing services where necessary, but they offer a way of developing proposals that consider the impacts on all members of the community.

Authorities which fail to carry out equality impact assessments risk making poor and unfair decisions which may discriminate against particular groups and worsen inequality.

| Committee name and date: | Report Title | Decisions being recommended: | People with protected characteristics potentially impacted by the decisions to be made: |
|---|--|---|--|
| Executive 22 January 2024 Council 20 February 2024 | Corporate Safeguarding Policy Revised August 2023 | Adoption and Implementation of the revised policy | Older people, young people, those with disabilities, people from ethnic minority backgrounds |

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

Factors to consider in the assessment: For each of the groups below, an assessment has been made on whether the proposed decision will have a **positive, negative or neutral impact**. This must be noted in the table below alongside brief details of why this conclusion has been reached and notes of any mitigation proposed. Where the impact is negative, a **high, medium or low assessment** is given. The assessment rates the impact of the policy based on the current situation (i.e. disregarding any actions planned to be carried out in future).

High impact – a significant potential impact, risk of exposure, history of complaints, no mitigating measures in place etc.

Medium impact – some potential impact exists, some mitigating measures are in place, poor evidence

Low impact – almost no relevancy to the process, e.g. an area that is very much legislation led and where the Council has very little discretion

| Protected characteristic/ area of interest | Positive or Negative Impact | High, Medium or Low Impact | Reason |
|---|-----------------------------|----------------------------|---|
| Race and ethnicity (including Gypsies and Travellers; migrant workers; asylum seekers). | Positive | High | The Policy includes actions to protect people experiencing cultural issues such as forced marriage and Female Genital Mutilation which tend to affect young people from ethnic minority backgrounds disproportionately. The Policy covers Modern Slavery which can affect migrant workers. |
| | Negative | High | When using the Protocol On Dealing With Extremist Speakers and Events, if: <ol style="list-style-type: none"> 1. staff making decisions about whether to research an individual or organisation making a booking, and 2. staff making decisions about whether to accept a booking do not have clear criteria for doing so and are not fully aware that they may make biased decisions, there is a danger that individuals and organisations could be racially or religiously profiled. Training on Prevent, race and religion awareness and unconscious bias for staff involved in making both these decisions would help to mitigate this impact. |

| | | | |
|---|----------|--------|--|
| <p>Disability: as defined by the Equality Act – a person has a disability if they have a physical or mental impairment that has a substantial and long-term adverse impact on their ability to carry out normal day-to-day activities.</p> | Positive | High | The policy has two key purposes, one of which is to demonstrate the Council's commitment to safeguarding from harm all adults with care and support needs using any council services and involved in any of their activities, and to treat them with respect during their dealings with the councils, our partners and contractors. |
| | Negative | Medium | Staff with some mental health issues or who have experienced abuse themselves, may find the policy and associated training triggering. The policy states that where this is the case Managers and the HR Adviser Team Leader will need to find an alternative method of ensuring that the staff member understand the basic principles of safeguarding and how to refer cases without going into the detail. The Employee Assistance Programme is also available to staff which may help them work through some of these issues. |
| | Negative | Medium | If staff making decisions about whether to research an individual making a booking for an event do not have clear criteria for doing so and are not fully aware that they may make biased decisions, there is a danger that some individuals who have certain disabilities such as mental health or neurodevelopmental conditions may appear suspicious whereas their behaviour is simply a result of their condition. The process within the Protocol On Dealing With Extremist Speakers and Events along with disability awareness and Prevent training should help to mitigate this impact. |
| Sex/Gender | Positive | High | The policy covers domestic violence and abuse which has a disproportionate impact on women. |
| Gender reassignment | | | |
| Religion and belief (includes no belief, some philosophical beliefs such as Buddhism and sects within religions). | Negative | High | When using the Protocol On Dealing With Extremist Speakers and Events, if: <ol style="list-style-type: none"> 1. staff making decisions about whether to research an individual or organisation making a booking, and 2. staff making decisions about whether to accept a booking |

| | | | |
|---|----------|------|---|
| | | | do not have clear criteria for doing so and are not fully aware that they may make biased decisions, there is a danger that individuals and organisations could be racially or religiously profiled. Training on Prevent, race and religion awareness and unconscious bias for staff involved in making both these decisions would help to mitigate this impact. |
| Sexual orientation (including heterosexual, lesbian, gay, bisexual). | | | |
| Age (children and young people aged 0-24; adults aged 25-50; younger older people aged 51-75/80; older people 81+; frail older people; people living with age related conditions. The age categories are for illustration only as overriding consideration should be given to needs). | Positive | High | The purpose of the policy is to demonstrate the council's commitment to safeguarding from harm all children, young people and adults with care and support needs using any council services and involved in any of their activities, and to treat them with respect during their dealings with the council, our partners and contractors. |
| Pregnancy and maternity including new and breast feeding mothers | | | |
| Marriage and civil partnership status | | | |
| <p><u>Actions identified that will mitigate any negative impacts and/or promote inclusion</u></p> <ul style="list-style-type: none"> While the policy's intent is overwhelmingly positive, there could be situations where unconscious bias leads staff to make assumptions about who may need safeguarding. The development of training on Equality, Diversity and Inclusion and Unconscious Bias as well as Safeguarding will help to address this. | | | |

Officer: Melinda Pogue-Jackson
Date: 26 September 2023

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REPORT TO EXECUTIVE

Date of Meeting: 22 January 2024

REPORT TO COUNCIL

Date of Meeting: 20 February 2024

Report of: Director of Culture, Leisure and Tourism

Title: Community Grants Programme 24/25 Proposal

Is this a Key Decision?

No

Is this an Executive or Council Function?

Council

1. What is the report about?

1.1 This report sets out proposals for the Community Grants Programme for 24/25 and how this can be funded using the Neighbourhood portion of the Community Infrastructure Levy (NHCIL) in 24/25.

2. Recommendations:

That Executive recommend to Council to:

2.1 Accept the 11 recommendations relating to the Community Grants Programme as set out in section 8.6 of this report.

2.2 Accept the 5 recommendations relating to Wellbeing Exeter as set out in section 8.8 of this report.

2.3 Allocate £154,000 from the NHCIL reserve to fund the proposed 2024/25 Community Grants programme.

2.4 Allocate £30,970 from the NHCIL reserve to fund the staffing costs of administering the programme.

2.5 Allocate £275,563 from the NHCIL reserve to fund the new core Wellbeing Exeter programme in 2024/25.

2.6 Delegate authority for under £1million to the Portfolio Holder and the Director of Culture, Leisure and Tourism to allocate additional, available funding from the NHCIL reserve to fund Wellbeing Exeter Enhanced Model to continue community building within Pinhoe and St. James wards which are the areas in the City subject to the greatest housing development.

2.7 Allocate £70,000 of the ring-fenced Wellbeing Exeter reserve to aid the transition to the new core model in 2024/25 and to provide a baseline for other funders to match.

2.8 Delegate authority to the Director of Culture, Leisure and Tourism to commission a Lead Organisation to take over from Devon Community Foundation and the co-ordinator of Wellbeing Exeter

2.9 Require the Portfolio Holder and Director of Culture, Leisure and Tourism to update the Executive on the progress of the transition of Wellbeing Exeter and the Community Programme and bring forward recommendations for priorities and spending in 2025/26 by September 2024.

3. Reasons for the recommendation:

3.1 The Exeter Community Grants Programme was agreed in July 2019 following extensive listening and public consultation. Stakeholder and community feedback was taken into account and a new framework was implemented in December 2019.

3.2 On adopting the new policy, Council agreed to a review in 3 years, this review was postponed due to Covid and has been undertaken during 2023. The internal review aimed to assess the impact of the programme, identify future priorities and funding strategies as part of the annual Medium Term Financial Planning (MTFP) cycle. The Community Grants Review Report (Dec 2023) is appended to this document.

3.3 Alongside this internal review, an external independent report: The Wellbeing Exeter Strategic Development Review was published in February 2023 followed in October 2023 by the launch of the Wellbeing Exeter sustainable funding campaign "Wellbeing Exeter: The Case for Support". <https://exeter.gov.uk/wellbeing/>

3.4 The recommendations in this report are based on the findings of these 3 reports and represent a sustainable future for the Community Grants Programme and Wellbeing Exeter.

4. What are the resource implications including non financial resources

4.1 The table in section 8.9 below sets out the financial plan for the programme with the majority of the funding coming from the Neighbourhood CIL reserve and planned income from the Exeter Lottery.

4.2 Additional funding for Wellbeing Exeter is available in the Wellbeing Exeter reserve. The total sum for funding Wellbeing Exeter from the CIL and the reserve will be around £400,000 and this funding from ECC will attract additional on-going funding in the region of £270,000 - £370,000 into Wellbeing Exeter from Sport England through the Live and Move Grant to be awarded to Exeter City Council as part of the legacy funding of the Local Delivery Pilot. It is hoped the funding from Sport England will be committed until 2028. A process to secure funding begins in February 2024 and should be complete by September 2024. There is on-going work seeking funding from external sources to mitigate the funding withdrawn from Wellbeing Exeter by Devon County Council and a report on progress will be submitted to the Executive by September 2024 so members can consider any long-term commitment they wish to make to the future of Wellbeing Exeter.

4.3 Officer resources will be needed to set up the programme and commission the Lead Organisation for Wellbeing Exeter. These costs will be met through existing resources

and a contribution to staff salaries for the administration of the Grants Programme from the Neighbourhood CIL reserve.

5. Section 151 Officer comments:

The proposals set out above allocate all available and anticipated neighbourhood CIL, as and when it becomes available. The fixed amounts already have funding identified and it is appropriate therefore for authority to be delegated regarding the remaining amount as and when it becomes available.

6. What are the legal aspects?

6.1 The Community Infrastructure Levy (CIL) is a planning charge that local authorities can require of most types of new development (based on £s per square metre) in order to pay for the infrastructure needed to support development. Regulation 59A of the CIL Regulations envisages that a local authority should engage with communities where development has taken place (in this case the city of Exeter) and agree on spending priorities with regard to the neighbourhood portion of CIL. The amount of neighbourhood CIL equates to at least 15% of levy receipts for chargeable development in an area where there is no neighbourhood plan and 25% for chargeable development in an area where there is a neighbourhood plan.

6.2 The Exeter Community Grants Programme was agreed in July 2019. Where it includes the Neighbourhood portion of CIL, it must be spent in accordance with the statutory provisions set out in the CIL Regulations 2010 and the Planning Practice Guidance (PPG). The Neighbourhood portion of CIL must be spent in accordance with the statutory criteria set out in Regulation 59F and Paragraph 73 of the PPG.

6.3 Regulation 59F of the CIL Regulations states: "...the charging authority (i.e., Exeter City Council) may use the CIL...to support the development of the relevant area by funding-

- a) the provision, improvement, replacement, operation or maintenance of infrastructure;
or
- b) anything else that is concerned with addressing the demands that development places on an area."

6.4 Paragraph 73 of the PPG states: "...the charging authority will retain the levy receipts but should engage with the communities where development has taken place and agree with them how best to spend the neighbourhood funding."

6.5 The commissioning of a new lead organization will need to follow the Council's procurement policy.

7. Monitoring Officer's comments:

The Monitoring Officer has nothing further to add to the legal comments set out in paragraph 6 above.

8. Report details:

8.1 The Exeter Community Grants programme was agreed in July 2019 following extensive listening and consultation. Stakeholder and community feedback was taken into account and the following framework was implemented in December 2019.

- Establishment of a grant funding approach that will maximise the value of the council's spending and ensure the sustainability of community groups.
- A balance of awarding grants with contracts for more strategic services.
- A clear 'bottom up' approach to community development: Asset Based Community Development.
- Good governance that recognises the specific accountability of elected members but enables the Council and community to decide on priorities together.

8.2 On adopting the above policy, Council agreed for a review within 3 years, which was postponed due to Covid and was completed in 2023 to assess the impact of the programme, identify future priorities and funding strategies as part of the annual Medium Term Financial Planning (MTFP) cycle. The Internal Review of Community Grants Programme is appended to this document.

8.3 The total spent on grants during the period 2019/2023 was £882,979 through 599 grants. The ECC grants programme has injected over £880,000 into the community over the last 4 years, this is a significant sum for the Council, but it is 0.6% of all the income received by charities in the city. The Internal Review of Community Grants Programme provides detail on the types of grants available; how much was awarded and to whom. It also provides information on the two contracts for services funded through the grant programme. The key findings of the report are set out below.

8.4 Key Findings: Community Grants

8.4.1 The majority of all available funding has been spent on buildings and building renovations in particular. With 8 building renovation projects consuming 30% of all funding.

8.4.2 Priority Neighbourhoods are not getting a higher share of the money or even an equal share.

8.4.3 There are currently no restrictions on the number of grants an organisation can apply for. Smaller, local community groups are potentially being disadvantaged with the majority of funding being awarded to larger, better resourced organisations. 59% of all available funding was awarded to 15 organisations.

8.4.4 Ward grants arguably have greatest potential reach – 17% of all funding into 67% (398) of all grants – compared to other grants, yet some Councillors, particularly in our most disadvantaged areas are not utilising the funds which are underspent year on year.

8.4.5 There is limited financial diligence undertaken prior to larger grants being awarded and some of the organisations may be able to secure funding from sources other than the Council and the funds better directed to projects more aligned with the Council's strategic aims and objectives.

8.4.6 With limited impact data it is difficult to assess what benefit the target communities have derived from this funding. However, the independent evaluation of Wellbeing Exeter highlights the effectiveness of capacity building work in communities which should encourage the Council to re-think it's grant giving on evidence-based approaches in order to make best use of the available funds.

8.5 Key Findings: Contracts for Services

8.5.1 The Information Advice and Advocacy Contract has improved the working relationship between Citizen Advice Exeter (CAE), Council and other partner organisations, however it is unclear what benefits a contractual arrangement brings over the traditional grant model. The work of the CAE is of significant value and importance to the city however it's apparent that CAE is dependent on the Council for around 1/3 of its core funding: this is a high-risk strategy for the CAE and the Council. Should members wish to support the work of a service provider like the CAE in future this will have to be funded from alternative sources other than the NHCIL.

8.5.2 The Council has been able to influence the development of Exeter Connect as a new service. There is activity data to indicate that there has been more collaboration across the VCSE sector in the city supported by Exeter Connects network co-ordination work and support for existing and emerging groups/organisations. This was evident by the collaboration that took place during the Covid pandemic when Exeter Connect supported the Exeter Community Wellbeing approach led by the City Council. There is also other significant VCSE co-ordination and networking taking place through Wellbeing Exeter delivered through CoLab Exeter.

8.6 Community Grants Programme Recommendations

It is recommended that consideration should be given to the following:

1. A strategic needs assessment of community buildings should take place before any further investment is made in building projects
2. More stringent targeting should take place alongside proactive promotion of small community grants which could be more effective if linked into the work of Wellbeing Exeter's locality-based Community Builders.
3. Allocating grants to addressing specific issues faced predominately in priority neighbourhoods such as digital exclusion, where there is a strong evidence based on effective approaches that deliver measurable impacts.
4. Placing a cap on the amount of grant funding that can be awarded to any one organisation over a 3-year period and also on the number of applications that can be made in any financial year. (Though it is recognised, and would need to be taken into account, that some of the larger organisations act as an umbrella organisation for smaller grass roots groups that are not constituted and do not have their own bank account).
5. The Executive to continue to allow for grant award decisions to be made by members on the cross-party Grants Panel but to consider more pro-active monitoring of the deployment of ward grants and reducing the annual allocation to better reflect average annual spend over the last 4 years: £3,000 per ward.

6. That more robust due diligence, including ensuring the receipt of impact evaluation be undertaken prior to the award any grant in excess of £5,000.
7. A re-focus of grant giving on evidence-based approaches to make best use of the available funds. This could be achieved by linking ECC community grants into the work of Wellbeing Exeter's locality-based Community Builders which would ensure robust impact assessment in line with Wellbeing Exeter policy and practice.
8. Adopting a more explicit and positive approach to match funding.
9. Switching from an open annual rolling grant programmes to a more structured approach opening the grant fund for limited periods 2 or 3 times a year. This would be less resource intensive for staff and members and provides flexibility in managing fluctuations in NHCIL income in year without disrupting the grants programme.
10. The Information, Advice and Advocacy Contract comes to an end in March 2024 after two extensions and is unable to be continued in its present form. If the Council wish to continue to support the work of the work of Citizens Advice, it is suggested to use sources other than funding from Neighbourhood CIL.
11. As the long-term future of Wellbeing Exeter is also under consideration it makes sense for the Council to consider embedding key aspects of the Exeter Connect contract into Wellbeing Exeter's future role. This makes financial and system sense and avoids duplication of effort and spend. If the Council decides to discontinue funding Wellbeing Exeter it could then reconsider if it is a priority for the Council to re-establish a VCSE support organisation in the city.

8.7 Key Findings Wellbeing Exeter Review

8.7.1 An independent review of Wellbeing Exeter was completed in 2023 and this concluded:

“There is no doubt about the benefits of having Wellbeing Exeter embedded in the city and ‘it’s a better place because of it’. The outcomes for individuals, for communities and for some systems within the city are evident. Over the last couple of years communities have faced a difficult time, the impacts of the global pandemic and the recession are all around us: extraordinary levels of anxiety and isolation need gentle support to recover. Wellbeing Exeter is able to do that it has repeatedly demonstrated its ability to flex and adapt to support the building of community resilience. There is no doubt that Wellbeing Exeter is very well placed to support the needs of the community at this time.

It is clear that Wellbeing Exeter is a vital component of Exeter Vision 2040 and can help to achieve that vision through reducing inequality, improving health outcomes and fostering community cohesion across our neighbourhoods. It is clear from the review that there is too much at stake to lose Wellbeing Exeter, it is embedded in communities and provides a flexible and adaptable partnership that supports the city.” Wellbeing Exeter Strategic Development Review Report March 2023”.

8.7.2 Following the publication of the Strategic Review Wellbeing Exeter commissioners and delivery partners worked together to publish a sustainable funding prospectus: Wellbeing Exeter: The Case for Support”. (Oct 2023) <https://exeter.gov.uk/wellbeing/>. The

recommendations in this report relating to Wellbeing Exeter are the City Council's response to The Case for Support.

8.7.3 In 2018 the Council published its first Physical Activity Strategy which set out its strategic intention to focus resources on these priority neighbourhoods. This approach was pivotal in securing the Sport England Local Delivery Pilot status and resources to develop this targeted community-led approach. (See figure 1 below)

8.7.4 As the Case for Support sets out, Wellbeing Exeter is able to demonstrate the evidence base for its long-term work in the city to have a positive impact on reducing entrenched inequalities. The new core model for Wellbeing Exeter is designed to build on the past 10 years and refocus even more effort into the communities of greatest need.

8.7.5 Whilst funding was available Wellbeing Exeter continued to provide Community Building in all wards of the city. However, with the withdrawal of funding from some long-term partners the new core model re-focusses attention on the areas of greatest need. Alongside the core model Wellbeing Exeter can offer enhanced programmes for investors that wish to focus on additional groups and/or issues. Full details of this model are in the Case for Support but are summarised in figure 2 below.

Figure 1: Exeter City Council Physical Activity Strategy Priority Neighbourhoods

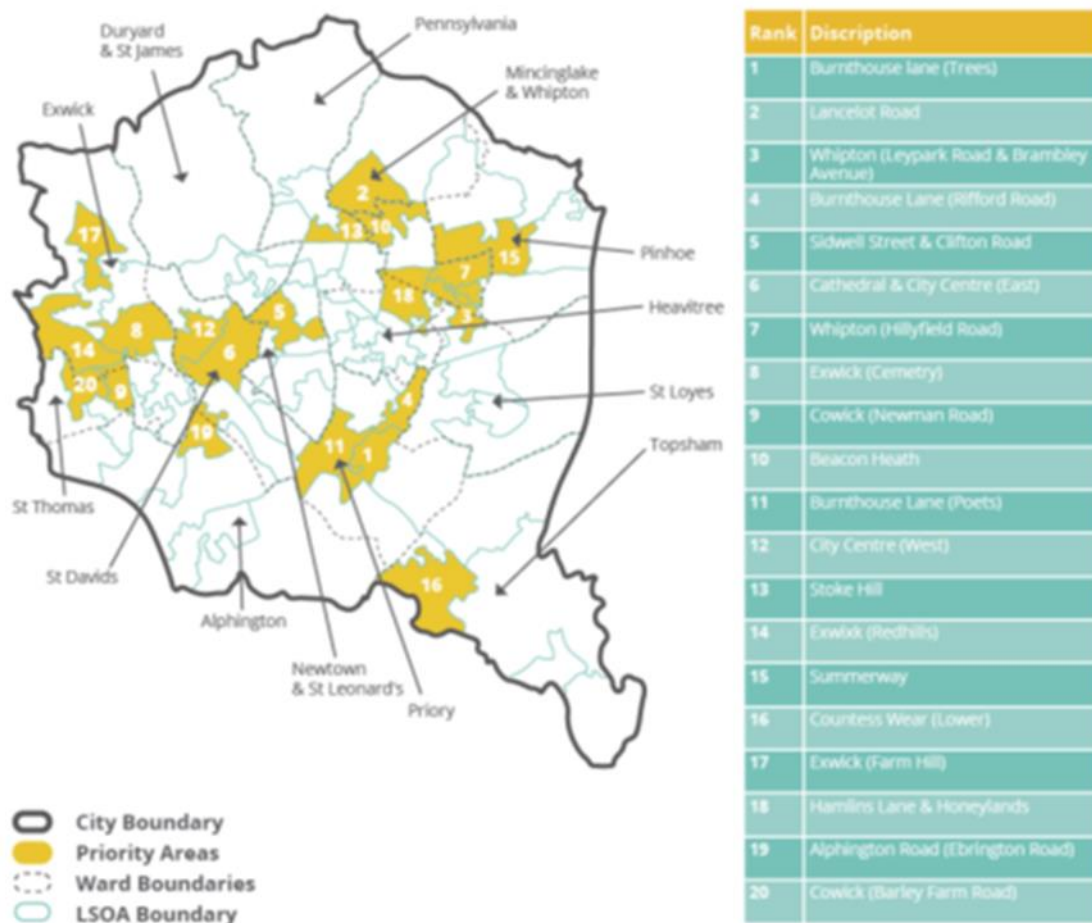
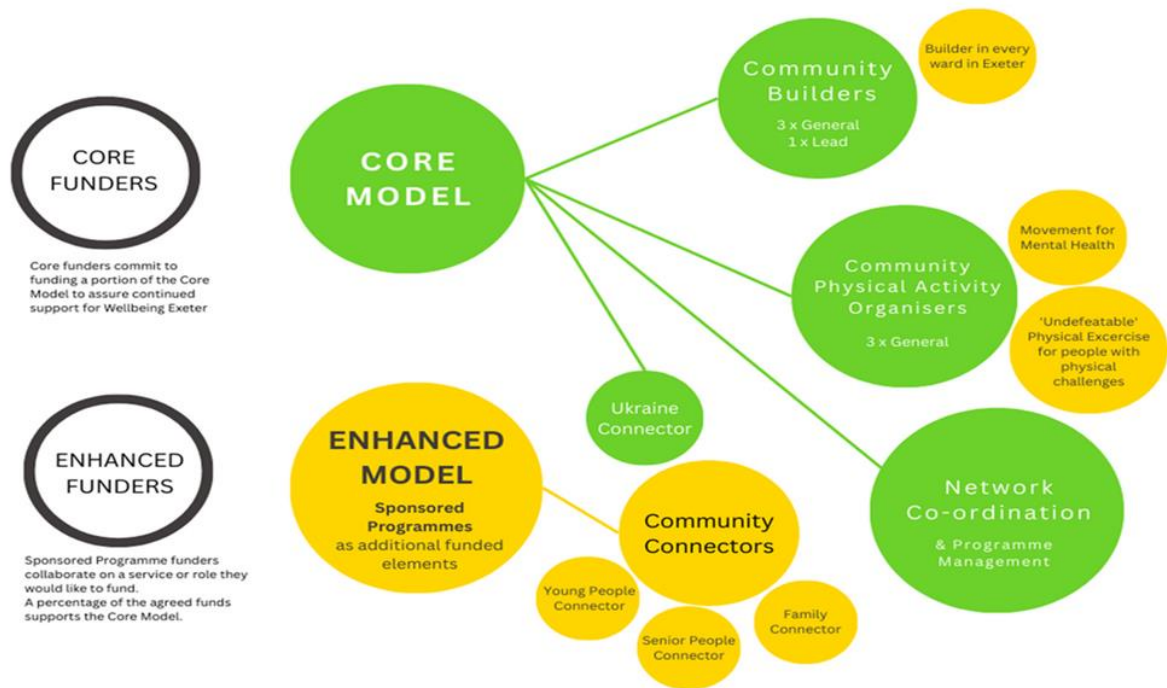


Figure 2: Wellbeing Exeter New Model.



8.8 Wellbeing Exeter Recommendations

It is recommended that consideration should be given to the following:

1. Continuing as Lead Commissioner for Wellbeing Exeter to ensure its strategic development continues to focus on achieving the Exeter 2040 Vision.
2. Become a Core Funder under the new model providing resources to fund the Core Model within the targeted 20 priority neighbourhoods which will include: Community Building; Community Connecting; Resettlement Connector; Community Physical Activity Organisers and Network Support
3. Fund an Enhanced Model to develop Community Building within the St James and Pinhoe Wards which are the areas in the city dealing with significant development.
4. Use its Core and Enhanced Funder status to secure match funding from other strategic partners/investors.
5. Utilise Wellbeing Exeter reserves to provide funding to support the transition from the old to the new model and to assist in the securing of new leadership and governance arrangements.

8.9 Proposed funding Community Grants Programme and Wellbeing Exeter 24/25

The table below sets out the anticipated funding for the Community Grants programme for 24/25. The proposed spending plan is based on the recommendations in this report.

| | 2023/24 | 24/25 Proposal | 2024/25 | 2025/26 | TOTAL |
|---|------------------|---|------------------|------------------|------------------|
| | £ | | £ | £ | £ |
| Neighbourhood CIL Available | | Neighbourhood CIL Available | | | |
| Neighbourhood CIL brought forward | 196,055 | Neighbourhood CIL brought forward | 419,209 | 720,509 | 196,055 |
| Actual Neighbourhood CIL Income | 639,662 | Actual Neighbourhood CIL Income | | | 639,662 |
| Forecast Neighbourhood CIL Income **** | 148,560 | Forecast Neighbourhood CIL Income *** | 740,833 | 441,383 | 1,330,775 |
| Total Neighbourhood CIL Available | 984,277 | Total Neighbourhood CIL Available | 1,160,042 | 1,161,892 | 2,166,493 |
| Other Income | 2023/24 | | 2024/25 | 2025/26 | TOTAL |
| | £ | | £ | £ | £ |
| Leisure VAT Rebate | 66,000 | | | | 66,000 |
| Exeter Lottery (annual estimate Nov 23) | 10,000 | Exeter Lottery | 21,000 | 21,000 | 52,000 |
| Total Other Income | 76,000 | Total Other Income | 21,000 | 21,000 | 118,000 |
| Total All Income | 1,060,277 | Total All Income | 1,181,042 | 1,182,892 | 2,284,493 |
| Expenditure: | | Expenditure: | | | |
| Ward Grants (funded via Leisure VAT income) | 39,000 | Ward Grants | 39,000 | 39,000 | 117,000 |
| Exeter Community Lottery | 5,763 | Exeter Community Lottery | 5,000 | 5,000 | 15,763 |
| Wellbeing Exeter - DCF | 270,157 | Wellbeing Exeter | 275,563 | 340,305 | 886,025 |
| Staff Costs | 29,148 | Staff Costs | 30,970 | 32,210 | 92,328 |
| Community Buildings* | 15,000 | Digital Grant Fund | 20,000 | | 35,000 |
| Community Buildings (funded via Leisure VAT income) | 27,000 | City Grant Fund | 50,000 | | 77,000 |
| Small Grants Fund | 3,000 | Review of Community Buildings | 20,000 | | 23,000 |
| Large Grants Fund | 7,000 | Independent Evaluation of Programme | 20,000 | | 27,000 |
| CAB* | 200,000 | | | | 200,000 |
| VCSE/ECI Support Contract | 45,000 | | | | 45,000 |
| Total Expenditure | 641,068 | Total Expenditure ***** | 460,533 | 416,515 | 1,518,116 |
| Total Available Neighbourhood CIL Receipts | 419,209 | Total Available Neighbourhood CIL Receipts | 720,509 | 766,377 | 766,377 |

In addition to the £275,563 proposed for funding Wellbeing Exeter from the NHCIL it is also proposed to utilise up to £150,000 of the Wellbeing Exeter reserve and a further amount from the NHCIL reserve to fund both a Core and Enhanced Model and support the transition from the old to the new model. The total funding for Wellbeing Exeter from Council in this transition year will be in the region of £400,000.

9. How does the decision contribute to the Council's Corporate Plan?

9.1 Wellbeing Exeter and the Exeter Community Grants Programme contributes to the Exeter 2040 Vision aspirations of being a Healthy and Inclusive City and the most active City in the UK. The programmes also contribute to the Council's strategic priorities of a "Healthy and Active City" and "Housing and Building great Neighbourhoods."

10. What risks are there and how can they be reduced?

10.1 The community grants programme and Wellbeing Exeter are both discretionary areas of spending for the Council. Both programmes are funded from the NHCIL reserve. There is a risk to the programme should anticipated receipts be late or remain unpaid. This means that budget planning must take place on an annual basis with regular reviews as the Council must have received the payments from developers before it can spend any of it. Therefore, these proposals mitigate this risk in 4 main ways:

- The grants programme will be a periodic programme opening when funds allow and offering several application opportunities throughout the year.
- The proposed review of community buildings and impact evaluation will only take place once the funds have been received as anticipated in year.
- The overall programme leaves planned income in the reserve to create a buffer against late payments and to make funding available in future years.
- There are no longer any contractual or multi-year commitments within the plan.

10.2 The Report on the Community Grants programme details risks in continuing to fund the contracts for services with both Citizens Advice Bureau Exeter (CABE) and Exeter Connect from the NH CIL. This financial risk is removed by the recommendations in this report to no longer commission either of these services.

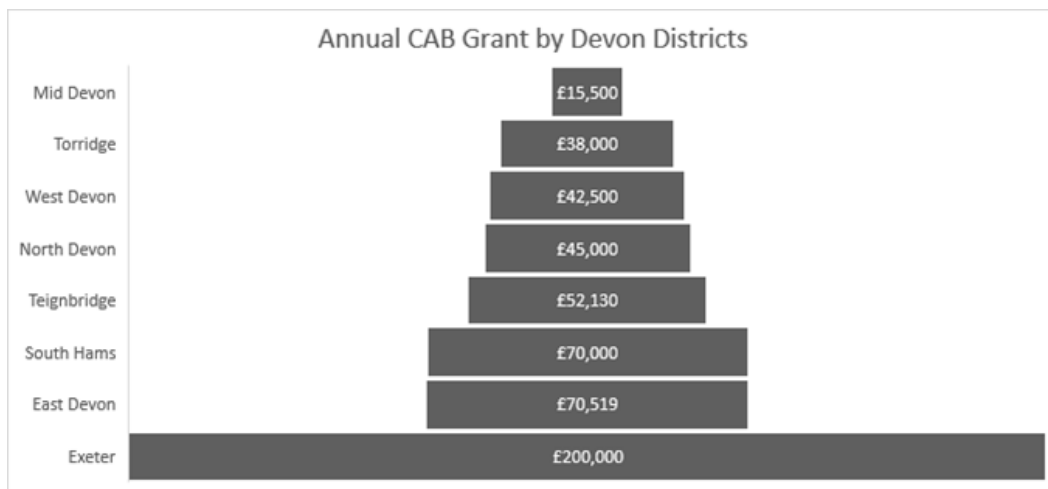
10.3 The work of Exeter Connect, a service set up by the Council in 2019, can be subsumed into Wellbeing Exeter which already undertakes a significant amount of network and capacity building activity in the VCSE sector within the City.

10.4 There are potential reputational risks to the Council if it ceases to fund CABE. It should be noted that formal notice of contract termination was given to both CABE and Exeter Connect in July 2023 which allows both organisations sufficient time to implement exit strategies from these contracts.

10.5 The Council could consider, if funding is available, an annual grant to support the general work of CAE. The council can then make an annual decision as to whether to continue to grant fund the CAE depending on its priorities and the funding available. This is sustainable and best value approach for the Council and also provides clarity for the Trustees of CAE who are responsible for the financial wellbeing of their organisation.

10.6 In considering whether to continue grant funding the work of CABE members may wish to consider the grants provided by neighbouring district Councils as set out in figure 3 below.

Figure 3 Annual CAB Grant by Devon Districts



10.7 There is a potential risk that the re-focusing of Wellbeing Exeter into the 20 priority neighbourhoods may receive criticism from localities who will no longer benefit from having their own Community Builder. This can be mitigated by communicating the evidence-based approach set out in both the Wellbeing Exeter Strategic Development Review and the Case for Support. Furthermore, the ability for Wellbeing Exeter to flex and grow through the enhanced model approach means local communities and other organisations can consider fundraising to add in additional cost-effective local programmes to meet hyper local needs. The network co-ordination work of Wellbeing Exeter will also continue providing open access to training and support to all community groups/organisations who identify their work as Community building and /or community connecting.

10.8 Overall the risks highlighted in relation to the changes proposed in the delivery of the Community Grants Policy can be mitigated through good communication on the significant contribution the Council continues to make into community development in the City. This is in excess of the investment made by neighbouring Districts as set out in the attached document: Community Grants in Devon: Local Authority Website Survey December 2023.

11. Equality Act 2010 (The Act)

11.1 Under the Act's Public Sector Equalities Duty, decision makers are required to consider the need to:

- eliminate discrimination, harassment, victimisation and any other prohibited conduct;
- advance equality by encouraging participation, removing disadvantage, taking account of disabilities and meeting people's needs; and
- foster good relations between people by tackling prejudice and promoting understanding.

11.2 In order to comply with the general duty authorities must assess the impact on equality of decisions, policies and practices. These duties do not prevent the authority from reducing services where necessary, but they offer a way of developing proposals that consider the impacts on all members of the community.

11.3 In making decisions the authority must take into account the potential impact of that decision in relation to age, disability, race/ethnicity (includes Gypsies and Travellers), sex and gender, gender identity, religion and belief, sexual orientation, pregnant women and new and breastfeeding mothers, marriage and civil partnership status in coming to a decision.

11.4 In recommending this proposal potential impact has been identified on people with protected characteristics as determined by the Act and an Equalities Impact Assessment

12. Carbon Footprint (Environmental) Implications:

12.1 There are no known direct negative carbon/environmental impacts arising from the recommendations. Within Wellbeing Exeter, Community Physical Activity Organisers support individuals and communities to be more physically active in everyday life: there are early indications as set out in section 11 of this report to show that this work is having a positive impact. However, it is too early to say to what extent this behaviour change is resulting in reduced carbon through walking and cycling replacing car usage.

13. Are there any other options?

13.1 No other options are being proposed in this report. The proposals in relation to Programme are effectively minor changes to the existing policy which remains the same. These changes reflect improvement to the process and adjustments to the available funding. The proposals in relation to Wellbeing Exeter have been co-produced from over 18 months of engagement and consultation with key stakeholders.

Director of Culture, Leisure and Tourism, Jon-Paul Hedge

Author: Jo Yelland, Director

Local Government (Access to Information) Act 1972 (as amended)

Background papers used in compiling this report:-

1. The Wellbeing Exeter Strategic Development Review February 2023
2. Wellbeing Exeter: The Case for Support". October 2023
<https://exeter.gov.uk/wellbeing/>
3. Internal Review of Community Grants Programme December 2023
4. Community Grants in Devon: Local Authority Website Survey December 2023

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Wellbeing Exeter Strategic Development Review



Sarah Yelland

February 2023

Review commissioned by Exeter City Council.

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Acknowledgements

The author would like to thank all commissioners, partners and other stakeholders interviewed as part of the review: thank you for your time, commitment to Wellbeing Exeter and the process of this review.

Review Methodology

This review has contained 3 distinct elements:

1. Research

Desk based research of place-based models of:

- community wellbeing -community building and/or social prescribing programme
- community conversations
- Wellbeing Exeter funding agreement
- Evaluation reports

See references for list of research

2. Structured conversations

See Appendix 1 for a list of the 47 people interview as part of the process, some people were interviewed more than once, denoted by *.

Discussions were in person and online via team or zoom and recorded via hand written notes. Topics discussed were from a range of 70 questions relating to;

- Wellbeing Exeter design
- A vision for Exeter
- Commissioning
- Being a partner
- Community connecting
- Community building
- Community physical activity organising
- Data/ evaluation
- Communications

Following the interviews, responses were collated and themes extracted, the condensed version of these are recorded in the tables in each section of the report alongside any further reflection or evidence from research along with action/ adaptation required as part of next steps for WE.

To ensure interviews were as open and honest as possible, all interviewees were offered anonymity in terms of their views or opinions and told that they would not be named in the report unless it specifically became important to do that, in which case, explicit consent would be ask to do so.

3. Structured Workshops

See Appendix 1 for workshop attendees.

1. Reconvene Wellbeing Exeter Commissioning Board to give initial reflections from review and so Board can consider and provide a steer for the next stage of the review.
2. Bring Wellbeing Exeter partners together with Wellbeing Exeter Commissioning Board Chair to share feedback from review and Commissioning Board meeting.

1. The Project Context

Wellbeing Exeter was established through the Integrated Care Exeter (ICE) Project (2012 to 2017) ¹funded through a National Transformation Challenge Award secured by Devon County Council (DDC). Under the leadership of the ICE Director, Wellbeing Exeter was established as a proof of concept in 2013 working within one GP practice in Exeter and a range of voluntary and community sector organisations. By 2015 Wellbeing Exeter expanded across a number of GP practices across the city and key partners agreed to extend funding to continue to develop the innovative programme. As part of the exit strategy for ICE, Exeter City Council (ECC) was invited to take over the management and leadership of Wellbeing Exeter when it appointed the ICE Director to its Strategic Management Board in July 2017.

Wellbeing Exeter has continued to grow and expand and has received national and international commendations for its unique and effective model of asset-based community development and social prescribing. Wellbeing Exeter is now an established partnership of public, voluntary and community sector organisations working together providing firm foundations for individuals and communities to promote and improve their own health and wellbeing. The partnership brings together key strategic funders pooling resources to deliver the holistic programme: DCC, ECC, Sport England and Exeter's Primary Care Networks and has an annual pooled operating budget averaging £1million pa.

The current agreement for Wellbeing Exeter between Exeter City Council (ECC) (lead commissioning body) and Devon Community Foundation (DCF) commenced on 1st April 2022 and ends on 31st March 2025.

Sport England and ECC have confirmed funding in principle until March 2024, with DCC and NHS funders not committed beyond March 2023.

*There is also an additional agreement between DCF and NHS Charities Together that covers a small grant over two years that funds a Community Connector based with Inclusive Exeter working with people from diverse communities.

The Challenge

A pooled budget and collaborative commissioning and delivery model of Wellbeing Exeter has evolved and this needed to be reviewed and options for future sustainability considered.

Project aims

To work with Jo Yelland (JY), Strategic Lead for Wellbeing Exeter at ECC to:

1. Establish the commissioning intentions of all funders and if Wellbeing Exeter fits into their strategy or plans for future funding.
2. Compile and reflect upon aspirations of key stakeholders for Wellbeing Exeter in the future.
3. Research wellbeing (individual and community) programmes locally, nationally and internationally and make recommendations about how Wellbeing Exeter could adapt or grow in the future beyond current funding plans.

¹ Integrated Care Exeter (ICE) was a strategic alliance of public and voluntary sector bodies with a commitment to a model of population health and wellbeing with a focus on early intervention and prevention. In 2015 ICE set a clear vision and ambition for place-based population health and wellbeing. A critical component of the work plan was to develop an approach to getting a better understanding of need to see if we could create a systemic way to identify people who could benefit from early interventions that could be used in future to improve outcomes and reduce overall system costs.

2. Introduction

Wellbeing Exeter was established as a single structure for encouraging preventative behaviours by individuals and promoting “resilience” within the system and across communities. In practical terms this means offering a range of community-based options to targeted individuals, to enable them to access what they want to maintain health and wellbeing, reducing the need for statutory care services now and into the future. There are three main ingredients to the approach:

1. Resilient people: social prescribing
2. Resilient Communities: community building
3. Resilient System: network support and co-ordination

Further detail is in Appendix 2

Now in 2023 the model remains the same but it has developed and grown year on year. There were originally three roles; Community Connectors (CC), Community Builders (CB) and the Wellbeing Exeter Coordinator. The coordination team has grown to add another three roles; Community Connections Manager, Data and Information Lead and Welcome Connector. The Connector team has expanded, the original Connectors worked with adults, there is now expertise in the team to work with individuals of all ages, families and people from diverse communities. The Community Builders have a manager and there has been a new role specifically designed to increase opportunities for physical activity for both individual and communities; these roles are Community Physical Activity Organisers. Along with the Wellbeing Exeter Development Manager employed in 2018 with funding from Sport England, this takes the delivery staffing levels from a handful of people to more than 40.

There is a huge amount to celebrate about Wellbeing Exeter, not least the length of time it has been operating and its scale and reach becoming one of the largest programmes of its kind. Nationally, similar scale or smaller wellbeing schemes failed to thrive and embed in the local area and many lost both funding and support. Keeping the programme funded and well supported has been a MASSIVE achievement for the alliance.

Wellbeing Exeter is well respected and appreciated by the overwhelming majority of interviewees each of whom value it for different reasons, some specifically highlighting its greatest asset being its work **with individuals**, others suggesting, its ability to **build capacity in the community** and others as an excellent example of a **collaborative partnership**.

The support for Wellbeing Exeter teams and the work they do is very evident and the difference they make to people, communities and the system are anecdotally amazing. However, there were interviewees who felt that Wellbeing Exeter was being too many things to too many people; that rapid growth and other factors had left it not always knowing what it is: that it lacked strategic direction. The consequence of this is that strategically Wellbeing Exeter has lost its way a little and as a wider collective is not always clear on the direction it's heading. Suspension of regular commissioning conversations resulting from the pandemic, and not yet being resumed, has left all parties not knowing what to expect and who is making the decisions, not surprisingly therefore, whether delivery is meeting (often unwritten) expectations is impossible to gauge. This report explores **leadership, evaluation** and those **other factors** in more depth.

This report explains and argues that, with an enhanced strategic development plan in place underpinned by the whole alliance and funding secured to maintain the status quo for the financial year 23/24, this will allow for the unique collaborative and co-design approach to commissioning and delivery to be reinvigorated. The focus of this work will enable commissioners and providers time to set a new vision for the future, work through the report's recommendations and make decisions around governance, structure, funding, evaluation and communications. A final output from this work should be the publication of an investment prospectus, hopefully by June 2023 setting out a sustainable mission and proposition for Wellbeing Exeter.

3. Wellbeing Exeter current commissioning arrangements

The Requirements of the Overarching Agreement

The current (1st April 2022) agreement managed by ECC, provides a grant to DCF to deliver Wellbeing Exeter for a further 2.5-year programme. The agreement also states that in January 2021, the strategic funding partners agreed on a review of Wellbeing Exeter and the **development of a new 3-year strategy**. The impact of COVID-19 on the programme, ongoing uncertainty of long-term funding and the withdrawal of a key local delivery partner led to the Wellbeing Exeter Steering Group itself undertaking a review with DCF.

The Steering Group review highlighted several **key development themes** as part of a proposed re-design of the current Wellbeing Exeter Programme. The themes were:

- As part of COVID-19 recovery, develop work across the programme to support and encourage individuals and communities to take steps to improve their wellbeing as restrictions lift;
- Growing the team of Community Connectors to ensure a universal offer across the city while further locating and embedding the Community Connector team in targeted local communities & populations;
- Re-engaging with primary care as the Covid-19 landscape shifts, to ensure that the Wellbeing Exeter offer remains embedded in primary care and is able to respond to emerging health and wellbeing needs;
- Expand referral routes in to the programme to increase referrals, embedding it into other key parts of the health and social care system, ensuring the programme is available to those individuals who can most benefit and expanding the capacity of the programme to play a preventative role;
- Integration and alignment with the NHS Population Health Management Programme and the emerging Local Care Partnership;
- Work in partnership with Exeter Leisure to develop and enhance opportunities for those residents who aren't currently active;
- Review and redesign of the governance;
- Review of monitoring and evaluation;
- Review internal and external communication and engagement.

In addition to these themes the development plan agreed with DCF states that **core elements of the Wellbeing Exeter** programme will continue to be developed, these being community building, community connecting and physical activity organising.

The agreement highlights the expected outcomes as follows;

- Better connect people to community life
- Support more thriving and active communities
- Improved individual wellbeing

The measurements for the programme are as follows;

- Successful community connections
- Case studies of Community Connecting
- Case studies of Community Building
- Number of residents moved into action
- Number of new initiatives supported
- Number of events/activities hosted/taken part in
- Number of residents listened to
- Individual wellbeing questionnaires

*the programme also contributes to wider system measurement via the Active Lives Survey² – social and community development / mental wellbeing and physical wellbeing.

Another requirement of the agreement is to ensure that: “Council Members will be invited to twice-annual briefings where updates will be provided on the progress of Wellbeing Exeter, its ongoing impact and an opportunity for discussion with Members on how they can engage with the programme.”

Wellbeing Exeter Reporting

Wellbeing Exeter is meeting the current expectation for reporting as set out in the ECC/DCF grant agreement. Monthly dashboards that have previously been produced are now quarterly and provide all the information (and much more) requested for measurement in the agreement as set out in the table in Appendix 3.

The annual report is being reviewed in line with the Wellbeing Exeter development plan.

It is not clear how the re-design plans are being formally reviewed but from this research it is evident that there is much work in progress.

Updating Councillors may have taken place informally but no evidence of regular and formal briefing was provided for this review.

² The Active Lives Survey is a Sport England-led survey, which provides information about the physical activity levels of people in England. There are separate surveys for adults (a bi-annual report) and for children (an annual report). The survey has been running since 2015 and replaces the Active People Survey.

4. The listening and Learning

This section is a summary of current practice reflections, the detailed responses and learnings can be found in Appendix 4. The evidence comes from interviews with 47 Wellbeing Exeter stakeholders, the review of documentation and research of other place-based models of community wellbeing and is set out under four broad themes, starting with the **leadership and governance**, then the **model and scope, evaluation** and finally **communications**.

What does Wellbeing Exeter mean to you?

The initial interview question was to understand the observed breadth of Wellbeing Exeter, some stakeholders view one of the most beneficial aspects of Wellbeing Exeter being it's work with individuals (community connecting), for others, it's the benefits of a collaborative partnership bringing the Voluntary and Community Sector together alongside health social care and the local authorities. However, the dominant descriptive is its ability to build social capital. See Appendix 4 for a summary of the phrases and words used to describe Wellbeing Exeter used in interviews.

Theme 1 Leadership and Governance Headlines

- The absence of Wellbeing Exeter Commissioning Board meetings since the pandemic, has left commissioners feeling that the strategic connection has been lost and that they have no say in Wellbeing Exeter. This has fuelled the perception that there is little strategic interest in Wellbeing Exeter.
- Partners feel there is no clear direction from commissioners other than ECC and there is perception that the Wellbeing Exeter team are being "left to get on with it".
- Commissioners feel there is a lack of accountability from ECC which adds weight to the perception that "it's very much an ECC project".
- A lack of clarity on ownership of Wellbeing Exeter is causing confusion about decision making mechanisms.
- There have been four senior personnel changes in Wellbeing Exeter, this has had a negative impact to continuity and robustness and has been compounded by personnel changes in the key commissioning bodies.
- The current structure is seen by some as top-down.
- Strategic influence within the NHS is limited.
- It was always planned that Wellbeing Exeter would one day become robust enough to become its own entity, there is strong feeling from many stakeholders that now might be that opportunity.

Action needed:

- Reconvene Wellbeing Exeter Commissioning Board Meetings
- The Commissioning Board to consider the future form and function of Wellbeing Exeter, including the potential creation of a new social enterprise.

Theme 2 Model and Scope Headlines

- The original objective of Wellbeing Exeter to reduce dependency on health and social care and increase interdependency -is this vision still shared across the whole alliance?
- The Wellbeing Exeter partnership is very strong, Wellbeing Exeter is well connected both internally and externally, it is an enabler of collaboration within the Voluntary, Community and Social Enterprise Sector (VCSE) but also across sectors.
- The breadth of Wellbeing Exeter means it has the ability to be flexible and adaptable to be responsive to local needs.
- Wellbeing Exeter is approachable and reliable.

- Many interviewees raised the usefulness of creating the opportunity for Wellbeing Exeter to host drop-ins for partners, potentially co-ordinated in a range of existing community 'hubs'.
- Despite the communication difficulties with Primary Care, there is clearly a desire for Wellbeing Exeter to co-exist and work closely with Primary Care Network (PCN) Health and Wellbeing Teams. They have different roles; it could host a network for all social prescribers to share knowledge and learning and also be a bridge between PCNs and communities.
- People and organisations want to be a part of Wellbeing Exeter, staff retention is high.
- Wellbeing Exeter would be in an excellent position to convene a VCSE sector/ statutory learning forum, it holds huge amounts of intelligence it collates, all of the learning it does and the expertise it has.

Action needed:

- Wellbeing Exeter Commissioning Board to review vision and strategy (with careful consideration to language) with particular attention to referral routes and the Wellbeing Exeter model, including new opportunities or developments such as drop-ins at community hubs, more group work, developing informal volunteering and community champions, relationships with PCN teams, Exeter Connect and Exeter City Futures.
- Commissioning Board to consider on-boarding new commissioners e.g., Devon Partnership Trust (DPT)
- Wellbeing Exeter Commissioning Board to consider the opportunity to facilitate a Wellbeing Forum for community conversations, sharing learning and systemic change.
- Wellbeing Exeter Operational Team to bring the wider Wellbeing Exeter delivery staff together specifically to make the Community Builder, Community Connector and Community Physical Activity Organiser relationships stronger and include the young people connector team more.
- The partners should explore opportunities to build on Wellbeing Exeter scope for leading innovative approaches to delivery or supporting others to as they doing at Wellbeing Enterprises in Runcorn³.

Theme 3 Evaluation Headlines

- The Wellbeing Exeter grant agreement sets out a development plan that includes a review of evaluation and there is a working group (DCF/ Coordination team/ GP clinical support) formulating a plan that will include additional evaluation elements/ partnerships.
- There was an existing Evaluation Framework and initially an Evaluation Sub Group attached to the Steering Group. However, this this group has dissipated in favour of evaluation meetings with the Sport England LDP Evaluation and Data Team. Prior to the development plan, the original Wellbeing Exeter Evaluation Framework had become lost with no clear strategic decision making or ownership.
- The original pilot under ICE, included the use of pseudonymised patient data to track the impact of a referral to Wellbeing Exeter people's NHS and Social Care usage, which presented an exciting opportunity to test out the hypothesis in the original Wellbeing Exeter vision. However, access to this data became lost when the ICE programme ended in 2017. (Recently Public Health Devon, who spearheaded this work in 2015 as part of ICE, is now re-opening the possibility of accessing this data.
- This has resulted in some commissioners feeling that evaluation is no longer robust or detailed enough despite meeting the expectations of the delivery agreement.

Action needed:

- Wellbeing Exeter Commissioning Board to invite Public Health Devon to re-join and fully exploit the opportunity to utilise patient tracking data as part of the evaluation framework.
- Wellbeing Exeter Commissioning Board need to provide clarity on the outcomes driving the approach and the expectations of data collection and outcome measurement.

³ Wellbeing Enterprises in Runcorn mobilise the skills and talents of people and assets and resources locally, to bring about better outcomes, reduce demand on services and create sustainable social change through co-designing or delivering services. [For professionals | Wellbeing Enterprises](#)

- Wellbeing Exeter Commissioning Board need to develop a strategic engagement plan and be clear about who needs sight of Wellbeing Exeter outcomes and activity reporting.
- Wellbeing Exeter Commissioning Board to explore the development of new evaluation relationships and techniques and the resource needed to facilitate this.

Theme 4 Communications Headlines

- Wellbeing Exeter sits below some important radars and not enough time has been invested in communications, there are missed opportunities to showcase Wellbeing Exeter raising awareness locally and outside of Devon.
- The Wellbeing Exeter Development Plan states that there will be a review of how the programme communicates and engages internally and externally, this work has begun.
- Wellbeing Exeter has plenty of amazing stories to tell.
- There are insufficient influential relationships within the NHS Local Care Partnership and DCC to champion Wellbeing Exeter.

Action needed:

- An outcome of the communications review should be to develop a framework for involving all partners in communications and set up a central place to collate evidence.
- Lines of communication, partnership and strategic engagement need to be considered in any new development, along with resource needed to support this.
- See above re Wellbeing Exeter Commissioning Board developing a Strategic Engagement Plan.

5. Future Commissioning and Funding

This section refers to both conversations with current commissioners and looks at potential sources of funding in the future. In the past the pooled funding has proved very useful to ensure that Wellbeing Exeter is seen as a whole, that is, not four distinct elements that are funded separately and brought together. This is important in terms of the ethos of Wellbeing Exeter being that introducing people to activities can only happen in communities that have social capital. Any new developments in terms of funding arrangements and structure will need to bear this in mind.

Current Funding

Funding requirements for 2023/24 are set out in the table below and at the time of writing all partners except DCC have been able confirm their funding for this financial year. A £230,000 contingency is being held for transition funding but this will need to be utilised should DCC be unable to commit to funding for this year.

| WELLBEING EXETER PROGRAMME FUNDING Required for 2023-24 | |
|---|-----------------|
| Income, source, period | 2023-24 |
| SELDP Accelerator £1759000 (2019-2024) | £289,000 |
| SELDP Core & Evaluation Programme Development Manager Apr 21-Mar 25 | £30,741 |
| ECC CIL (Community Builders) 2% cost of living rise included in 22-23 and 23-24 | £270,157 |
| DCC match funding with ECC for 23/24 to be confirmed (reduced down from previous FUDNING of £350,000) | £270,157 |
| TOTAL (including DCC funding to be confirmed) | £860,055 |

Future Funding

When considering future funding it is helpful to contextualise the significant investment that has been made in Wellbeing Exeter to date and how extremely rare it is for projects of this nature to be funded over such a period. Over the six-year period: 2018/19 to 2023/24:

- Exeter City Council investment will total approximately £1.6 million
- Devon County Council investment will total approximately £1.9 million
- Sport England investment will total approximately £2 million

Commissioners need to consider carefully what will be lost without Wellbeing Exeter should long term funding not be agreed upon, or secured through other means, to allow for Wellbeing Exeter to continue to thrive.

People's wellbeing and the capacity of communities to support its members will be paramount to preventing further burden on health and social care services and support recovery from the devastating global pandemic, alongside the renewed financial pressures caused by the recession. Wellbeing Exeter is vital infrastructure that keeps the community cogs turning and supports people to access what they need from within those communities. Despite resourcing pressures, now more than ever, Wellbeing Exeter needs to continue to be supported by all sectors and alliance members.

Without a sustainable future for Wellbeing Exeter there will be a loss to:

- Growing and changing communities: The significant investment in community development in Exeter will lose its impact, there are so many excellent examples of community builders working alongside community to build social capital but as the city changes and grows, there is much more that can be done.
- Relationships: Wellbeing Exeter facilitates flow and builds a bridge between local primary care and communities and embeds this approach directly into what already exists.

- Social connection: Community Connectors have worked with more than 5000 people directly and thousands more indirectly through the work of Community Builders and the Community Physical Activity Organisers to introduce people to community activities.
- The Voluntary, Community and Social Enterprise sector (VCSE): The collaborative delivery model with multiple providers employing staff working within a single operating model bringing a range of added value benefits including flexibility, reduced duplication, local determination and resilience.
- System leadership: placed-based whole system approach with a parallel focus on support for individuals (Social Prescribing through Community Connectors) alongside support for communities (ABCD through Community Building).

This unique model underpinned by Asset Based Community Development principles, demonstrates the need for taking a long-term view and “holding your nerve” to allow time and space for building trust, insight and collaboration with individuals, within community and the system.

Sport England have been a major investor in Wellbeing Exeter having committed nearly £2 million in the programme over the last 5 years. However, in order to be able to access further funding from Sport England they have fed back through this review that they would want to see significant increase in physical activity referrals and outcomes. Also, more evaluation through compelling stories and narrative linked to the mapping of people’s journeys to physical activity and changes to systems and community resulting in more active lifestyles for the target populations.

Exeter City Council pioneered Community Building in the City in the early 2010’s through the use of has New Homes Bonus funding and the employment of two Community Organisers in the City. Since 2018 ECC has ring-fenced a proportion of the 15% Neighbourhood CIL⁴ to pay for the Community Building of Wellbeing Exeter and has realigned its Community Grants programme in support of the Wellbeing Exeter underlying principles. Wellbeing Exeter features very prominently in the city’s Corporate Plan 22-26 which is a positive sign in terms of investment and support.

Devon County Council initially funded the early piloting of Wellbeing Exeter through the ICE programme funded by a dedicated Transformation Challenge Award from Central Government. On-going funding in the region of £395,000 per year was granted in 2018 from the Better Care Fund⁵ and has been recurring until this financial year where there is a reduced grant request, as a result of reserves created during Covid for £270,000 for the forthcoming financial year. There is doubt about securing this funded as DCC is, at the time of writing, (Feb 2023) consulting on plans to cut spending which includes the historic grant to Wellbeing Exeter.

Funding from government to the NHS for social prescribing in Primary Care was initially pooled by local practices into Wellbeing Exeter but this funding was withdrawn in 2022/2023. The four Exeter PCNs have now set up their own in-house health and wellbeing teams but really want their team to work alongside the Wellbeing Exeter team. Feedback from one PCN is that keeping the work in-house gives them more oversight and accountability for the work. There is an opportunity here to continue to work together with Wellbeing Exeter being both a bridge between the community and PCN Health and Wellbeing teams and also host a network for all social prescribing in the city.

⁴ *Neighbourhood CIL is a charge that local authorities can set on new development in order to raise funds to help fund the infrastructure, facilities and services. [Community Infrastructure Levy \(CIL\) - What is the CIL? - Exeter City Council](#)*

⁵ *Better Care Fund (BCF) programme supports local systems to successfully deliver the integration of health and social care in a way that supports person-centred care, sustainability and better outcomes for people and carers.*

Wellbeing Exeter has never had direct funding from any part of the NHS other than Primary Care. NHS funding is complex: the newly emerging Integrated Care System brings various levels of commissioning and provision together around population health. There is some confusion from outside this system as to where decision making takes place.

However, there is a long-term gain to be had from remaining connected with the NHS, there is recognition that in terms of prevention (and the associated difficulties with monetising impact) -it's the NHS that needs to change to become more invested in prevention rather than just saving money on existing services. Eastern LCP has a priority looking at loneliness and social isolation through prevention.

Locally the NHS/ DCC/ RDUH are important funding partners that have shaped Wellbeing Exeter thus far, the loss of their support either strategically or financially would shift focus. The Wellbeing Exeter Commissioning Board will need to review this position as funding decisions for 23/24 are made.

NHS Charities Together

This grant of £50,000 over 2 years awarded to DCF specifically supports community connecting in diverse communities and currently funds a Community Connector within Inclusive Exeter. It is unlikely that this funding will continue beyond 23/24 and there will need to be an alternative source of funding or a redistribution of existing connector funding to support this vital role when the funding period is over.

Potential Future Sources of Income

Local funders or supporters

Referral routes into Wellbeing Exeter have already expanded, this needs to be reviewed anyway but without financial support from DCC/NHS then Wellbeing Exeter may need to look to other agencies locally for funding and potential referrals. In other areas these include pharmacies, multi-disciplinary teams, hospital discharge teams, allied health professionals, fire service, police, job centres, social care services, housing associations, criminal justice system, other VCSE organisations.

Housing Associations/Providers are another developing referral route for Wellbeing Exeter. Housing and neighbourhood conditions are widely acknowledged to be important social determinants of health, through three main pathways: (1) internal housing conditions, (2) area characteristics and (3) housing tenure.

There are opportunities in the housing system for referrals to Wellbeing Exeter this could be a funding opportunity. Exeter YMCA estimate that 40% of housing tenants would benefit from a referral to and the support of Wellbeing Exeter. LiveWell and other Housing Associations have also indicated that they would like to be able to refer. Exeter City Community Trust and Exeter YMCA already provide housing related support in other programmes they deliver.

Housing conditions could be linked with retrofitting homes and the net zero plan.

Exeter Net Zero Plan

In 2019, ECC declared a climate emergency, with the aim of becoming a carbon neutral city by 2030. The ECC Corporate Plan states it wants to *expand community energy schemes: "...collaborating with Exeter Community Energy and Wellbeing Exeter to design and test hyper local energy efficiency partnerships to understand and overcome the practical barriers to delivering renewable energy and reducing fuel poverty in key areas of the city."* During 2022 Wellbeing Exeter has been working with Exeter City Futures and other stakeholders developing a business case for a community energy project targeted at the most financially vulnerable households in the city. In support of this agenda the Wellbeing Exeter Community Building team have received

training in carbon literacy. There could be a role for Wellbeing Exeter in embedding the net zero agenda in communities. External investors are actively being sought to support this work.

External and Charitable/Philanthropic Funding

This is a great opportunity for the Wellbeing Exeter Commissioning Board to “hold its nerve” and keep Wellbeing Exeter afloat so a long-term future can be found. With a renewed vision and a clear “levelling up” (reducing health inequalities in old money!) agenda aimed at ensuring everyone benefits from the continued growth of the city, the Board is well placed to design and publish an exciting investment prospectus (with a renewed focus on evaluation and return on investment) that will be attractive to a range of funders at national and local level. With a clearly targeted strategy Wellbeing Exeter is likely to be of interest to statutory, charitable and private philanthropic bodies all looking to invest in and learn from the powerful social movement that Wellbeing Exeter has the potential to become.

6. Summary of recommendations and next steps

Having a strategic development plan in place, underpinned by the whole alliance and funding secured to maintain the status quo for the financial year 23/24, will allow for the unique collaborative and co-design approach to commissioning and delivery to be reinvigorated. The focus of this work will enable commissioners and providers time to set a new vision for the future with a final output from this work being the publication of an investment prospectus, hopefully by June 2023.

| Action | Aim | By When |
|---|--|---|
| Reconvene Wellbeing Exeter Commissioning Board | a) Provide feedback from this review b) Agree vision and commitment to Wellbeing Exeter c) Establish funding commitments for 2023/2024 | 9th February 2023 -complete |
| Bring Wellbeing Exeter partners together with Wellbeing Exeter Commissioning Board Chair | a) Share feedback from review b) Share feedback from Commissioning Board meeting c) Feedback from Wellbeing Exeter team re: review and development plans | 21 st February 2023 -complete |

These 2 meetings have now taken place as part of this review, attendees are recorded in Appendix 1.

Highlights from the Commissioning Board vision and commitment discussion are below;

Vision (Why we are doing it) must:

- resonate with strategic objectives of commissioners: Suggest Exeter 2040 Vision statement⁶ signed up to by Exeter Place Board
- focus on reducing health inequalities and upstream prevention
- support people to live happy and healthy lives

Mission (How we will do it) must:

- meet commissioners needs and to enable leverage of funds
- be community-led
- build on what we know already works
- utilise, sustain and build community/social capital
- work alongside people/communities
- listen and learn from communities

Outcomes (What changes we want to see by doing it) must:

- link to reductions /delays/ demand on statutory services and social return on investment
- sustain and build community resilience

Measurements (What will we monitor to see to what extent we are achieving the vision) must:

- utilise both qualitative and quantitative data
- themed around story telling (Exeter designated City of Literature)
- track individuals' narratives over time
- be capable of identifying systemic responses/change
- use community voices

⁶ Exeter 2040 Vision Statement

By the time they are an adult, a child born in Exeter today will live in a city that is inclusive, healthy and sustainable - a city where the opportunities and benefits of prosperity are shared and all citizens are able to participate fully in the city's economic, social, cultural and civic life.

Language (how we describe what, how and why we do things)

- Need to be careful about the language used and the meanings attached to common phrases (e.g. Social Prescribing) and their relevance going forward

The group reviewed at the current Theory of Change and the following working draft Theory of Change was agreed to support discussions going forward;

If Wellbeing Exeter works alongside people in the most disadvantaged areas of the city, and together with residents and partners, we collectively grow and invest in more resilient communities, then we will help tackle inequality, improve health outcomes and foster community cohesion across our neighbourhoods now and into the future.

NB. Feedback from Wellbeing Exeter Partnership Meeting highlighted the use of deficit language in this Theory of Change, to be reconsidered in the next design session.

Next steps following the review

| Action | Aim | By When |
|--|---|------------------|
| Follow up meeting with commissioning organisations not in attendance at Commissioning Board | Establish funding commitments for 2023/2024 | March 2023 |
| Wellbeing Exeter Commissioning Board | a) Agree final vision and theory of change- see draft in Appendix 5 b) Agree governance arrangements for next 12 months including new Commissioning Board members and strategic engagement. | March 2023 |
| Wellbeing Exeter Commissioning Board and Wellbeing Exeter partners collective design sessions | Commissioning Board members and Wellbeing Exeter delivery partners hold a series of workshops to plan; 1. What changes are needed to the delivery model to achieve the vision? (Appendix 4 and Appendix 5) 2. What will need to be measured to see if the vision is being achieved? 3. How does Wellbeing Exeter tell its story (community and strategic communications)? 4. What form does Wellbeing Exeter take to best deliver the vision? (Appendix 6 sets out identified points for consideration) | March-April 2023 |
| Development and Mobilisation Plan 23/24 | Setting out the next steps over 12 months to achieve agree a co-designed plan as above 1-4 leading to a Mobilisation Plan following the publication of the Investment Prospectus (below) and the appointment of a lead organisation to seek investment partners. | April-May 2023 |
| Create and publish investment prospectus | Setting out a sustainable mission and proposition for Wellbeing Exeter with a supporting funding and engagement strategy | June 2023 |

7. Conclusion

There is no doubt about the benefits of having Wellbeing Exeter embedded the city and 'it's a better place because of it'. The outcomes for individuals, for communities and for some systems within the city are evident. Over the last couple of years communities have faced a difficult time, the impacts of the global pandemic and the recession are all around us: extraordinary levels of anxiety and isolation need gentle support to recover. Wellbeing Exeter is able to do that it has repeatedly demonstrated its ability to flex and adapt to support the building of community resilience. There is no doubt that Wellbeing Exeter is very well placed to support the needs of the community at this time.

It is clear that Wellbeing Exeter is a vital component of Exeter Vision 2040 and can help to achieve that vision through reducing inequality, improving health outcomes and fostering community cohesion across our neighbourhoods. It is clear from the review that there is too much at stake to lose Wellbeing Exeter, it is embedded in communities and provides a flexible and adaptable partnership that supports the city.

This review has established the support and commitment to a future Wellbeing Exeter that, once again, has a shared vision, clear leadership and effective governance. It is a good opportunity to reflect and be reminded of previously presented learning from the early years of bringing the Wellbeing Exeter alliance together as it is very much still relevant today.

The success criteria⁷, identified more than 5 years ago, fell into six different areas, clarity of purpose, definitions and language, monitoring and evaluation, collaboration and trust, system Leadership and cost and sustainability. This review feedback clearly resonates with this criteria for success and going forward these consideration are essential to the next stages of planning and implementation.

These areas have all been explored in this review report but one area stands out as most important at this time: collaboration and trust. Collaboration and trust have been key to the development of Wellbeing Exeter and is vital to its future growth and success. Collaboration between commissioners, between delivery partners, the whole alliance of commissioners and partners holding the vision, impact and communication together and collectively alongside communities, evaluators and new funders. Successful collaboration will result in broadening funding, shared ownership, more creative systemic change and will enable Wellbeing Exeter to continue to support people to live happy and healthy lives.

⁷ The success criteria are taken from a number of presentations given by Wellbeing Exeter strategic and operationally leads in 2017 and 2018.

Reading list and References

| Link | Area of research |
|---|---|
| How commissioning is supporting community development and community building Local Government Association | Plymouth Live Well |
| Lancaster District Community Conversations KeepConnected | Lancaster Community Conversations |
| A citizen-led approach to health and care: Lessons from the Wigan Deal The King's Fund (kingsfund.org.uk) | Wigan Deal |
| A citizen-led report final (19.6.19).pdf (kingsfund.org.uk) | |
| New Operating Models: An emerging practice for the future of local government Nesta | Local Government collaboration |
| ‘It’s a beautiful thing’: how one Paris district rediscovered conviviality France The Guardian | Paris-Neighbourhoods |
| Social Action Advice Surgery – Community Southwark | Southwark -Social Action Advice Surgery |
| Understanding ground-up community development from a practice perspective – Russell – Lifestyle Medicine – Wiley Online Library | ABCD Approach |
| One City Plan 2021 (bristolonecity.com) | Bristol City Plan |
| The 12 Domains by Nurture Development – Issuu | ABCD Approach |
| The Community Paradigm: Why public services need radical change and how it can be achieved – New Local | Local Governance |
| iipp_welfare-state-5.0-report_hilary-cottam_wp-2020-10_2020-09-15_final_web.pdf (ucl.ac.uk) | Systems |
| GCC_PB_wee_green_grants-FINAL2.pdf (gcph.co.uk) | Glasgow, green grants |
| Communities vs Climate Change: the power of local action – New Local | Local action is the ‘missing piece’ of plans to fight climate change. |
| Radical Health – Hilary Cottam | Systems |
| Vibrant Communities – Paths for All Paths for All | East Ayrshire |
| Hilary Cottam: Social services are broken. How we can fix them TED Talk | Systems |
| Social Prescribing – two good and two bad – Power to Change | Social Prescribing |
| Life after lockdown: how do we best recover from the pandemic? Mental health The Guardian | Community recovery |
| Centre for Climate Change and Social Transformations (CAST) – School of Psychology – Cardiff University | Putting people at the heart of the transformations required to tackle climate change. |
| Green Social Prescribing for sustainable healthcare Centre for Sustainable Healthcare | Nature, housing |
| The NHS as an anchor institution (health.org.uk) | System |
| SP for young people evaluation final report for publication.pdf (uel.ac.uk) | What is SP good for- a YP evaluation |
| XX-Building-our-social-infrastructure-FINAL.pdf (powertochange.org.uk) | Why levelling up means creating a more socially connected Britain |
| A radical new vision for social care – The Health Foundation | Systems |

| | |
|---|--|
| Videos – Health Connections Mendip | Mendip Working with volunteers |
| The Community Organising Framework – Community Organisers (corganisers.org.uk) | Community organising framework poster |
| SAH-framework-FV.pdf (corganisers.org.uk) | Social Action Hubs |
| What are community hubs? – MyCommunity | Community Hubs |
| Community Partnership Hub Regional Engagement University of Exeter | Exeter Uni Community hubs |
| Community-Hubs-Report.pdf (localtrust.org.uk) | Understanding survival and success |
| Exeter Community Alliance | Exeter -Climate action |
| Climate Action Hub Exeter | Exeter -Climate action |
| NHS England report template-add icon | Social prescribing |
| A framework for NHS action on social determinants of health – The Health Foundation | Systems |
| NHSPS’ social prescribing hubs helping ease pressure on primary care UK Healthcare News (nationalhealthexecutive.com) | Hubs and warm spaces |
| Community-centred and asset-based approaches – Knowledge & Library Services (koha-ptfs.co.uk) | ABCD Approach |
| Community champions programme: guidance and resources – GOV.UK (www.gov.uk) | Community Champions |
| Levelling Up the United Kingdom White Paper (publishing.service.gov.uk) | Policy |
| Health-Inequalities-and-non-direct-mental-health-impacts-of-COVID-19-pandemic-.pdf (onenortherndevon.co.uk) | Health inequalities |
| How to fix Social Prescribing? Manchester Community Central | Social prescribing |
| What is social prescribing? The King’s Fund (kingsfund.org.uk) | Social prescribing |
| Unmet-needs-London-Sport.pdf (londonsport.org) | Physical activity |
| Our Projects & Services – The Active Wellbeing Society (theaws.co.uk) | Birmingham Social Prescribing |
| Social Prescribing ecosystems report 2020 – Ageing Well Torbay rolling out social prescribing - september 2020 final.pdf (nationalvoices.org.uk) | Torbay |
| Social Prescribing ecosystems report 2020 – Ageing Well Torbay rolling out social prescribing - september 2020 final.pdf (nationalvoices.org.uk) | Social Prescribing |
| Connecting with the health system: Building meaningful relationships and aligning and integrating physical activity for shared ambitions (activepartnershipsevents.org) | Calderdale LDP |
| NHS England » Social prescribing and community-based support: Summary guide | Social Prescribing |
| Putting it into practice (sportengland-production-files.s3.eu-west-2.amazonaws.com) | Physical Activity |
| Volunteer with us Community Action Network (can100.org) | Poole Wellbeing Buddy |
| PowerPoint Presentation (kingsfund.org.uk) | Brighton and Hove |
| Befriending Support & Schemes Sussex – Together Co | |
| Cost of living support – Warm spaces and community facilities – Exeter City Council | Exeter Warm spaces |
| People Powered Health Programme Nesta | Community Led |
| Creative Councils Nesta | Lessons for local authority innovators |
| About – Bromley by Bow Centre (bbbc.org.uk) | Bromley by Bow |

| | |
|--|---|
| A200-Annual-report-and-Financial-statements-2022-SV-LLP.pdf (bbbc.org.uk) | |
| Government Innovation People Power Nesta Creating the conditions for a more people-powered future: What is the social infrastructure we need? Nesta Introducing CIVIC SQUARE – CIVIC SQUARE Department of Dreams – CIVIC SQUARE | Civic infrastructure |
| DEAL (doughnuteconomics.org) | Social Action |
| Eleven Principles for Creating Great Community Places (pps.org) | Eleven Principles for Creating Great Community Places |
| Health and wellbeing systems Local Government Association | Support for HWB -LGA |
| Councils Census 2021 data analysis – Google Sheets | Census |
| Must Knows for Elected Members: Prevention Local Government Association | Prevention -LGA |
| Mental health & family support – Lancaster City Council | Lancaster Hotline |
| Community hubs – VSF (cornwallvsf.org) | Cornwall Community Hubs |
| Mental health & wellbeing Early Intervention Foundation (eif.org.uk) | Schools |
| What Covid-19 Has Done to Our Well-Being, in 12 Charts (hbr.org) | Lessons from the pandemic |
| Youth Index 2021 Research, policies and reports About The Trust The Prince’s Trust (princes-trust.org.uk) | Young people |
| Corporate Plan 2022-2026 – 2d – Net zero carbon city – Exeter City Council Download the Net Zero Exeter 2030 Plan – Exeter City Futures | Exeter Net Zero Plan |
| Exeter Vision 2040 – Exeter City Council | Exeter Vision |
| corporate-plan-2022.pdf (exeter.gov.uk) | Exeter Corporate Plan |
| Social prescribing – Integrated Care System for Devon (icsdevon.co.uk) | Social Prescribing |
| Build-Back-Stronger.pdf (demos.co.uk) | Policy |
| How commissioning is supporting community development and community building Local Government Association | ABCD Approach |
| Community Wellbeing Service - Gloucestershire County Council | Gloucester |
| Health and wellbeing - Community Works (bhcommunityworks.org.uk) | Birmingham |
| What Next? Priorities for Britain - Demos | Policy |
| For professionals Wellbeing Enterprises | Runcorn -Chris Drinkwater |
| Leadership & Governance Manna Community CIC | Governance |
| How is Ways to Wellness set up? About Ways to Wellness Ways to Wellness | North East and North Cumbria |
| Choosing your legal structure NCVO | Structures |
| Home - One Northern Devon | One Northern Devon |
| Funding - Calouste Gulbenkian Foundation — UK Branch Grants Esmée Fairbairn Foundation (esmeefairbairn.org.uk) What We Fund – Lankelly Chase Strengthening Civil Society - The Baring Foundation Programmes - Barrow Cadbury Trust Funding programmes The National Lottery Community Fund (tnlcommunityfund.org.uk) Social outcomes Big Society Capital Explore The Henry Smith Charity Grants JRCT - Home How to apply - Tudor Trust BA Better World Community Fund - Funding for All | Funding |

Appendix 1

People consulted and included in discussions.

Interviewees

| | | |
|------------------------|--|--|
| Amanda Kilroy | Joint CEO and Director of Social Innovation | Co-Lab |
| Cllr Andrew Leadbetter | Cabinet Member for Children's Services and Schools | Devon County Council |
| Andy Moreman | CEO | Young Devon |
| Andy Stapley | Cabinet Member for Children's Services and Schools | NHS-Nexus PCN |
| Andy Wood | Clinical Director | NHS Outer Exeter PCN |
| Carly May | Community Engagement Officer | Exeter City Futures |
| Ceri Goddard | CEO | Devon Community Foundation |
| Dan Barton | Partnerships and Projects Lead | Space |
| Danny Harris | Head of Wellbeing and Inclusion | Exeter City Community Trust |
| Darin Halifax | Lead for the VCSE at NHS Devon | ICS/NHS |
| Dawn Rivers | Programme manager-Communities | Exeter City Council |
| Dinah Cox | Chair | Devon Community Foundation |
| Ed Shaw | Community Physical Activity Organiser | Exeter City Community Trust |
| Eleanor Tomlinson | Wellbeing Exeter Programme Manager (Maternity Leave) | Devon Community Foundation |
| Ella Sadler | Wellbeing Exeter Coordinator | Co-Lab |
| Ellie Veasey | Community Connector | Exeter Community Initiatives |
| Emma Green | Clinical Director | NHS-West Exeter PCN |
| Emma Hoerning | GP | NHS |
| Felix Elsen | Community Connector | Young Devon |
| Gail Mistlin | Wellbeing Exeter Community Connections Manager | Co-Lab |
| Gareth Sorsby | Joint CEO | Exeter YMCA |
| Gary Head | Wellbeing Exeter Programme Manager (Maternity cover) | Exeter City Council |
| Ian Blackwell | Partnerships Lead | Devon Community Foundation |
| James Bogue | Active and Health Lives Lead | Exeter City Council |
| Cllr James Mcinnes | Cabinet Member for Integrated Adult Social Care & Health | Devon County Council |
| James Watmough | Strategic Lead (Place) | Sport England |
| Jamie Vittles | CEO | Exeter City Community Trust |
| Jeff Chinnock | Associate Director of Policy and Partnerships | Royal Devon University Healthcare NHS FT |
| Jo Yelland | Director | Exeter City Council |
| Jon-Paul Hedge | Director | Exeter City Council |
| Karime Hassan | CEO and Growth Director | Exeter City Council |
| Kate Galliford | Centre Manager | The Beacon Centre |
| Kate Hannan | Trustee | Inclusive Exeter |
| Laura Robinson | Wellbeing Exeter Community Builders - Project Manager | Exeter Community Initiatives |
| Lee Baxter | Assistant Director Community Health and Social Care | Royal Devon University Healthcare NHS FT and Devon County Council. |
| Lou Higgins | Locality Director N&E | North and East Locality Team |

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| Maria Koutsoumanis | Wellbeing Exeter Data & Information Lead | Co-Lab |
| Cllr Martin Pearce | Portfolio Holder for Communities & Homelessness Prevention | Exeter City Council |
| Neomi Alam | Director | Inclusive Exeter |
| Nicola Frost | Interim Programmes and Development Lead | Devon Community Foundation |
| Cllr Phil Bialyk | Leader | Exeter City Council |
| Rebecca Harty | Deputy Locality Director N&E | North and East Locality Team |
| Richard Lockwood | Local Pilots and Priority Places Manager | Sport England |
| Simon Chant | Consultant | Devon Public Health |
| Simon Kitchen | Head of Communities | Devon County Council |
| Steven Chown | CEO | Exeter Community Initiatives |
| Will Barrett | Head of Charity Development | Exeter City Community Trust |

Wellbeing Exeter Commissioning Meeting -Review Feedback Workshop

Attendees

| | | |
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| Andy Wood | Clinical Director | NHS Outer Exeter PCN |
| Ceri Goddard | CEO | Devon Community Foundation |
| Gary Head | Wellbeing Exeter Programme Manager | Exeter City Council |
| Ian Blackwell | Partnerships Lead | Devon Community Foundation |
| James Bogue | Active and Health Lives Lead | Exeter City Council |
| Jo Yelland | Director | Exeter City Council |
| Jon-Paul Hedge | Director | Exeter City Council |
| Cllr Martin Pearce | Portfolio Holder for Communities & Homelessness Prevention | Exeter City Council |
| Nicola Frost | Head of Learning | Devon Community Foundation |
| Rebecca Harty | Deputy Locality Director N&E | North and East Locality Team |
| Martyn Barnard | | Devon County Council |
| Dawn Rivers | Programme Manager-Communities | Exeter City Council |

Wellbeing Exeter Partnership Meeting -Review Feedback Workshop

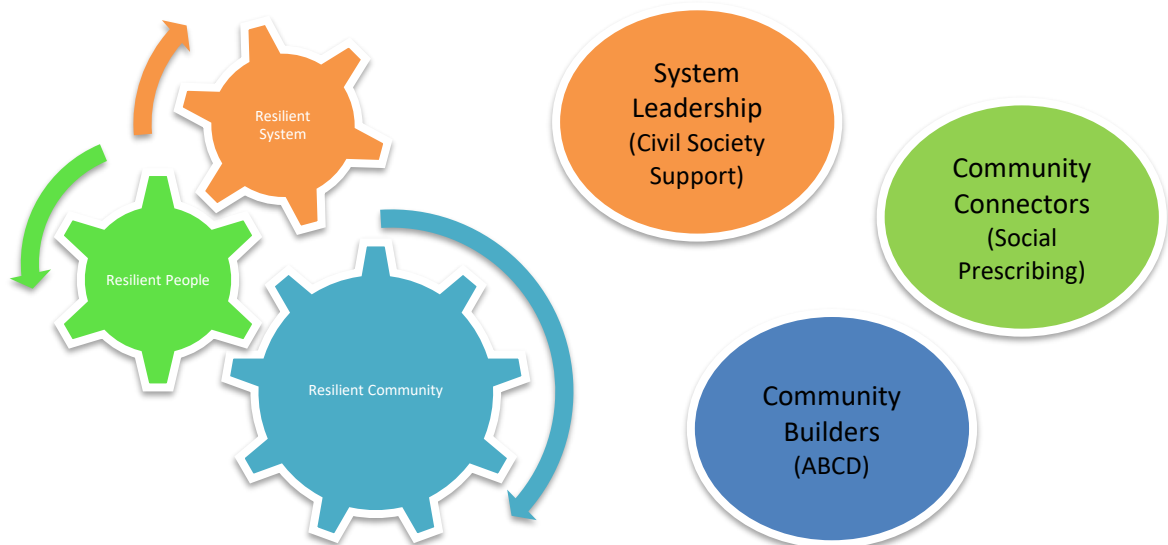
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| Amanda Kilroy | Joint CEO and Director of Social Innovation | Co-Lab |
| Dan Barton | Partnerships and Projects Lead | Space |
| Danny Harris | Head of Wellbeing and Inclusion | Exeter City Community Trust |
| Ella Sadler | Wellbeing Exeter Coordinator | Co-Lab |
| Gail Mistlin | Wellbeing Exeter Community Connections Manager | Co-Lab |
| Sam Thomas | Community Projects Manager | Exeter YMCA |
| Kate Galliford | Centre Manager | The Beacon Centre |
| Steven Hudson | Chair of Trustees | ISCA Community Enterprises |
| Laura Robinson | Wellbeing Exeter Community Builders - Project Manager | Exeter Community Initiatives |
| Carole Pilley | Development Manager | Exeter Community Initiatives |
| Katie Holland | Chief Executive | Exeter Community Initiatives |
| Daisy Binnie | Family Resource Manager | Exeter Community Initiatives |

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| Jamie Keyse | Manager | Young Devon |
| Nicola Frost | Head of Learning | Devon Community Foundation |
| Gary Head | Wellbeing Exeter Programme Manager (Maternity cover) | Exeter City Council |
| Ian Blackwell | Partnerships Lead | Devon Community Foundation |
| James Bogue | Active and Health Lives Lead | Exeter City Council |
| Ruth Gidley | Community Participation Officer | RAMM |
| Jo Yelland | Director | Exeter City Council |

Appendix 2: Wellbeing Exeter Model

Wellbeing Exeter was established as a single structure for encouraging preventative behaviours by individuals and promoting “resilience” within the system and across communities. In practical terms this means offering a range of community-based options to targeted individuals, to enable them to access what they want to maintain health and wellbeing, reducing the need for statutory care services now and into the future. There were three main ingredients to the approach:

1. Resilient people: social prescribing
2. Resilient Communities: community building
3. Resilient System: network support and co-ordination



Resilient People

People are at the heart of this model, increasingly aware of what exists in their local community to support them, as-and-when they need it. In a healthy, resilient, community people are living healthy lives, connected, independent and meaningfully occupied. And when they are not, each person is aware and able to access a range of facilities, positive activities or services that exist to help them recover, maintain health and wellbeing encourage social connections, and develop new skills and capacities. In a resilient community, local resources are being harnessed to help people help themselves, resulting in improved satisfaction rates, as their sense of wellbeing and quality of life is good.

Resilient Communities

In order to deliver these opportunities to individuals, there is a network of independent individuals and organisations that connect people to the services they need to help them identify what they can do for themselves, and what professional support or guidance may be needed when the time comes (Community Connectors and Builders.) These roles have a holistic view of the network of support to ensure it is responsive to the needs of the individuals and direct resources into community-based organisations, thereby increasing the resilience and capacity of both. The ambition is to generate a long-term solution to addressing some of the most pressing current and predicted needs and challenges by investing in the development of a resilient community. To achieve this, and to achieve system change, the aim is to build community capacity, promote connectivity and generate evidence of impact from the outset.

A Resilient System

Civil Society Support: offering brokerage, development and facilitation within the system to ensure that the needs and aspirations of individuals are being responded to effectively. That ‘Connectors’ and ‘Builders’ are receiving the training, supervision and support they need. Communities and healthcare work together effectively, and evidence of impact is being collected and reviewed to drive continuous improvement.

Appendix 3: Wellbeing Exeter Activity and Performance Reporting

| Community Building | Community Connecting |
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| <p>Examples of; Community listening Work with organisations Community events Profiles of Associational Life have been updated recently.</p> | <p>Referral numbers and routes Referral reasons and waiting times Quarterly referral breakdown: open and closed and Non engagement reasons Wellbeing indicator -5 ways to wellbeing and Obstacles to improving wellbeing Introductions made -numbers/ organisations and category Individual stories</p> |
| Community Physical Activity Organisers | Networking and Events |
| <p>Referral numbers and routes Examples of; Community mapping, Community listening Community events Work with organisations</p> | <p>Events attended by team members WE partnerships and networks</p> |
| Learning and Development | Quarterly focus areas and other reports |
| <p>Training delivered and planned</p> | <p>These are areas of work currently being focused on, e.g., Cost of living, zero carbon aims There are also ad hoc reports created as, e.g., covid report, cost of living, community building See here</p> |

Appendix 4 Listening and learning from Interviews and Research

The following tables contain the result of interviews with Wellbeing Exeter (WE) stakeholders, the review of documentation and research of other place-based models of community wellbeing.

What does Wellbeing Exeter mean to you?

| People and Community | | Partnership |
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| Community led programme focused on people of Exeter at a personal level. | Umbrella safety net for population -got used to it being there | WE is very attractive in terms of strategic appeal and delivery |
| Embodies prevention/ Empowering people to help themselves -rather than relying on GP | Gap in services and WE exists to tackle that for families and individuals that need stuff | A convener /all working together around wellbeing /Enabler of helpful conversations to wellbeing |
| Supporting residents to achieve some of their aspirations | Addressing the disconnect that people in disadvantage communities feel | Flexible / Flexible and different to what else is on offer- we are not Social Services |
| Not prescriptive | Opportunities to build stuff in the community | A collaborative partnership keeps people working together |
| Non patronising | Umbrella to bring people together | Adaptive /Unique -very responsive and adaptive to change |
| Addressing health inequalities | Sees wellbeing in the round. | Great connectivity |
| Supporting people to be well/ Getting back to wellness | It's the way we listen and the way we escalate ideas | Well embedded partnership |
| A one stop shop for wellbeing- the place that people go -both physically and metaphorically | Since the great work done in covid -WE have been about supporting recovery | To connect people and organisations and health together, an enabler of connection - helps to build patient/ practitioner and practice relationships |
| Bringing people together around interests and community | Giving people other things to support, connect and to feel better | An opportunity to talk about the health gap |
| Encourages people who have a difficult time who need help and assistance to improve their health and wellbeing | Trying to get people from surviving to thriving | City can be proud of this flagship programme for the city and partners to support health and wellbeing for people who need it most |
| Getting people out of crisis | Builds on ABCD ⁸ | WE is a very reliable and trust worthy SP -with comprehensive coverage |
| Learn how to play and be creative | It addresses the need for people-what's going on for them but also helping the system | Diverse and rich experience in the partnership |
| Reduces dependency | Inclusive | Different organisations sharing expertise-peer to peer support |

⁸ Asset Based Community Development (ABCD) is an approach to sustainable community-driven development. Beyond the mobilisation of a particular community, it is concerned with how to link micro-assets to the macro-environment. Asset Based Community Development's premise is that communities can drive the development process themselves by identifying and mobilizing existing, but often unrecognised assets. Thereby responding to challenges and creating local social improvement and economic development. [ABCD Training and Resources - Nurture Development](#)

Theme 1 Leadership and Governance

| Listening/ learning | Reflection and Action |
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| <p>There have been no governance meetings since the pandemic. This has left commissioners feeling that connection has been lost and that they have no say in WE.</p> <p>It has also meant that partners feel there is no clear direction from commissioners other than ECC (where conversations have remained regular).</p> <p>This also has left commissioners feeling a lack of accountability from ECC which adds weight to the perception that –“it's very much an ECC project”</p> | <p>This needs to be resolved immediately. The result of a lack of collective strategic input has resulted in;</p> <ul style="list-style-type: none"> • Partners feeling there is little strategic interest in WE. • A sense that WE is being left to get on with it. • A lack of ownership of WE • confusion about decision making mechanisms <p>Need to reconvene WE Commissioning Board Meetings ASAP</p> |
| <p>The ECC Lead Director went on extended sick leave, the VCSE sector lead for WE left DCF in September 2021; the Operational lead for WE left in April 2022 and the Programme Manager went on maternity leave in August 2022. These changes in management of Wellbeing Exeter over the last year has resulted in two overwhelming feelings amongst partners and commissioners;</p> <ol style="list-style-type: none"> 1. That the partnership doesn't feel so robust 2. There is a loss of a clear sense of direction | <p>This presents a significant change in management. Two of these roles have been replaced but the roles have changed.</p> <p>There is bound to be a period of adjustment to new management and some people are confused about the change in roles.</p> <p>The 'sector' lead has not been replaced – see Strategic relationships with the NHS. This needs to be explored.</p> |
| <p>The two previous points have also led to some confusion about “who is in charge here” and that no one (or no group of people) is personally driving it.</p> <p>This also plays out in the observation of many about who is now making the decisions.</p> | <p>WE's development and success to date has been founded on relationships and a deep sense of trust that has built up over many years. The founding strategic lead (previous ICE Director and ECC Director) went on extended sick leave in November 2020 and did not resume her WE role until 2022 and this loss of continuity in leadership is clear.</p> |
| <p>One commissioner points out the difficulty in maintaining enthusiasm for the collective leadership and vision -it wains overtime -that it needs a new sense of energy and potentially some parts of the design. 'Innovation is very shiny but it does get people excited.'</p> | <p>A 'new' collaborative commissioning Board meeting to agree a new vision for WE -should re-ignite enthusiasm. Reconvene Commissioning Board Meetings.</p> |
| <p>Some people felt that the current model feels very top down and not very collaborative (there are many more people who felt that it was a very collaborative model -but that depends on where you sit).</p> <p>This also give cause for a couple of people to feel that WE is beginning to feel like a transactional relationship, that it now felt like contract management - particularly around designing new elements of WE. Examples given were around PCN withdrawal of funding and the new Ukrainian Connectors.</p> | <p>This will be explored when talking about a new structure for WE</p> |

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| <p>There was so much collaboration in Covid (feeling that people mattered and systems didn't so much) but the barriers have come down and we are working in silos again.</p> | <p>More cross alliance work needed</p> |
| <p>The programme team link very regularly with the ECC team and relationships are good but there are many demands of the ECC manager with operational responsibility for WE and this results in delays in decision making, meeting planning, which in turn creates more delays.</p> | <p>Consider the decision-making mechanisms and operational responsibility.</p> |
| <p>The Sport England LDP impacted on WE in a number of ways. It is the major funder for the programme now but some people feel that the LDP has "created a long shadow over WE".</p> | <p>Sport England have been a big supporter and major funder to WE over the last 4 years but the LDP has inadvertently made changes to WE that have caused confusion or deviation. This is in regard specifically to the governance and the evaluation.</p> |
| <p>There is a deep sense of responsibility for the programme from DCF and if the form changes then the DCF team would like to remain involved</p> | <p>The DCF team should remain central to the development of any new reiteration of WE, potentially remaining as a Trustee going forward.</p> |
| <p>Relations with and strategic influence within the NHS WE is not as ingrained in Primary care as it could be.</p> <p>The DCF partnerships led is the Co-Chair of Preventing Social Isolation Working group with Eastern Local Care Partnership but WE is not visible at a strategic level within the Eastern LCP and this needs to be addressed.</p> <p>The strategic lead for WE is on the Eastern Locality Forum (ELF) but attendance has been intermittent The VCSE sector lead was on the ELF but is now not in post.</p> <p>There are some good relationships with a couple of GPs but others don't even know about it.</p> <p>Some practices have been specifically asked to not refer to WE.</p> <p>Other Social Prescribing Programmes have more parties committed to it at a strategic level than WE has; specifically One Northern Devon was highlighted.</p> <p>There is a fundamental problem with WE aligning to the whole of Exeter and that Primary Care no longer has a relationship across the whole of Exeter. This means that relationships need to be separate and individualised to each PCN as each PCN wants a very local offer.</p> | <p>In the early days, WE had a champion within primary care whose voice was influential</p> <p>The ECC Director (JY) used to attend the GP forum</p> <p>Commissioners and partners worked very hard to make sure there was support in the NHS.</p> <p>The WE programme team worked very hard to back this up on the ground linking with practice managers and GPs.</p> <p>Should have clinical directors on the commissioning team not just a clinical lead.</p> |
| <p>The programme management facilitated by DCF has enabled WE to get where it is today, DCF has been the link between commissioners and delivery partners. There has always been an aspiration that when WE 'came of age' it could be robust enough to become a standalone organisation. Without a global pandemic, WE may well have already become it entity but the timing was not right. Many partners mentioned the future opportunity for WE to become a standalone organisation.</p> | <p>Secured funding to support the existing structure and development work for 12 months will be the first step. This time will then give all delivery and commissioning partners an opportunity to participate in the development of new organisation and funding strategy.</p> |

Theme 2 Model

| Area | Listening/ learning | Reflection and action |
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| <p>Scope and purpose</p> | <p>The WE model was created 7 years ago (ICE days) but many things have change since -pandemic, austerity cuts and cost of living crisis.</p> <p>WE can't be all things to all people, it can't solve some of the problems in society but we need more clarity about what it is focusing on.</p> <p>The inequality gap just got bigger.</p> <p>Should we try to fill the gaps in services that are just not there?</p> <p>Prevention needs to be done at place level- driven by Population health management -i.e. Fill this gap and money will follow.</p> <p>WE should be at the heart of the ICS but the focus isn't there</p> | <p>Does the model still fit now? Is the vision still the same?</p> <p>The original objective of WE to reduce dependency on health and social care and increase interdependency -although this is clearly the vision for some people. Overtime it has become less discussed, is this vision shared across the whole alliance?</p> <p>Keep prevention and early intervention</p> <p>WE needs allies in Primary Care and across the ICS: re –engagement strategy</p> |
| <p>Working together as a partnership- the good and the bad</p> | <p>The WE partnership is very strong. These are just a few of the things about the partnership that were picked out by partners:</p> <ul style="list-style-type: none"> • Shared vision between partners • Shared training • WE is very well connected in the sector and the community • Teams are even more connected and aligned since the pandemic • There is so much added value of working with experts - the non WE staff members in partner organisations • Working more with the statutory sector • WE connects more to the community • CCs are very happy being in the partnership. • Partnership is really strong -the way the VCSE come together and support each other • People want to be a part of WE, organisations want to join • Communication between partners and supporting small organisations to be a part of WE -proactive in preparing us to be a partner • Staff retention is high • Partners like being part of it • Team member more affiliated to WE than to own organisation | <p>There is no doubt that the WE partnership is strong, this has enabled collaboration within the VCSE.</p> <p>There is definitely appetite to maintain these close working relationships and clearly the co-ordination team and the creation of a connector manager holds the collaboration.</p> <p>When thinking about any future model, it will be worth reflecting on whether direct contracting delivery organisations is considered as this was raised by several organisations.</p> |

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| | <ul style="list-style-type: none"> • The WE brand can negate the value of the delivery organisation • Sometimes information trickles out through the network -this can be uncomfortable -when Programme Manager has only just told you but your teams already know, sometimes there are internal communication issues • There are lots of part-time workers in WE which sometimes limits capacity/ resources • WE ask more of organisations than other partnership in terms of input and meetings • Direct contracting with organisations may create better impact and efficiency • When a manager is not in post/ paid for by WE, there is not enough management time paid in management –one organisation stated they are hosting WE roles at a loss • The model can feel like an ‘extra layer’ for little benefit • Making decision about new developments, it’s not always clear whose decision is it. • Dynamic and diverse set of partners • Opportunities and requests are thrown at WE- it is very flexible and agile (see more below) • It's open -anyone can join • Gives organisations a chance to transform the way they think about working with community • It’s great to be working in a broader space and exploiting opportunities • Team connections are great -particular mentions are relationships between connector teams, there are an increasing number of examples of connectors working with CPAOs, builders and CPAOs and connectors and builders (see dashboard and quarterly magazine) • Sharing expertise through peer- to-peer support | |
| As a learning/ sharing platform | A number of people talked about a Health and Wellbeing Board (HWB). There is no requirement to have one but there is appetite for a platform for people to come together to talk about H and W. | WE would be in an excellent position to convene the VCSE sector/ statutory and the community. WE is well placed to do this because of the huge amount of intelligence |

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| | | <p>it collates, all of the learning it does and the expertise it has.</p> <p>When it comes to wellbeing, it's about place and a collaboration of this nature would create a more inclusive city, support the identification of barriers or issues people and communities face with a view to systemic change.</p> <p>It would also make sure that small organisations providing wellbeing support are included in the wider city picture.</p> <p>It would be an opportunity to discuss wellbeing in the round and bring together information around wellness/ community activity that could then be shared on a range of websites and other platforms i.e., ECC website / GP/ PCN Health and Wellbeing teams</p> <p>A great example of this is in Lancaster's Community conversations: <i>Our vision is for a community united by respectful listening where everyone feels they can influence what happens locally to make our District a happier and healthier place to live and work</i> Lancaster District Community Conversations KeepConnected</p> <p>Bristol has a lot of learning about how a Health and Wellbeing Board can bring about systemic change. One City Plan 2021 (bristolonecity.com)</p> <p>Brighton and Hove learning Health and wellbeing - Community Works (bhcommunityworks.org.uk)</p> |
| Place - Building/hub | WE doesn't have a base or a place to come together- a hub. This doesn't need to be a building that houses teams but could be the | WE could co-ordinate a range of support to in existing hubs. |

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| | <p>creation of a number of hubs (in existing spaces or activity) across the city where teams can come together to meet more community members.</p> <p>The importance of drop-ins, the vast majority of interviewees mentioned drop-ins. Post covid, anxiety is rife, people need opportunities to get out of the house and to build their confidence.....</p> <p>Regular drop-ins offer opportunities to/for;</p> <ul style="list-style-type: none"> ▪ listen and be heard ▪ be available for people who are not connected to statutory services or people from diverse communities ▪ provide a place for people to go ▪ a one stop shop for wellbeing ▪ build relationships ▪ meet the WE team ▪ have a conversation- like the welcome call. ▪ broader coverage across the city ▪ a cup of tea and biscuits – a café is a great way to engage people. <p>Inclusive Exeter would like to be able to expand drop-in opportunities for people to just turn up, currently this is only available Tuesday and Wednesday for a couple of hours for appointments -need more accessibility -also this is not at an accessible time of day for restaurant workers.</p> | <p>A great example of a ‘hub ‘approach is in Southwark Social Action Advice Surgery - Community Southwark</p> <p>Also some interesting learning from Community Organisers around Social Action Hubs SAH-framework-FV.pdf (corganisers.org.uk)</p> <p>What are community hubs? - MyCommunity NHSPS' social prescribing hubs helping ease pressure on primary care UK Healthcare News (nationalhealthexecutive.com)</p> <p>Having a presence in these locations would be a start. Cost of living support - Warm spaces and community facilities - Exeter City Council</p> <p>Learning from Cornwall who claim you are never more than 20 miles from a community hub. Community hubs - VSF (cornwallvsf.org)</p> |
| Roles and teams | <p>There is some confusion about roles and relationships; Some people felt that the triangle of CB, CC and CPAO should work much more closely, there is evidence of this beginning to happen but it could be much more effective.</p> <p>Some roles are still unclear to others in the partnership but most people felt strong links were being created within and between teams.</p> | <p>Clarity around roles -some still unclear and how they interact</p> <p>Needs an organisational chart and terms of reference</p> |
| Language | <p>There is an ongoing issue with language, particularly around the term social prescribing.</p> <p>Many partners are confused about whether they should describe WE as social prescribing.</p> | <p>The term social prescribing is emotive (should someone have the power to prescribe community to another?), you can either choose to ignore that as use the term as a descriptor of the programme and hope that people know what you mean.</p> |

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| | | <p><u>NHS England » Social prescribing</u> here is a definition</p> <p>The term has always been contentious within WE and there has always been a need to take time to define what you mean by social prescribing.</p> <p>This is more important than ever, with the PCN link worker role also being defined as social prescribing it is not surprising there is confusion.</p> <p>This needs to be addressed to ensure that commissioner and partners alike are agreed on what the community connecting strand of WE is.</p> |
| Being agile, flexible and adaptable | <p>The breadth of WE means it has the capacity and scope to be responsive to local (and national/global!) needs. Its ability to flex and adapt is vast. Some excellent examples</p> <ul style="list-style-type: none"> • Responding to Ukrainian refugees: 2 connectors in post • The response during the Covid pandemic is well documented, in particular is highlight the that working group was brilliant. • The partners talk about freedom to grow in response to needs as they emerge and they are 'allowed to get on with it' -an example of this is opening up of referral routes <p>For this reason, WE</p> <ul style="list-style-type: none"> • has a good reputation, people envy it - embraces everything thrown at it • is a useful partnership for statutory agencies - A great place to deliver national priorities: Covid, levelling up, COL, refugees. | <p>For this reason, WE really does have the scope to lead, get involved with systemic change opportunities through taking innovative approaches to delivery or supporting others to.</p> <p>An example of this working elsewhere is in Runcorn where they work with both people and communities and professionals to create new opportunities. <u>For professionals Wellbeing Enterprises</u></p> <p>This is an opportunity for income generation.</p> |
| Approachable/reliable. | <p>WE can be depended on as reliable and approachable.</p> <ul style="list-style-type: none"> • There is always someone to speak to • Low turnover of staff • There have been 20 complaints about SP in Devon- none in Exeter • People trust WE- it's person focused-responsive to the needs to people • Staff are very impressive • Integrity of CCs and CBs | |

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| | <ul style="list-style-type: none"> • CCs and CBs are good people • There is a lot of personal investment from all teams | |
| Community | There were some people interviewed that didn't feel that WE was community led enough- not bottom up but an imposed structure. | The very nature of the community building strand of WE is community led. The community connecting strand is person led but there are more opportunities for involving communities in the design and scope of WE. |
| Monitoring delivery | A question was raised about whether delivery organisations were monitored enough and a query about how different levels of quality in delivery were addressed. | <p>Performance and line management has always sat with each individual delivery organisation.</p> <p>There is a model of working and code of conduct within WE that brings all teams together, this is particularly pertinent in terms of the community connectors as they work across a wide group of seven organisations. (The builders and the CPAO team all work in one organisation).</p> <p>Joint working protocols aid the oversight of delivery and the balance of responsibilities from the central WE team and each organisation. The coordination / SPOR team do spot checks of CC work on CLOG to review practice and recording.</p> <p>The induction/ training is being refined.</p> <p>In the event of a performance issue- there is a 3-way conversation with WE connector manager, the line manager and the team member. Line managers sometimes have limited time and understanding of the way WE works due the scope of the management fee.</p> |
| Community Connectors | <p>Having a connector manager has made a big difference to all the connector teams (creating a community to create a community). The connectors feel very connected to each other and they are beginning to work more with all teams.</p> <p>The Inclusive Exeter connector work, working specifically with diverse communities, has been slow to get off the ground due mostly to</p> | |

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| | <p>difficulties in gaining trust. It's only received a few referrals from GPs and schools (through the SPOR) but the work is ramping up now.</p> <p>Generally introductions were initially more service based but now there is more balanced in terms of community based activities and (statutory) service referrals.</p> <p>Young people referrals are lower than expected - one factor in this is that whilst those roles were being funded by PCNs, referrals could only come from GP practices (young people do not present at GP practices in the same way adults do unless accompanied by parents) Also the reality of these referrals is that it's taking nine months to work with young people due to increasing anxiety issues, typically meeting them six times – and closure is one of the most important parts of the support – making sure you don't finish too soon and the young person is ready.</p> <p>Everyone likes that the use of 5 ways to wellbeing within practice and reporting.</p> | |
| <p>Group work and introducing people</p> | <p>Lots of partners were talking about group work. WE are very aware of the benefits of introducing people who are referred to other people for friendship. People want to be connected but are scared off by 1 to 1 interaction. The WE team tried to formalise the process of introducing people to people but it wasn't useful. These interactions need to happen organically. Group work or events are a great way to encourage the building of these relationships.</p> <p>Especially one-off events when people are not ready to be introduced to a 'group' yet but they are willing to attend an event (e.g., RAMM, the library, the cathedral events)</p> <p>One connector* has been particularly active in supporting people to come together as new friends</p> <p>Work has already begun in talking to the RDUH about neighbours supporting neighbours.</p> <p>Many people felt that it would be good to build interest groups, specifically the following groups/ activities were mentioned;</p> <ul style="list-style-type: none"> • Nature | <p>Post pandemic group work is more important than ever to build confidence and get people out.</p> <p>It is clear there is much value in group work that is specifically about supporting people building relationships - a wellbeing group turns into friendship group. It would be good to further share training around building positive relationships. This training could be offered to a wider audience than just WE.</p> <p>It would be useful to embrace introducing people to people more as a way of reducing dependency on paid workers and growing social networks. More could be learnt from the connector* around this.</p> <p>In Frome (Mendip) the Community Connector model does this. hcm-foldout-A5.pdf http://healthconnectionsmendip.org</p> |

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| | <ul style="list-style-type: none"> • Gaming • Evening activities for YP that don't involve drinking alcohol (YP unemployment is low and people are often busy in the day) • People- led new activities • Offer women only sessions/ activities - specially for women from diverse communities where men are sometimes seen as gatekeepers • Creating opportunities for people experiencing barriers to relationships- not just language but confidence • Opening up opportunities for people from diverse backgrounds • We need to do what we can do to support people to do their own thing • Bringing mums together to talking about domestic challenges including violence | <p><i>Community Connectors are members of the community who know what's out there and signpost friends, family, colleagues and neighbours to support in their own community. Community Connectors are very effective at integrating with their local communities – providing a bridge between local people and other services and building community knowledge.</i></p> <p>There are very little opportunities for people to become connected with organisations or others in the city, whether that be informal introduction or more formal volunteering. The central co-ordination team could play a part in co-ordinating the matching of people and volunteers and have already identified this is really needed at this time.</p> <p>There are opportunities to explore volunteering connected to WE with students (Exeter University/ College) and corporate / business staff teams.</p> <p>There is also learning here in the Levelling up Community Champion Roles <u>Community champions programme: guidance and resources - GOV.UK (www.gov.uk)</u></p> <p>And from Poole's Wellbeing Buddy Scheme <u>Volunteer with us Community Action Network (can100.org)</u></p> |
| Community activities | <p>There is plenty of stuff to introduce people to in the community (free and paid for) but for some groups of people the pandemic saw the demise of their community activities.</p> <p>Many people also lost friends in the pandemic and everybody talked about the predominant issues for people is their anxiety levels. (see point above about engaging 1 to 1 or in formal groups) Connector teams have also been working to create/ bring about workshop/ groups to address</p> | |

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| | <p>this as a stepping stone to reduce anxiety -which are community led (e.g.-graffiti/ cooking).</p> <p>COL support; many people can't afford to pay for activities/ gym/ even a coffee when they are there or transport. For some people this is not a reality yet but they are pre-empting the COL crisis and opting out of activities accordingly.</p> <p>The cost of food is already impacting -significantly more people are going to foodbank/ accessing food vouchers compared to 2018.</p> <p>Transports and mobility issues are impacting people accessing community and physical activities -particularly those on the outskirts of Exeter.</p> | |
| SPOR and welcome calls | <p>The SPOR is now fully embedded in the central team at Co-lab.</p> <p>The welcome calls are working really well and enable an understanding of what the issues are for people. They present a real opportunity to raise attention to issues happening on the ground and having a sense of trends.</p> <p>This information goes into reports, to ECC via the Live and Move team, to Co lab, WE operations meetings, quarterly reporting, into wider picture VCSE through CEOs attending VCSE Reference Group etc</p> <p>The SPOR is not working so well for YP connecting.</p> | <p>There is an opportunity here to further collate, share the learning with a view to creating systemic change with referring agencies.</p> <p>This needs further exploration.</p> |
| Team development and learning | <p>The coordination team have been looking at the wellbeing of staff.</p> <p>Peer to peer support sessions for teams are an opportunity to share with each other, e.g. One session focused on 'closing'.</p> <p>Connector training and development is good – there is a considerable budget in place to make sure this happens. However, Community Connectors are expected to be very knowledgeable in many aspects of supporting people in the community. This is putting pressure on the connectors.</p> | |

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| | <p>It was suggested that it would be good to do more 'Community of Practice' work with our YP CCs so they felt more of a wider YP CC team.</p> | |
| <p>Community Building</p> | <p>There is lots of support for the community building strand of WE. Asset Based Community Development practice is strong within the work they do. Commissioners highlight that building capacity in communities as one of the most important aspects of WE.</p> <p>There is also positive feedback from councillors about community building but some recognition that some areas are more active than others. This could be, and is, for a variety of reasons associated with that place. *St Thomas is mentioned many times in feedback as a very vibrant active area and that the CB is at the heart of that community.</p> <p>A number of people suggested that it may be better to focus current resources on the more deprived areas of Exeter**, where more engagement is needed. The question was raised as to whether CB reaches the places it need to in the time it has. Some places need more CB time or engagement (Countess Wier/ Wonford). **Following Covid the inequality gap just got bigger between communities.</p> <p>Council members now have relationships with each CB rather than the manager. In the past, some politicians have been known to describe a community builder as their 'coordinator'- this is unhelpful for the community and the work of WE. This is being addressed and is happening less now.</p> <p>Community builders are now completing their 2nd round of PALs (profiles of associational life).</p> <p>Community builders work in small clusters with CB where they can offer peer support and learning.</p> <p>If is thought that community building does not seem to work alongside young people as much as it could.</p> <p>Interviewees really welcomed community builder updates in reporting and social media (dashboards/ Facebook) about what's on and activities.</p> | <p>What can be learnt from the highly praised community building in some areas. More shared learning/ a spotlight on activity.</p> <p>All the builders (12) are managed by one manager, this is a big job, and opportunity for sharing and developing practice are not maximised. Could a builder take on a role to developed practice in some areas where less engagement is happening or where places are changing considerably (i.e., Alphington).</p> <p>How do WE work more closely with ECC (in particular) around community voice without compromising impartiality?</p> |

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| | <p>Community building is highly regarded as the ears on the ground and there is much respect for those conversations. However, WE is missing out on opportunities for system change as not all organisational relationships in the WE partnership are as strong as they could be, more information/ opportunity would be shared if it was stronger.</p> <p>Feedback from community builders is that the roadshow for the Exeter Plan was not citizen friendly. Community builders could take a much more advisory role in community engagement in Exeter, of course, builders need to remain neutral but there are more opportunities for working more closely together around engagement/ hearing community voices.</p> | |
| <p>Community Physical Activity Organisers (CPAOs)</p> | <p>CPOAs have completed their mapping of the city.</p> <p>CPAO are beginning to work with individuals more taking referrals via the SPOR (a CC role) and some are getting referrals from CCs. CPAO are recruited for their specialist physical activity knowledge, this brings about a question of whether they have the skills to support individuals (e.g., supporting people who have poor mental health or people who may be at risk).</p> <p>There are limited relationship/ joint working between CPAO and community connectors.</p> <p>A lot of work has been done to understand the roles of builders and CPAOs and how they differ and how they work together- this is clearer now. CPAO and community builder team have good relationships now</p> <p>An identified difficulty with this role, it's a balance of galvanizing people into action and not 'doing to' or 'for'. It has been hard to truly take an ABCD approach to creating more opportunities for physical activity. A lot of energy is needed to work alongside people to get things of the ground and people then don't really want to formally volunteer to take on the managing of a whole group/ club. Then the activity falls down/ doesn't happen or needs far greater input from the CPAO.</p> | <p>Not sure how well CLOG is being used by CPAO, this needs further exploration.</p> <p>Exeter City Council Corporate Plan specifically states it will <i>Increase connections for people in communities to access local activities on their doorsteps through working with Wellbeing Community Physical Activity Organiser team.</i></p> <p>An opportunity that features quite heavily through this reviews feedback is much greater use of volunteers in the community is needed to increase activity, provide company etc but volunteering really needs to be reframed and made less formal.</p> <p>There is clearly a role for WE to play in that.</p> |

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| | CPAO also get some referrals from the Live and Move team, and through the ECFC website. | |
| Referrals | <p>Pre pandemic referrals from Primary care were high, during the pandemic and now referrals from GP practices have reduced considerably. (See below for reasons for this decline).</p> <p>As both a consequence of this decline, the pandemic (ECC Customer Service Team) and changes in funding, referral routes have widened a great deal For Referrers Wellbeing Exeter Exeter and the WE team are working towards self-referral.</p> <p>Generally, there is a clearer understanding of the right referral for WE, when a referral it's not right these referrals are being dealt with efficiently.</p> <p>Family referrals tend to be for parents struggling with their children's anxiety/ autism or when parents have poor mental health and connectors become an advocate for parents. Without WE - problems would escalate, families would be lost out of the systems and unsupported with safeguarding issues.</p> <p>Family referrals are high compared to other age groups and there is only 50 hours of connector time and they are always at capacity 17-19 families and currently have a waiting list.</p> <p>Adult referrals tend to mostly be people in their 50s and 60s who are lonely and isolated and have no family. Community activities have stopped for them and people have lost friends.</p> <p>Young people referrals are mostly 11-16 year olds who are very anxious. There are also people referred who have speech and language needs or Are refusing to go to school or dropping out of education post 16. Self-referrals for YP would be great advantage these could be driven by parents too as this group weren't coming through Primary care referrals any post pandemic.</p> <p>Almost everyone who is referred has high anxiety levels.</p> <p>WE doesn't have a commissioning relationship with the CMHT but there is a short term pilot in place to look at the benefits picking up referrals</p> | <p>Self-referrals are certainly a route to supporting people to feel more in control of their lives, it fits the personalised care and prevention agendas.</p> <p>However, the opening up of referral routes does not appear to be something that commissioners are aware of. Given the current funding mechanisms it is imperative that commissioners are brought up-to-date as soon possible.</p> <p>Universal referral routes need to be agreed with commissioners as this will significantly change the focus of Wellbeing Exeter: consideration needs to be carefully given to the role WE should/could play in reducing inequalities</p> <p>Another issue with opening up referral routes is around capturing data. See Evaluation data section for more information but WE maintained referrals coming from Primary Care only (with a few small pilot exceptions) because of the collection of data using NHS numbers to map health and social usage pre and post referral.</p> <p>These new referral routes do not allow for this information to be collated so these referrals will not be included in the One Devon dataset.</p> <p>Conversations will the Mental Health Alliance and DPT need be brought into the Commissioning Board.</p> <p>See funding.</p> |

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| | <p>from CMHT through the One Mental Health Team approach. Based on the pilot outcomes there are conversation of joint funding via Mental Health Alliance going forward.</p> | |
| Individual wellbeing and system change | <p>Community Connectors (CC) have 2 roles - individual support and strategic change through a feedback loop/ solution focused approach. For example; taking on the city's issues- i.e. transport and what can we do about them and support the two way flow of information to statutory bodies.</p> <p>It is very clear that senior leaders would welcome the opportunity for feedback about what's going on for people in communities.</p> <p>Only one interviewee felt that individual support more important than building capacity in communities.</p> | <p>Although a lot of this feedback/ data is written in reports/WE magazine more formal opportunities should be created to share people's experiences with a view to making a difference to people's lives through making changes to services or creating opportunities.</p> |
| Working with GP/PCNs | <p>Relationships with Primary Care have changed following the pandemic and the creation of Primary Care Networks. 88% of referrals last year 2021-2022, were still from practices but it's not consistent and despite best effort the WE team aren't able to keep practices up to date.</p> <p>Previously the coordinator and connectors had regular and good relationships and a lot of two-way contact with the majority of practices (there were always one or two that WE struggled to get in touch with / attend meetings with).</p> <p>During the pandemic connectors were no longer able to attend core groups / virtual groups or drop in leaflets within Primary Care these relationships/connections have been eroded.</p> <p>Changes in connectors -Westbank and Age UK left the partnerships and individual relationships were lost.</p> <p>Practices were also forming PCNs and their energies were going into creating them.</p> <p>Over the last year, WE have made multiple attempts to catch up, go over annual GP reports, update at team meetings on new offers and remind practices how WE can support patients, there has been some successful engagement with:</p> <ol style="list-style-type: none"> 1. Topsham Practice Nurses | <p>Despite the communication difficulties with Primary Care, there is clearly a desire for WE to exist and work closely with PCN Health and Wellbeing Teams. There is clear recognition that WE is not just a social prescribing programme but one that successfully builds community capacity; it is acknowledged by PCNs that you can't have social prescribing without effective community infrastructure.</p> <p>This relationship and opportunity need to be explored in more detail but in brief WE could create a network for all social prescribers (EG. Bi-monthly group) to share knowledge and learning and also be a bridge between PCNs and communities.</p> <p>A number of interviewees raised geographic boundaries and expressed a view that they would be interested in a model and support wider than Exeter particularly with the Eastern Locality Care Partnership area. This should be explored.</p> |

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| | <ol style="list-style-type: none"> 2. Ide Lane – nurses and Practice Manager and Team. 3. Pinhoe – one GP & wider team & Practice Manager. 4. Student Health Centre – looking at better referral pathways by including Wellbeing Service 5. Wonford Practice (new Practice Manager) <p>WE used to also run a SP workshop at the RD&E for Trainee GPs via Dr Fox but in 2021 that stopped.</p> <p>There have been different degrees of interaction with PCNs. Over the last two years PCNs have created their own Health and Wellbeing Teams- these are different in each PCN- the biggest being 18 team members.</p> <p>One interviewee highlighted that: <i>PCNs are very under pressure ‘they’ve gone back into the trenches fighting fires’ and GPs are turned into business managers.</i></p> <p>They are building a team around them, from the front line, it’s all about control. PCNs like having people in the practices, meeting face-to-face who can record updates/ progress on the patient record and GPs can easily ask Health and Wellbeing teams about progress/ updates.</p> <p>Health and Wellbeing Team link workers do have a very different role to community connectors, they will signpost, run groups and they are more connected in to the practice team and the patients. The team takes the pressure off GPs, they do try to de-medicalise and look outside of practice but not at the same level or the same way a community connector would. They are very different roles.</p> <p>Some practices within PCNs have been told not to refer to WE anymore, that all referrals should go to internal Wellbeing Teams. This is the reason that WE is no longer ‘considered as a resource from Primary Care’</p> <p>However, PCNs report that the Wellbeing Teams are often at capacity and need to be able to refer to WE.</p> | <p>The growth of villages around Exeter presents new opportunities too.</p> <p>One concern on the growth of PCN Wellbeing Teams is whether the same referral codes (on practice data systems) are being used for both referrals in house and to WE. This will cause a problem with knowing who to include in the One Devon dataset data and how outcomes can be attributed to WE or PCNs. This needs to be explored and discussed with public health.</p> |
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| | <p>There are a few GPs who regularly referral and advocate for WE but there are quite a few GP that do not even know that WE exists.</p> <p>Feedback about letters send out after closing a referral is that they are not very useful- that they don't give an update but just says we've seen them. If feedback is going to be sent it needs to be more detailed and individual. If it can't be, then there is little reason to send the letters.</p> <p>Feedback about how great it is for GPs to be able to access WE and all the associated community intelligence 'you don't have time to find out about it -when you're struggling to help people move on with their lives'.</p> <p>Westbank practice are not happy WE cannot go out and see people face to face beyond Exminster.</p> | |
| Working with others | <p>WE and Exeter Connect⁹ could be working much more closely together. Interviewees have commented that it isn't clear how they link up/ work together.</p> <p>Community builders have received net zero training in carbon literacy -working with Exeter City Futures. This specifically feature in ECCs Corporate Plan <i>Encourage and support Community Builders working with communities keen to address local and city challenges of Net Zero.</i></p> <p>As highlighted above there is much scope for WE to be part of bigger conversations going on in the city, offering intelligence and practical solutions to highlighted problems.</p> | <p>There are lots of reasons for WE and Exeter Connect to work more closely.</p> <p>Exeter City Futures are working on a business case a Community Energy project ion partnership with Wellbeing Exeter. ECC and Exeter Community Energy for the ECC Director JY.</p> <p>Bromley by Bow are providing energy advice as part of their work. A200-Annual-report-and-Financial-statements-2022-SV-LLP.pdf (bbbc.org.uk)</p> <p>Opportunities for this are explored above in terms of a forum for</p> |

⁹ Exeter Connect is a voluntary and community sector service funded by Exeter City Council, providing support and advice to help community groups in Exeter. [Exeter Connect](#)

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| | | talking about health and wellbeing but also a wider agenda. |
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Theme 3 Evaluation

| Listening/ learning | Reflection and action |
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| <p>The WE grant agreement sets out a development plan for WE that includes a review of evaluation.</p> <p>There is a working group (DCF/ Coordination team/ GP Clinical support) looking at evaluation.</p> <p>This includes working with public health on the One Devon dataset data, with Exeter University on SROI and SNAP (Wellbeing questionnaires) and qualitative work across the work streams.</p> <p>After a very busy time; new development with the SE investment and then the pandemic -there has been little opportunity to pause and reflect. This is the time.</p> | <p>This review is well timed and it needs to be brought together alongside the visioning exercise.</p> <p>.</p> |
| <p>There was an existing Evaluation Framework and there used to be an Evaluation sub group (to the WE Steering Group)., This group appears to have been abandoned in favour evaluation meetings with the Sport England LDP Evaluation and Data team. The Sport England investment complicated matters significantly, data collection and processes were changed but this has not resulted in Sport England getting the evaluation they would like to see (see below).</p> | <p>Although the evaluation framework still existed it became lost with unclear ownership, it also became detached from the WE Steering Group.</p> |
| <p>It is very sad that WE has not had access to the promised and expected NHS tracking data over the last seven years.</p> <p>The was very early doors research using this data and the results were very promising, indicating that this model was attracting the right cohort to realise the aim of reducing demand on health and social care services.</p> | <p>Had the data been available all the way through the programme - WE could have been using trends/knowledge in make adjustments/ improvements/ developments.</p> <p>Through reconvening the Commissioning Group there is a clear opportunity to re-open this data set with support from Public Health Devon (see below).</p> |
| <p>Simon Chant from Public Health Devon was involved at the start of WE, he is now not as connected as he would like to be but he is working with the WE Evaluation group now.</p> | <p>Consider inviting Simon to be a part of the new commissioning or Governance arrangements</p> |
| <p>The One Devon Dataset is now available for extraction of data relating to people who have been referred to WE and their health and social care use. Only 30% of Exeter GP practices have signed up to share their data. It is thought that GP practices probably will sign up but they are weighing up the potential impact vs the risk (which will be mitigated).</p> <p>The WE team are working with Public Health to make this happen.</p> | <p>30% robust data will be much better than nothing, the limited data will provide a snapshot.</p> |

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| <p>NHS/DCC commissions and stakeholders are very clear regarding any future funding. Are the savings to the NHS quantifiable?</p> <p>They are very interested in the potential NHS data tracking and how WE can report in a more robust way.</p> <p>How is WE preventing anything (bean counting) “WE needs to better communicate its impact on the health and social care sector”</p> | <p>One Northern Devon has invested in software that will use their existing data to create more identifiable data for prevention- to evidence value for money. It might be useful to understand what this software is and what data it provides.</p> <p>There are a number of social prescribing programmes that are producing data claiming prevention and impact on health and social care. However, caution needs to be taken with attributions between cause and effect and comparing schemes which are very different in nature Here are some examples;</p> <ul style="list-style-type: none"> • Health Connections Mendip (Frome): 17% fall in hospital admissions over a 3-year period and 21% fall in healthcare costs compared • Focussed Care Greater Manchester: 50% reduction in ED attendances • Rotherham: 20% reduction in NHS system costs and ROI >150% over 3y • West London / Bristol (WellSpring): £2.80-2.90 social value per £1.00 invested • Doncaster: >50% reduction in GP visits for social prescribing cohort • Airedale 29% reduction in the rate of GP attendances and a 52% reduction in the rate of Emergency Department attendances. <p>(The quality and credibility of this data has not been reviewed by the reviewer.)</p> |
| <p>More data driven approach to needs is needed and ‘the money will follow’</p> <p>Useful data identified;</p> <ul style="list-style-type: none"> • NHS data (as above) • health inequalities data • the joint strategy needs assessment | <p>Clarity about what current funders think WE is crucial to establish the right data collection and outcomes to be measured from both quantitative and qualitative sources.</p> |

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| <ul style="list-style-type: none"> • WE dashboards • WE partners’ data i.e., YMCA have lots of in-house data about what YP are facing • Population health management not really got off the ground -pockets of good working examples. • CAB data | |
| <p>Current reporting provides what is expected in the agreement but everyone is clear that it needs to be more robust and quantifiable. Some comments on reports;</p> <ul style="list-style-type: none"> • Interesting reports but not enough robust data • Data doesn't tell the story of prevention • Stories are not enough-need hard facts • unclear about reporting • Annual summary was not very in depth • Qualitative report is dry, nice stories but what about the impact • Reports do not look very professional – “a bit clip art” • Some SROI would be good • Not all partners are involved in reporting • Not sure how all the information is processed • Lovely stories but is it moving the dial? I can't take stories to the bank • reporting should be shared with all delivery partners before it is sent out • would like to know how much WE are in identified LSOAs • Quantitative Data does not focus on outcomes | <p>The shortfalls in evaluation data have previously been identified and this will be addressed in a new evaluation plan.</p> |
| <p>Current reports are good but not they are not being shared widely enough; they are not getting to the right people.</p> | <p>This is covered in the strategic influence section -as part of the visioning exercise, the WE Commissioning Board need to be very clear about who needs to know about WE.</p> |
| <p>Many people talked about developing relationships with Exeter University and this is already underway. Suggested opportunities;</p> <ul style="list-style-type: none"> • Relationships with PHD students for example on SROI • University Innovation hubs • Exeter living lab? • A collaboration with RDUH | <p>Robust research carried out by the University could result in much bigger opportunities to access funding both nationally and internationally and would provide opportunities for research to be presented globally.</p> |
| <p>A small minority of people commented that we know that WE is the right thing to do and truly measuring the value is really hard. They raised the question as to whether we really do need to do it, they are not worried about hard metrics</p> <p>Some funders are very focused on numbers and outcomes and some are really interested in qualitative differences that are made, it’s as much about the journey, how the system changes and the learning along the way.</p> <p>.</p> | <p>There is a balance but WE needs to do both, with clarity on expectations, this becomes much easier. Having clarity of purpose and on the outcomes WE is aiming for is essential to secure funding from a wide range of funders who will want to know what return they are getting on their investment. Different funders may want different types of outcomes which is why the re-</p> |

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| | visioning work of the current commissioners is a critical next step. |
| WE should be a lens to look at inequalities and system change work. There doesn't seem to be local stories, how does it feel for X and how can we collectively change things for X. | This is picked up elsewhere in the report. This is happening but a process for doing this needs to be formalised. |
| WE need dedicated evaluation resource to; <ul style="list-style-type: none"> • Work alongside commissioners and WE partners to be clear on outcomes, outputs and indicators, • to bring together the expectations of all funders, partners and local data • to work with others (university, public health) • to analyse all of data WE collates -there is so much data an in-depth analysis of SNAP (Wellbeing questionnaires), CLOG (referral database). • To agree new measures of social capital | Going forward there does need to be clearer leadership and ownership of WE evaluation. |

Theme 4 Communications

| Listening/ learning | Reflection and action |
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| <p>It is clear from every conversation that WE sits below some important radars, that not enough time has been invested in communications, there are missed opportunities to showcase WE and raising awareness locally and outside of Devon. "WE doesn't spread the love about how good it is"</p> <p>Other similar programmes have much louder communications and reporting and are more influential with the Local Care Partnership in comparison with WE.</p> <p>However, it was also suggested that there is a culture of programmes such as WE pulling up the drawbridge in their place. That is to say they get on with it and don't let other know about it.</p> | <p>There are plenty of stories to tell but as highlighted in the evaluation section, more robust data will bring more opportunities for showcasing. E.g., Presenting at the British lifestyle medicine events or the Royal College</p> <p>In the past WE has had national attention but this takes time and resource. Even without the further evaluation, there are awards, blogs, conferences, research that WE can be a part of with the identified resource to do so.</p> <p>Examples: Personalised care awards Kings Fund Podcast</p> |
| <p>A number of people felt WE communications lacked direction, drive and ambition.</p> <p>There is a tension with WE communications that there isn't recognition of the contribution of everyone involved.</p> | <p>The WE Development Plan states that there will be a review of how the programme communicates and engages internally and externally.</p> <p>An outcome of the comms review should be to develop a framework for involving all partners in comms and set up a central place to collate evidence. This issue links into the proposed reconvening of the Commissioning Board.</p> |

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| <p>The WE branding changed, many stakeholders didn't feel consulted.</p> | |
| <p>Communication lines do not always feel open to all, with DCF taking a programme management role linking WE partners to Exeter City Council and other commissioners. Some partners feel their voice is not always heard.</p> | <p>This will form part of the discussions around the new entity.</p> |
| <p>Most people feel WE has a strong brand in Exeter and identity, that people know it.</p> | <p>Over the last seven years a lot of work has been done to pull people together under a common brand.</p> |
| <p>There were a number of comments about the changed WE website;</p> <ul style="list-style-type: none"> • doesn't explain how it works/ what WE is- there is no roadmap • Needs to have a wider voice -sounds like an individual voice • Website doesn't tell the story of WE -we're too busy to tell the story especially in Covid • It needs to tell the story of prevention • Has lost the ownership and accessibility of the predecessor sight • Only one person thought the website is great | <p>It was generally agreed that there isn't enough information on the website -no linked to learning reports etc, given that it is relatively new, it is perhaps not populated yet. This will need to form part of the comms review.</p> <p>Some of the links from the website also need to be reviewed. E.g., Links to the work of the builders takes you to the ECI website which is potentially confusing for a variety of reason but specifically because the bottom of the page refers to funding that related to ECI not WE.</p> <p>The old website is still available to access Wellbeing Exeter // Community Building but parts have been replaced. This needs to be reviewed.</p> <p>Links to the WE website from the ECC website were broken (due to the new website). This is now resolved but it would be worth checking with partner agencies/ referrers that links still work.</p> |
| <p>There is no dedicated resource for communications in WE, the website and social media are managed by the co-ordination team.</p> | <p>Resource should be considered in future developments.</p> |
| <p>Broader PR needed suitable for different audiences e.g. One Head of Commissioning doesn't know about WE.</p> | <p>See evaluation re mapping who? And then appropriate briefings can be agreed in terms of content, who will send them and who is responsible for communications with different audiences.</p> |
| <p>There is a monthly mail out that is shared with 700-800 people each month Wellbeing Exeter Monthly Mail out - Oct/Nov 2022 (mailchi.mp)</p> <p>There is also a quarterly magazine.</p> | <p>The mail out is a fabulous resource which people really value but it doesn't appear to be recognised for the asset it is.</p> <p>Both documents need to be explained in a new Comms strategy.</p> |

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| <p>Many felt that WE should be more widely publicised. Suggesting:</p> <ul style="list-style-type: none"> • Link with Exeter College more • That Inclusive Exeter communications relies on word of mouth and Facebook (some people use email and phone but not many) but they would like to be able 'to paint the town red' with what WE offers. • There should be more advertising to the general public • assemblies in schools | <p>It has never been necessary to promote WE to the public, as the only way people who access WE was through Primary Care -directing people to a GP practice in order to access WE seems counter intuitive to the original aims of the programme.</p> <p>This needs to form part of the next steps. Alongside agreement about vision, future referral routes and funding.</p> |
| <p>WE does not appear to be at every table it needs to be for example being represented at the Eastern LCP at a strategic level.</p> | <p>See strategic leadership This needs to be mapped at the next Commissioning Board meeting.</p> |
| <p>There should be more investment in accessibility. The website does not have an accessible toolbar and more needs to be done in terms of translating documents.</p> | |
| <p>There is currently no platform for citizen engagement in terms of what is offered by community connectors.</p> | <p>There needs to be a feedback mechanism here.</p> |
| <p>Data sharing, with the increase of referral routes, mechanisms for sharing data are reliant on individual consent not data sharing agreements between organisations.</p> | <p>It is suggested that data sharing and protection are reviewed as is good practice every six months.</p> |

Appendix 5

Considerations for creating a sustainable entity for Wellbeing Exeter.

There is certainly appetite for transition of Wellbeing Exeter into a new entity once a potential sustainable investment plan is in place. The following points are elements to consider in the creation of a new entity that were identified in the interviews, research and workshops.

Reasons to do it

| Identified issue | How a new entity will help to resolve |
|--|---|
| Governance, leadership and decision-making processes | The design and development of a new entity will be clarifying; good governance is essential for the success of any organisation. This process will clarify roles and responsibilities for all. It is an opportunity to collectively review strategy and vision. |
| Seeking Investment | Wellbeing Exeter is unlikely to be predominately funded by statutory agencies going forward. As a social enterprise, funding applications to charitable sources will be more straightforward. New avenues will open up. |
| Collaboration and trust across all alliance partners/ sectors not just the WE partners | Collaborative model which includes statutory as well as voluntary and private sectors would be ideal |
| A platform for sharing knowledge and learning | Be rooted in place shaping and clear about the how Wellbeing Exeter can play its part in supporting health and wellbeing across Exeter with a wider range of stakeholders. |
| Communications and marketing | A new independent organisation to be designed with communications, engagement and collaboration in its DNA |
| Evaluation and monitoring | Clarity of vision and mission; knowing what “good” looks like and understanding what it can deliver for investors/shareholders/trustees in terms of social capital and outcomes |
| More community involvement | Finding ways to build this into the design |

Consideration will need to be given to;

- the relationships between this new organisation and existing commissioners
- who will sit on the Board, how is the collective responsibility shared across sectors and organisations?
- the type of organisation that is most fit for purpose for WE, that is likely to attract new funding/ investment (whether that be grants or loans, national government (big programmes such as the share prosperity, innovate UK). There are examples of organisations similar to Wellbeing Exeter who have adopted a range of models, see example models below.
 - Community Interest Company (CIC) limited by guarantee or shares.
 - A registered charity and company limited by guarantee or shares.
 - A registered Community Benefit
- the scope of the new organisation and its function -what will it deliver and what will it work with partners to deliver? Is it a central function with direct commissioning to organisations or does it host all roles. If not, will roles continue to be hosted within other organisations? If so, what does hosting look like?

- Financially sustainability in the future may include offering a range of services including a network for social prescribing, volunteering support, facilitating new solutions, holding collective community conversations, as a health and wellbeing consultancy etc

Example models.

Wellbeing Enterprises is a CIC limited by shares

[The Wellbeing Project now known as Wellbeing Enterprises - Case study - GOV.UK \(www.gov.uk\)](#) and [Home | Wellbeing Enterprises](#)

Ways to Wellness is a registered charity and company limited by shares

[How is Ways to Wellness set up? | About Ways to Wellness | Ways to Wellness](#)

The Active Wellbeing Society is a registered Community Benefit Society

[About us – The Active Wellbeing Society \(theaws.co.uk\)](#)

Bromley by Bow Centre is a registered charity

[About - Bromley by Bow Centre \(bbbc.org.uk\)](#)

Together Co is a registered charity and company limited by guarantee

[Befriending Support & Schemes Sussex - Together Co](#)

Wellbeing Exeter Strategic Development Review



Sarah Yelland

February 2023

Review commissioned by Exeter City Council.

Exeter City Council

Exeter Community Grants Programme Review

Internal Report

December 2023

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Exeter Community Grants Programme Review

December 2023

Executive Summary

The Exeter Community Grants programme was agreed in July 2019 following extensive listening and consultation. Stakeholder and community feedback was taken into account and the following framework was implemented in December 2019.

1. Establishment of a grant funding approach that will maximise the value of the council's spending and ensure the sustainability of community groups.
2. A balance of awarding grants with contracts for more strategic services.
3. A clear 'bottom up' approach to community development: Asset Based Community Development.
4. Good governance that recognises the specific accountability of elected members but enables the Council and community to decide on priorities together.

On adopting the new policy, Council agreed to a review in 3 years, this review has been postponed due to Covid and is now being undertaken to assess the impact of the programme, identify future priorities and funding strategies as part of the annual Medium Term Financial Planning (MTFP) cycle.

The total spent on grants during the period 2019/2023 was £882,979 through 599 grants.

| Amount awarded Grant Type | 19/20 | 20/21 | 21/2 | 22/23 | Total | Nos |
|------------------------------|-----------------|-----------------|-----------------|-----------------|-----------------|------------|
| Community Building Grant | £42,000 | £15,000 | £15,000 | £17,000 | £89,000 | 19 |
| Covid Community Action Fund | | £118,935 | | | £118,935 | 90 |
| Large Grant | | | £19,600 | £59,100 | £78,700 | 12 |
| Small Grant | £22,185 | £9,700 | £17,500 | £44,815 | £94,200 | 52 |
| Strategic Grant | £180,000 | | £161,414 | | £341,414 | 8 |
| Ward Grant | £40,634 | £29,171 | £46,074 | £35,012 | £150,890 | 398 |
| Warm Spaces | | | | £9,840 | £9,840 | 20 |
| Grand Total | £284,819 | £172,805 | £259,588 | £165,767 | £882,979 | 599 |

The ECC grants programme has injected over £880,000 into the community over the last 4 years, this is a significant sum for the Council, but it is 0.6% of all the income received by charities in the City. The National Council for Voluntary Organisations (NCVO) reports that in 2019/20 Exeter had 360 registered charities in the city with a combined annual income of £127.25 million. This ranks Exeter in the top quartile of all England's local authorities in terms of the amount of charitable funding secured by charities registered within the city.

Key Findings

Community Grants

1. The majority of all available funding has been spent on buildings and building renovations in particular. With 8 building renovation projects consuming 30% of all funding.
2. Priority Neighbourhoods are not getting a higher share of the money or even an equal share.

3. There are currently no restrictions on the number of grants an organisation can apply for. Smaller, local community groups are potentially being disadvantaged with the majority of funding being awarded to larger, better resourced organisations. 59% of all available funding was awarded to 15 organisations.
4. Ward grants arguably have greatest potential reach - 17% of all funding into 67% (398) of all grants – compared to other grants, yet some Councillors, particularly in our most disadvantaged areas are not utilising the funds which are underspent year on year.
5. There is limited financial diligence undertaken prior to larger grants being awarded and some of the organisations may be able to secure funding from sources other than the Council and the funds better directed to projects more aligned with the Councils strategic aims and objectives.
6. With limited impact data it is difficult to assess what benefit the target communities have derived from this funding. However, the independent evaluation of Wellbeing Exeter highlights the effectiveness of capacity building work in communities which should encourage the Council to re-think its grant giving on evidence based approaches in order to make best use of the available funds.
7. Professional advice from the sector reminds us how important it is for organisations to demonstrate support for their activities through crowd and match funding, the Councils reluctance to take a more rigorous approach to both match and crowdfunding is potentially acting against its own aim of helping people to help themselves.

Contracts for Services

8. The Information Advice and Advocacy Contract has improved the working relationship between Citizen Advice Exeter (CAE), Council and other partner organisations, however it is unclear what benefits a contractual arrangement brings over the traditional grant model. The work of the CAE is of significant value and importance to the city however it's apparent that CAE is dependent on the Council for over 1/3 of its core funding: this is a high risk strategy for the CAE and the Council. Should members wish to support the work of a service provider like the CAE in future this will have to be funded from alternative sources other than the NH CIL.
9. The Council has been able to influence the development of Exeter Connect as a new service. There is activity data to indicate that there has been more collaboration across the VCSE sector in the city supported by Exeter Connects network co-ordination work and support for existing and emerging groups/organisations. This was evident by the collaboration that took place during the Covid pandemic when Exeter Connect supported the Exeter Community Wellbeing approach led by the City Council. There is also other significant VCSE co-ordination and networking taking place through Wellbeing Exeter delivered through CoLab Exeter.

Recommendations

Based on the report finding it is recommended that consideration should be given to the following:

1. A strategic needs assessment of community buildings should take place before any further investment is made in building projects.
2. More stringent targeting should take place alongside proactive promotion of small community grants which could be more effective if linked into the work of Wellbeing Exeter's locality based Community Builders.

3. Allocating grants to addressing specific issues faced predominately in priority neighbourhoods such as digital exclusion, where there is a strong evidence based on effective approaches that deliver measureable impacts.
4. Placing a cap on the amount of grant funding that can be awarded to any one organisation over a 3 year period and also on the number of applications that can be made in any financial year. (Though it is recognised, and would need to be taken into account, that some of the larger organisations (e.g. ECI) act as an umbrella organisation for smaller grass roots groups that are not constituted and do not have their own bank account).
5. The Executive to continue to allow for grant award decisions to be made by members on the cross party Grants Panel but to consider more pro-active monitoring of the deployment of ward grants and reducing the annual allocation to better reflect average annual spend over the last 4 years: £3,000 per ward.
6. That more robust due diligence, including ensuring the receipt of impact evaluation be undertaken prior to the award any grant in excess of £5,000.
7. A re-focus of grant giving on evidence based approaches to make best use of the available funds. This could be achieved by linking ECC community grants into the work of Wellbeing Exeter's locality based Community Builders which would ensure robust impact assessment in line with Wellbeing Exeter policy and practice.
8. Adopting a more explicit and positive approach to match funding.
9. Switching from an open annual rolling grant programmes to a more structured approach opening the grant fund for limited periods 2 or 3 times a year. This would be less resource intensive for staff and members and provides flexibility in managing fluctuations in NHCIL income in year without disrupting the grants programme.
10. When the Information, Advice and Advocacy Contract comes to an end in March 2024 it is not re-tendered. There is no evidence to show that this contract met the needs of development in the area so if Council wish to continue to support the work of the work of CAE in future years this will need to be from other sources of funding than the Neighbourhood CIL. The Council could consider, if funding is available, an annual grant to support the general work of CAE. The council can then make an annual decision as to whether to continue to grant fund the CAE depending on its priorities and the funding available. This is sustainable and best value approach for the Council and also provides clarity for the Trustees of CAE who are responsible for the financial wellbeing of their organisation.
11. As the long term future of Wellbeing Exeter is also under consideration it makes sense for the Council to consider embedding key aspects of the Exeter Connect contract into Wellbeing Exeter's future role. This makes financial and system sense and avoids duplication of effort and spend. If the Council decides to discontinue funding Wellbeing Exeter it could then reconsider if it is a priority for the Council to re-establish a VCSE support organisation in the city.

The Report

1. Context

- 1.1 The Community Grants Programme is now 5 years old; it was established after extensive listening, consultation and legal advice and was adopted by Council in July 2019. On adopting the policy Council agreed to a review in 3 years, this review has been postponed due to Covid and is now being undertaken to assess the impact of the programme, identify future priorities and funding strategies as part of the annual Medium Term Financial Planning (MTFP) cycle.
- 1.2 The objectives agreed for this internal review are to:
1. Complete an analysis of how all community grants have been spent; which organisations have been supported; what impacts the grants have had and in what ways have these met the Council's stated priorities.
 2. Complete an analysis of the activity, impacts and outcomes of the contract for Advice and Advocacy (Citizen Advice Exeter) and VCSE sector support (Exeter Connect) service delivered by Exeter Community Initiatives (ECI)
 3. A report on the findings will be completed to align with annual MTFP and business planning cycles.
 4. Feedback to Members the findings of the Strategic Review of Wellbeing Exeter.
 5. Work with members to assess if the principles and priorities are still relevant and if not how they need to change.
 6. Identify any need for statutory or other stakeholder engagement requirements.
- 1.3 This reports responds to objectives 1- 3 of the review and sets out how the Exeter Community Grants Programme and the underpinning fund have been used to deliver the programme agreed in 2019.
- 1.4 The review has been undertaken internally with contributions from officers within the Active and Healthy People Team. The process has consisted of analysis of internal, routine data gathered from the operation of the Community Grants Programme and contract performance reports.

2. Background

- 2.1 Following extensive public and stakeholder consultation and an independent review of its art and community grants programmes by Red Quadrant, Council agreed a new modernised approach in July 2019. Key aims were to improve transparency of decision making, simplify the application processes, align grant giving to Council priorities and devise an approach that will provide a sustainable funding pipeline for grants through the Neighbourhood Proportion of the Community Infrastructure Levy (NHCIL), the New Homes Bonus and funds other than the General Fund.
- 2.2 During 2019 the Council consulted on spending priorities with regard to the NHCIL as required under CIL Regulations 2010 (Regulation 59F) and the underpinning Planning Practice Guidance (PPG Paragraph 73)¹.

¹ This states that the Council should engage with communities where development has taken place and agree with them how best to spend the Neighbourhood Portion of the CIL. The Council may use the CIL to support the development of the relevant area (in this case the City itself) by funding the "provision, improvement, replacement, operation or maintenance of infrastructure; or anything else that is concerned with addressing the demands that development places on an area".

- 2.3 The feedback was taken into account and the following framework was implemented in 2019.
1. Establishment of a grant funding approach that will maximise the value of the council's spending and ensure the sustainability of community groups.
 2. A balance of awarding grants with contracts for more strategic services.
 3. A clear 'bottom up' approach to community development: Asset Based Community Development.
 4. Good governance that recognises the specific accountability of elected members but enables the Council and community to decide on priorities together.

3. The Grants Programme April 2019 to March 2023

3.1 Mobilisation Arrangements 2019/2020 The new policy agreed in July 2019 included specific bespoke interim arrangements for 30 organisations to give them time during 2019/20 to restructure their finances to reduce dependency on the Council. The Exeter Grant Programme and Exeter Fund were initially funded from the New Homes Bonus Community Reserve of £265,000 and the NHCIL of £800,000, creating a total fund of £1,065,000. See details of the programme and the funding in the table and chart in Appendix 1.

3.2 The policy clarified that the funding available would be reviewed annually to ensure there was sufficient income to meet commitments and create a buffer to mitigate against late CIL payments or other adjustments to the income predictions.

3.3 The policy allowed for any uncommitted but received funds, (in excess of commitments and minimum requirements for the forthcoming year), to be allocated once a year to a one off Strategic Grant Fund to support bespoke or larger projects. The policy also stipulated that where CIL funds had been used, applicants would need to demonstrate community support for their project and that it satisfies the provisions of Regulation 59F of the CIL Regulations 2010. There was an additional fund of £55,000 funded through Sport England and linked to the Delivery Pilot for 2019/2020 which has been reported on elsewhere so does not feature in this report.

3.4 Total Grant Spend in 2019/2020 This table shows the actual spend for the period 1st April 2019 to 31st March 2020. This includes transition funding and the awarding of 3 Strategic Grants totalling £180,000.

| Grant Type | Nos of awards | Amount £ |
|--------------------------|---------------|-----------------|
| Community Building Grant | 9 | £42,000 |
| Small Grant | 10 | £22,185 |
| Strategic Grant | 3 | £180,000 |
| Ward Grant | 122 | £40,634 |
| Grand Total | 144 | £284,819 |

3.5 Total Grant Spend in 2020/2021 This table shows the actual spend for the period 1st April 2020 to 31st March 2021. This year the programme included a new fund. The COVID-19 Community Action Fund was set up in March 2020 at the outset of the pandemic to help community groups and organisations as they stepped up to help those people most affected.

| Grant Type | Nos of awards | Amount £ |
|-----------------------------|---------------|-----------------|
| Community Building Grant | 3 | £15,000 |
| Covid Community Action Fund | 90 | £118,935 |
| Small Grant | 6 | £9,700 |
| Ward Grant | 62 | £29,171 |
| Grand Total | 161 | £172,805 |

3.6 Total Grant Spend in 2021/2022 The table shows the actual spend for the period 1st April 2021 to 31st March 2022. This includes award of 5 Strategic Grants totalling £161,414.

| Grant Type | Nos of awards | Amount £ |
|--------------------------|---------------|-----------------|
| Community Building Grant | 3 | £15,000 |
| Large Grant | 2 | £19,600 |
| Small Grant | 11 | £17,500 |
| Strategic Grant | 5 | £161,414 |
| Ward Grant | 103 | £46,074 |
| Grand Total | 124 | £259,588 |

3.7 Total Grant Spend in 2022/23 This table shows the actual spend for the period 1st April 2022 to 31st March 2023. This year funds were diverted to create a new Grant: the Warm Spaces Grant in response to the global issues that led to a hike in energy prices. The majority of these grants were one off payments of £500 to support community associations to offer warm spaces in community buildings for people to meet, and socialise.

| Grant Type | Nos of awards | Amount £ |
|--------------------------|---------------|-----------------|
| Community Building Grant | 4 | £17,000 |
| Large Grant | 10 | £59,100 |
| Small Grant | 25 | £44,815 |
| Ward Grant | 111 | £35,012 |
| Warm Spaces | 20 | £9,840 |
| Grand Total | 170 | £165,767 |

3.8 Community Building Grant Spend 2019/2023 The purpose of this fund was to act as a transitional fund to wean organisations who had been become dependent on the Council for rent grants prior to the new policy in 2019. Community Associations were able to apply for a three year grant towards the annual running costs of their community centre up to £5,000 per year. Associations could only apply for a maximum of 50% of their annual rent. Full details are in the table in Appendix 2. This programme was particularly impacted during COVID as activities went on-line and organisations were awarded grants from the COVID Community Action Fund and other central government business relief grants. Over time the transitional purpose of this grant has been lost and grants continued to be given after 21/22. In addition to the above grants a further grant was awarded outside of this programme to Ex Access for both 2022/23 and 2023/24 for a total value of £30,000.

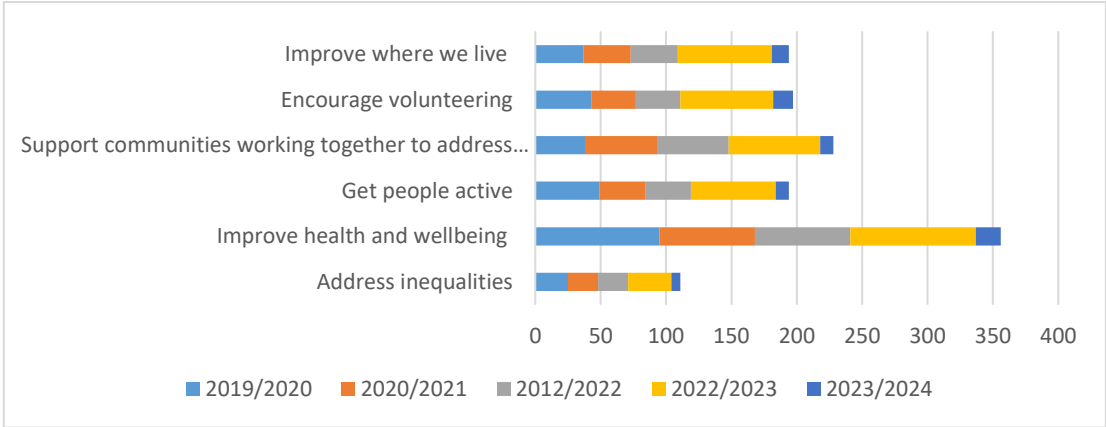
3.9 Large Grant Spend 2021/2023 This fund was originally established in 2019/20 with £110,000. Due to COVID the grant was not deployed until 2021/22. Voluntary and community groups were

able to apply for a grant of up to £30,000 with a minimum match funding of 50%. This fund will pay towards building or refurbishment costs or the purchase of equipment but cannot be used to fund every day running costs. Applicants needed to demonstrate community support for their project. 12 grants were awarded over the 2 years a set out in the table in Appendix 3.

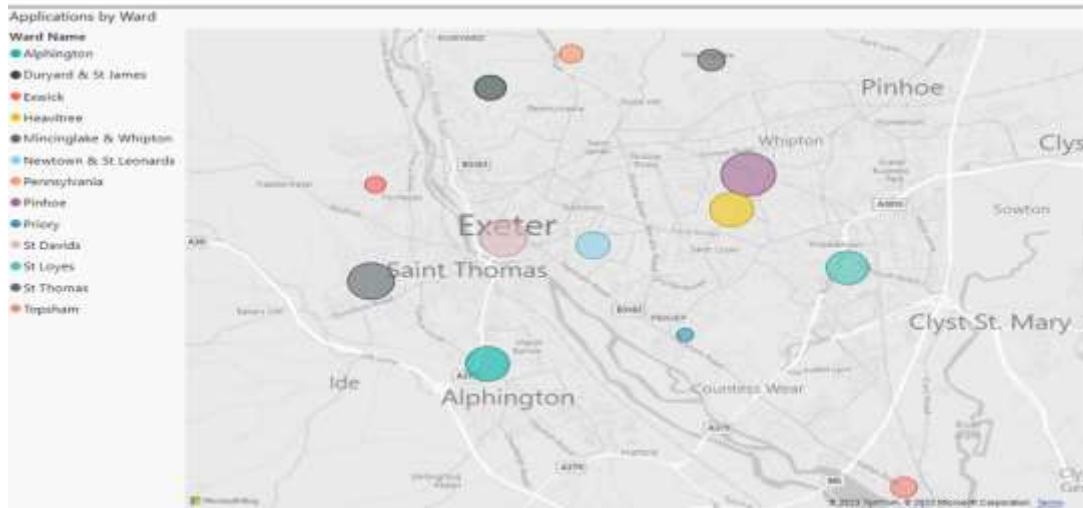
3.10 Small Grant Fund Spend 2019/2023 The Small Grants fund started in 2019 with £100,000. Voluntary and community groups were able to apply for a grant of up to £3,000 to support any community led initiative to support locally identified needs that tie in with the Council priorities. This fund could be used for putting on or running an event, festival or celebration or for a one-off purchase or repair of equipment. The fund cannot be used to fund every day running costs and applicants needed to demonstrate community support for their project. To be awarded a small grant the applicant would need to show that they had already raised a minimum of 20% match funding which could include volunteering hours. In total over the period 2019/2023 £94,000 was spent on small grants with 46 grant awards being made. Details are in Appendix 4.

3.11 Ward Grant Spend 2019/2023 A Ward Grant can support a community project, a local community festival, a local theatre production or a craft group. Examples of costs that could be supported include equipment or resources, publicity, materials, and refreshments. Ward grants are for one-off purchases or events and cannot be used for on-going running costs such as wages, utility bills; or rent or fees for facilitators on an ongoing basis etc. Community groups can apply for a maximum grant of £350 from their local ward Councillor. A total allocation of £230,000 was made during the period April 2019/March 2023 of which £150,000 was spent by the end of March 2023. Of the total funding allocated during this period 45% remained unspent. 398 grants were awarded and the vast majority of the 398 ward grants went to registered charities, Community Interest Companies and larger organised community groups. Groups had to be constituted to receive funds. (Some smaller groups applied under the umbrella of a larger organisation). Details in Appendix 5.

3.12 The graph below shows how the 6 Council priorities were most often addressed by applicants for ward grants. Note applicants were able to select more than one priority area within 1 grant application. Health and wellbeing was cited most often action to address inequalities least often. Improving health and wellbeing is the priority most addressed and addressing inequalities is the least.



3.13 The map shows the variation in the amount of grant across the wards: the larger the circle the higher the amount of the grant was awarded. There is widespread variation in spend in each locality despite each ward being allocated the same annual amount for ward grants



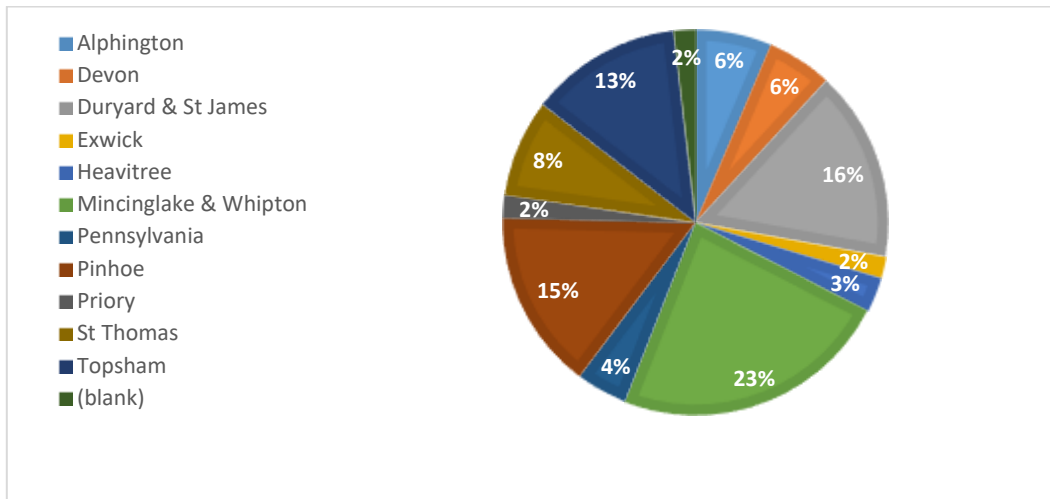
3.15 Covid Community Action Fund Spend 2020/2021 The fund was set up in 2021 by Exeter City Council and a generous £100,000 contribution from Exeter Chiefs Foundation. The initial fund offered up to £3,000 to community organisations who were facing a loss of income as a result of lockdown. Business Grant support became available from government in May 2020 at which point these £3,000 grants were stopped. The Fund stayed open to support groups and organisations with a one-off grant of up to £1,000 to support projects for community-led activities that aimed to:

- meet urgent needs within the community;
- cover transport costs for getting vital supplies to people isolated at home;
- help people to stay connected and informed, and to
- help people maintain and support mental health and wellbeing.

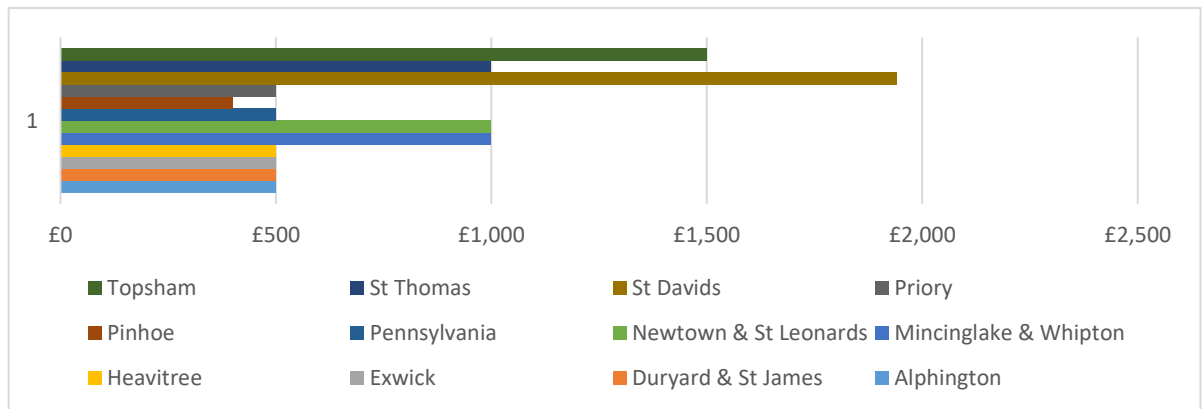
3.16 96 applications were received, of which 49 were for £1,000 or less. The remaining 47 were applications that requested between £1,000 and £3,000.

| £1,000 Grant | £3,000 Grant | Overall |
|--|---|---|
| <ul style="list-style-type: none"> • 49 applications received • 44 awarded (89.8%) • 5 declined (10.2%) | <ul style="list-style-type: none"> • 47 applications received • 28 awarded (59.57%) • 19 declined (40.43%) | <ul style="list-style-type: none"> • 96 applications • 90 awards =£118,935 • 76% of grants were for City-wide projects |

3.17 £118,935 was spent on 90 grants with 54% (£64,103) spent on city-wide groups/activities. The chart below show how the 46% spend on local community groups was spent across the 13 wards. This also shows that £3,000 was spent on Devon-wide projects and we did not record the data for one grant of £1,000.



3.18 Warm Spaces Grant Spend 2022/2023 This year funds were diverted to create a new Grant: the Warm Spaces Grant in response to the global issues that led to a hike in energy prices. The majority of these grants were one off payments of £500 to support community associations to offer warm spaces in community buildings for people to meet and socialise. In total £9,840 was spent on 20 organisations. The list of these organisations is in appendix 6. The chart below shows the distribution of funding across wards.



3.19 Strategic Fund Spend 2019/2023 The new policy allowed for any uncommitted but received funds, (in excess of commitments and minimum requirements for the forthcoming year), to be allocated once a year to a one off Strategic Grant Fund to support bespoke or larger projects. The table below shows the 8 strategic grants awarded. The amount awarded to these 8 organisations equals 39% of all available funding during the review period.

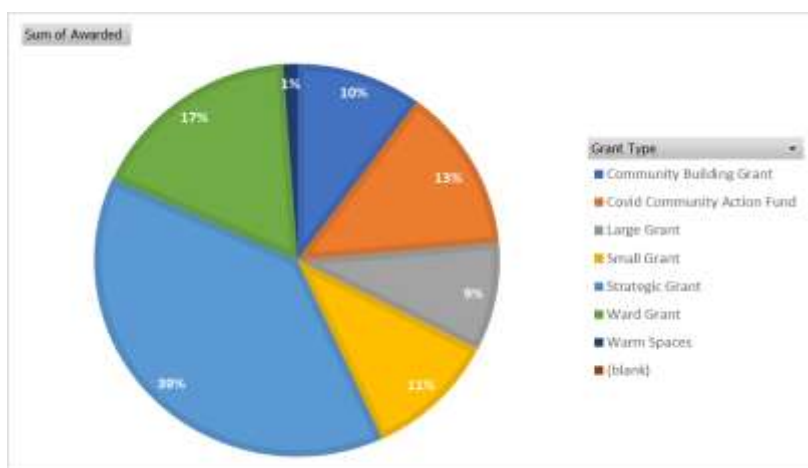
| Strategic Grant | Total |
|--|-----------------|
| Exeter Community Centre Trust Ltd (2019/2020) | 80,000 |
| Park Life Heavitree (2019/2020) | 70,000 |
| Exwick Community Association (2019/2020) | 60,000 |
| St. Boniface Church, Whipton (2021/2022) | 50,000 |
| Alphington Community Association (2021/2022) | 30,000 |
| St Sidwell Street Bakehouse and Cookery School (2021/2022) | 19,826 |
| Sylvania Community Stores and Café (2021/2022) | 19,000 |
| Positive Light Projects Creative Hub (2021/2022) | 12,588 |
| Grand Total | £341,414 |

4. Overview: All Grants

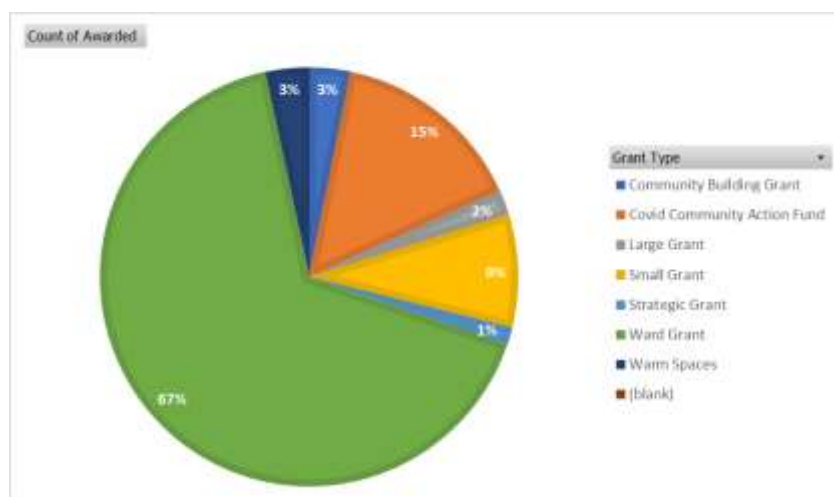
4.1 This table show the amount of grant awarded 2019 – 2023 by grant type. The total spent on grants during the period 2019/2023 was £882,979 through 599 grants.

| Amount awarded Grant Type | 19/20 | Nos | 20/21 | Nos | 21/2 | Nos | 22/23 | Nos | Total | Nos |
|------------------------------|-----------------|------------|-----------------|------------|-----------------|------------|-----------------|------------|-----------------|------------|
| Community Building Grant | £42,000 | 9 | £15,000 | 3 | £15,000 | 3 | £17,000 | 4 | £89,000 | 19 |
| Covid Community Action Fund | | | £118,935 | 90 | | | | | £118,935 | 90 |
| Large Grant | | | | | £19,600 | 2 | £59,100 | 10 | £78,700 | 12 |
| Small Grant | £22,185 | 10 | £9,700 | 6 | £17,500 | 11 | £44,815 | 25 | £94,200 | 52 |
| Strategic Grant | £180,000 | 3 | | | £161,414 | 5 | | | £341,414 | 8 |
| Ward Grant | £40,634 | 122 | £29,171 | 62 | £46,074 | 103 | £35,012 | 111 | £150,890 | 398 |
| Warm Spaces | | | | | | | £9,840 | 20 | £9,840 | 20 |
| Grand Total | £284,819 | 144 | £172,805 | 161 | £259,588 | 124 | £165,767 | 170 | £882,979 | 599 |

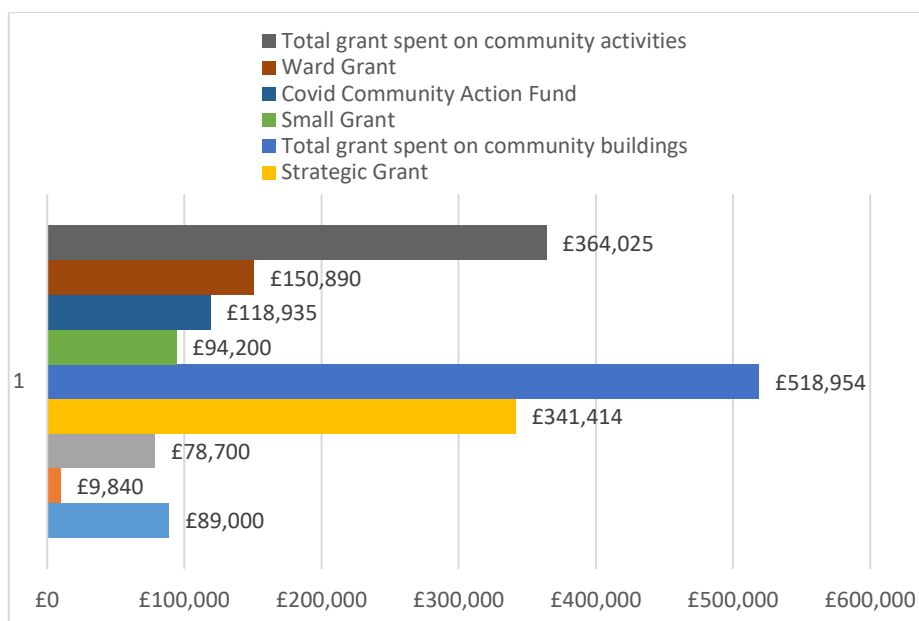
4.2 Between 2019 and 2023 39% of all available funds was spent on strategic grants and 17% of all available funds was spent on ward grants as shown in the chart below.



4.3 This next chart shows the percentage of grants by each grant type. 67% of all grants were from the ward grant fund and this consumed 17% of the money where as only 1% of all grants were supported by the Strategic Fund yet these grants consumed 39% of all the available funding.



4.4 The Strategic Fund, Large Grants Fund, Community Buildings Fund and the Warm Grants Fund awarded funding for community buildings, either for the development of buildings or their running costs. A total of £518,954 was spent on community buildings which is 59% of all available funding. The amounts are shown in the graph below.



4.5 There are no restrictions on the number of grants an organisation can apply for. This table shows the top ranking organisations in terms of the number of grants across all types they have received over the period. Some may have applied for more but been rejected: this data only relates to successful applications.

| Organisation | Nos | Organisation | Nos |
|-------------------------------------|-----|-------------------------------------|-----|
| Newtown Community Association | 15 | Park Life Heavitree | 6 |
| Interwoven Productions CIC | 13 | Polsloe Community Association | 6 |
| SOS Global | 11 | Exeter St James Community Trust Ltd | 6 |
| Freemovement UK CIC | 11 | 100 Club Community Group | 6 |
| Whipton Community Association | 9 | Exeter City Community Trust | 5 |
| Alphington Community Association | 8 | The Estuary League of Friends | 5 |
| Wonford Community & Learning Centre | 8 | Sylvania Community Stores and Café | 5 |
| Stoke Hill AFC | 8 | St Leonards Neighbourhood Assoc | 5 |
| Cowick Roots and Recreation | 8 | Digby Community Association | 5 |
| Inclusive Exeter CIC | 8 | Exeter Communities Together CIC | 5 |
| St Thomas Community Association | 7 | Pinhoe Community Centre | 5 |
| Heavitree Friendly Library | 7 | Isca Community Enterprises | 5 |

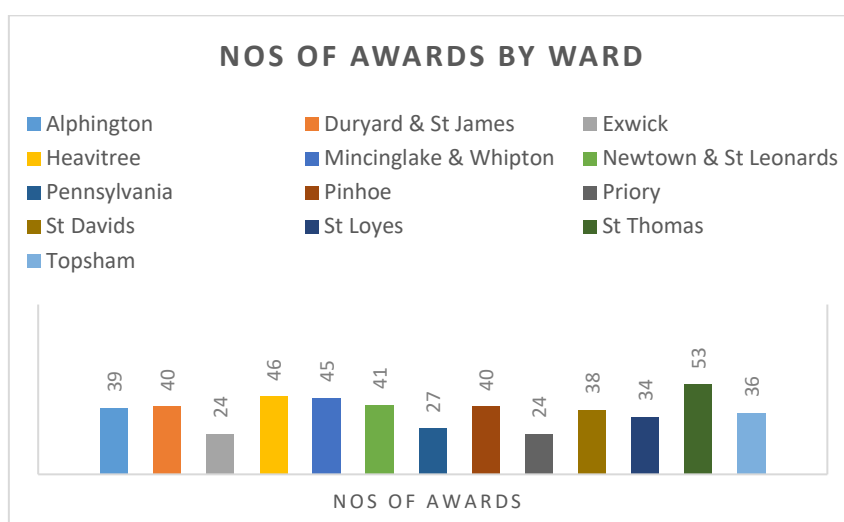
4.6 The table below lists the 15 organisation who received over £10,000 during this 4 year period. Between them, these 15 organisations had more than half of all the available funding.

| Organisation | 19/20 | 20/21 | 21/22 | 22/23 | Grand Total |
|-------------------------------------|---------|-------|---------|-------|-------------|
| Exeter Community Centre Trust Ltd | £80,000 | | £500 | | £80,500 |
| Park Life Heavitree | £73,500 | £600 | | £850 | £74,950 |
| Exwick Community Centre Improvement | | | £60,000 | | £60,000 |

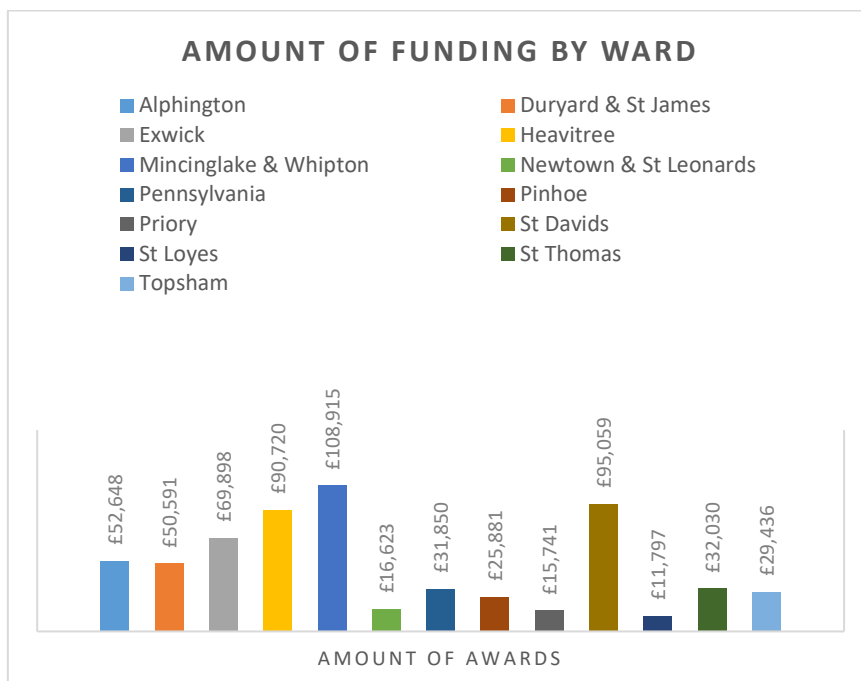
| | | | | | |
|--|-----------------|----------------|-----------------|----------------|-----------------|
| St. Boniface Church, Whipton | | | £50,000 | | £50,000 |
| Alphington Community Association | £35,000 | £1,500 | £1,000 | £650 | £38,150 |
| Positive Light Projects Creative Hub | | | £12,588 | £11,500 | £24,088 |
| Sylvania Community Stores & Café | | £500 | £19,500 | £350 | £20,350 |
| St Sidwell St Bakehouse & Cookery School | | | £19,826 | | £19,826 |
| Whipton Community Association | £500 | £3,000 | £1,000 | £10,350 | £14,850 |
| Isca Community Enterprises | | £5,000 | £5,000 | £4,350 | £14,350 |
| Magic Carpet | £2,810 | | £9,600 | | £12,410 |
| Exeter Scrapstore | £500 | | £10,500 | | £11,000 |
| St Katherine's Priory | | £6,000 | £5,000 | | £11,000 |
| St Sidwell's Community Centre | £5,500 | | | £5,000 | £10,500 |
| ExeAccess | | £5,000 | £5,000 | | £10,000 |
| Grand Total | £197,810 | £21,600 | £199,514 | £33,050 | £451,974 |

4.7 Of the 599 grants awarded, as far as we are able to tell from the information collected, 110 were for city wide organisations/activities and 2 (Covid Action Fund) were for Devon-wide activities. The remaining 497 were for local ward based organisations/activities. This is not an absolute number as some ward based organisation /activities will be open to those from a wider catchment area. Some data is more accurate than others about location, (e.g. ward grant data) but the intention here is to show that data by ward area as a key outcome for the policy, was to address inequalities which vary from ward to ward. It is estimated that around 80% of the grants and 60% of the available funds were awarded to local ward organisations /activities and 20% of the grants and 40% of the available funds were awarded to City Wide organisations/activities.

4.8 This graph shows the variation in the number of grants awarded to each ward with St Thomas at the top of the list with 53 and Exwick and Priory at the bottom with 24 grants. This data needs to be regarded with caution as organisations with a postcode in one ward may be using the funds for city-wide initiatives.



4.9 This graph shows the amount of money awarded to each local ward with Mincinglake and Whipton receiving the most: £108,915 and St Loyes receiving the least at £11,797. Again this data needs to be regarded with caution as organisations with a postcode in one ward may be using the funds for city-wide initiatives.



5. Impact Evaluation

- 5.1 The terms and conditions of receiving a grant required recipients to complete a simple impact evaluation form 6 weeks after their event had been completed and or the grant money spent, however in reality very few recipients complied.

6. Contracts for Services

6.1 The Independent Information Advice and Advocacy Contract

- 6.1.1 As set out in the 2019 policy this service was commissioned to address the demands of development by increasing access to good quality information and advice service for residents.

6.1.2 Citizens Advice Exeter (CAE) were awarded the contract in September 2019 through a competitive tendering process. The contract value was originally set at £200,000 pa and was initially awarded for the 36 month period October 2019 to September 2022 with an option for 24 month roll on. These roll on options have been taken up and the contract is due to end in March 2024 when the Council will be obliged to re-tender if it decides to continue to commission this service. As the council already had an existing contract with Homemaker SW to provide support to households referred by the Council for assistance with budgeting and money advice to maximise income, this was included in the new contract with CAE.

6.1.3 Mobilisation of the new service started in October 2020. The services offered by CAE are long standing in the City, with the Council having previously provided annual grants to support its work so the shift to a move from grants to contracts for services was intended to enable the Council to have more direct influence over the service areas provided by the CAE with this contract.

6.1.4 The Contract and Covid 19 2019/2021: with lockdown taking place in March 2020 CAE, like all service providers, shifted their model from face to face to on-line and telephone contact. CAB report that the telephone response rate increased during Covid as this was the main access

route for clients. Since the pandemic the volume of telephone calls has remained relatively high.

6.1.5 The revised model of more on-line and telephone contact are now hard wired into the post pandemic operating model. The pandemic impacted on outcomes for the contract in its first year as the service worked out the best way to deliver a service whilst protecting the wellbeing of staff and being particularly mindful of volunteer fatigue.

6.1.6 A positive outcome from Covid and the Exeter Community Wellbeing work is that CAE are working in closer partnership with other agencies in the city for example CAE now have a worker based in the Ukraine Café in Exeter one afternoon a week and the Foodbank one day per week. There is also an increased outreach presence and connectivity with other agencies such as Wellbeing Exeter, Exeter AGE UK, Inclusive Exeter and St Sidwell’s Community Centre.

6.1.7 CAE re-opened doors to drop-in in March 2022, and have remained open since this time. Post pandemic the number of calls fluctuated depending on the availability of government support for energy costs and Cost of Living payments. In 2021/22 numbers decreased as and when the government Cost of Living payments were made and Household Support Funds were available from local authorities. However CAE reported more clients in the ‘just about coping’ category, needing support with budgeting and managing finance. Calls about disability benefits and calls for income maximisation have increased, as have requests for fuel vouchers and foodbank vouchers.

6.1.8 In 2022/2023 CAE reduced its drop-in opening to 3 mornings per week as the majority of clients preferred to access the service on-line or by phone. The drop- in sessions focus on more vulnerable clients or those who are unable to access the service by other channels. Volunteer retention remains high.

6.1.9 The “Support for Ukraine Benefit worker” post started in June 2022. The post was created due to increasing demand from Ukrainian refugees attending drops in sessions. As most of the enquiries were about ‘money to live on’ and benefit entitlement there was a need to put a benefit worker in post to support them. CAE funded this post from reserves for the first few months and then ECC provided additional funding for a worker for 1 year, 1 day per week later increased to 2 days until December 2023.

6.1.10 The average annual value of the ECC Information and Advice Service contract to the CAE over the 5 years of its operation, is 41% of all its CAB running costs. This is arguably a high value contract for the CAE. The contract has not mobilised a new service or enhanced existing provision but has maintained general CAE service levels in existence at the time on the contract mobilisation, and in effect has replaced the previous grant funding received from the Council. The table below provides an overview of the contract funding.

| | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/4 |
|--|----------|----------|----------|----------|----------|
| Costs | £306,042 | £372,545 | £448,872 | £413,281 | £437,957 |
| ECC income | £162,064 | £200,000 | £200,000 | £200,000 | £200,000 |
| % of CAB costs covered by ECC contract | 41 | 38 | 29 | 33 | 32 |

6.1.11 The intention of this contract was for the Council to be able to influence the activity of the CAE and direct it to the priorities identified by the Council and to be able to ascertain the return on investment in terms of outcomes for individuals. The contract for this service sets out the Councils requirements for the outcomes it wished to achieve through this contract.

6.1.12 The contract performance data provided is mostly focused on activity and process measures. The table in Appendix 7 sets out some detail of all the performance measures within the contract. There are no externally validated outcome measures. For example the data highlights 6,744 “advice codes issued for benefit advice and income maximisation” but this does not indicate the number of people: but the number of times this type of advice was issued: an individual could have been coded as receiving this advice on numerous occasions. In 22/23 the provider reports £4.1 million of “potential income gained” but there is no data recording actual income gains by individuals.

6.2 The Voluntary and Community Sector Support Contract – Exeter Connect

6.2.1 As set out in the 2019 policy this service was commissioned to “Provide free, independent and professional practical support to existing and new community organisations in the city and help groups develop and become self-sustaining”. The service remit is to “Build capacity with a particular focus on the skills, knowledge and expertise of grass roots groups & organisations to improve their communities (both geographic and communities of interest). The service will promote quality of life, health and wellbeing, improved inclusivity and community connectivity across the city”.

6.2.3 Exeter Community Initiatives (ECI) were awarded the contract in December 2019 through a competitive tendering process. The contract value was originally set at a value £180,000 pa and was initially awarded for the 36 month period January 2020 to March 2022 with options for a 24 month roll on. Mobilisation of the new service, Exeter Connect, started in January 2020 but its launch was delayed by the Covid pandemic. In 2022 the contract was rolled on and now expires in March 2024. If the Council wishes to re-commission this type of service it will need to re-tender and for this to be a seamless transition the tendering process will need to commence in December 2023.

6.2.4 In broad term, over the lifespan of the contract, 15% of the contract value was spent on management costs and overheads, 75% on direct staff costs and 10% on programme delivery.

6.2.5 With lockdown taking place in March 2020 the mobilisation of the contract was suspended. However the available resources were used by ECI to support the City council in operating Exeter Community Wellbeing. This meant that the contract funding was instrumental in enabling the co-ordination and the delivery of several key elements of the Covid community response including:

1. Holding funds for un-constituted groups receiving grants for the Council to launch hyper local community responses to lock down.
2. Coordination of Local Area Teams providing single point of contact for any concerns, challenges or support that is needed.
3. Updating the Volunteer and Local Area Team Information Packs
4. Supporting community organisations who came to the Council for help and for those applying for Council grants
5. Daily processing of applications from volunteers and linking them with Local Area Teams or Community Builders
6. Maintaining the Knowledge Hub including pooling information into one Food Deliveries and Free Food Directory.

6.2.6 As the impact of the pandemic eased and lockdowns ended, ECI were able to extend their Exeter Connect offer, with particular emphasis on people’s confidence in re-entering community

spaces and whilst supporting training and events taking place online they also supported organisation to make a return to face to face working.

6.2.7 In 2022 the decision was made to extend the contract for an additional 12 months with the requirement to focus on:

1. Delivering 'business as usual' priorities and outcomes as specified in the contract
2. Garnering a better understanding the needs of the community and voluntary sector through the provision of events with local VCSE organisations
3. Supporting development of VCSE networks including : Community Food Network, Digital Inclusion, Community Associations/Centres, place based capacity building in target communities e.g., Beacon Heath, Wonford, St Thomas
4. Continuing to provide capacity building support to key organisations, charities and groups in the city through individual consultation, on line training and group based initiatives.
5. Assisting the Council in engaging with the VCSE on key priorities and strategic programmes, including raising awareness and engagement with the consultation for the Local Plan and supporting communities to engage with the Net Zero agenda through Exeter City Futures
6. Capacity building with key VCSE networks and organisations in Wonford to support the future management model for the Wonford Community Wellbeing Hub

6.2.8 Key deliverables of this work included the development and facilitation of community networks such as:

- Beacon Heath Working Together (9 organisations*)
- St Thomas Working Together (11 organisations)
- Pinhoe Working Together (9 organisations)
- Community Food Network (8 organisations)
- Community Centres Network (15 organisations) incorporating Digital Inclusion
- Social Enterprise Network (13 organisations)
- Ukrainian VCSE Network (6 Organisations)

** More organisations are invited and receive minutes.*

6.2.9 In 2023 the focus was realigned again, in response to the war in Ukraine and the subsequent hike in global energy costs and the cost of living crisis. Much of this has been through the co-ordination of the VCSE Homes for Ukraine network and administering NHS Cost of Living Grants and through the work of the Community Centres and Community Food Networks working closely with the Council and especially Wellbeing Exeter. Exeter Connect continued to support Wonford Community Learning Centre Trustee Board within the context of the Council's proposals for developing a community Wellbeing Hub at the current Leisure Centre and community centre site. Exeter Connect commissioned Locality to produce a report for the stakeholders that looked at different options for future management of the site that had a strong community lead.

6.2.10 The Council agreed to a further roll on of a reduced contract (£60,000) to cover the financial year 2023/24. The focus in this final period is to continue to provide expert advice and support service for the organisational development needs of individual groups and VCSE organisations, information and training and access the networks and opportunities for collaboration within the sector. The Exeter Connect service will also offer support for the development of Wonford Community Learning Centre Trustee Board.

6.2.11 The value of the ECC Exeter Connect contract to ECI over the 5 years of its operation is @ £600,000. The table below provides an overview of the contract funding.

| | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
|------------|---------|----------|-----------|----------|---------|
| ECC income | £58,976 | £180,000 | £ 180,000 | £180,000 | £60,000 |

6.2.12 The contract for this service sets out the Councils requirements for the outcomes it wished to achieve through this contract. In reality the performance data provided is mostly focused on activity and process measures. The table in Appendix 8 sets out some detail of all the performance measures within the contract. There are no externally validated outcome measures. Exeter Connect have played a key role in facilitating a number of important VCSE networks in the City but there is no independent evaluation of the effectiveness of these networks.

7. Commentary on Grants Programme

7.1 The ECC grants programme has injected over £850,000 of grants into the community over the last 4 years, this is a significant sum for the Council, but it is 0.6% of all the income received by charities in the City. The National Council for Voluntary Organisations (NCVO) reports that in 2019/20 Exeter had 360 registered charities in the city with a combined annual income of £127.25 million. This ranks Exeter in the top quartile of all England's local authorities in terms of the amount of charitable funding secured by charities registered within the city. As the table below shows, within Devon, Exeter ranks as the area with the second highest income into registered charities with Plymouth at the number one spot with 430 charities with an annual income in 2012/20 of £228.59 million. It is important to bear in mind the vast resources of the VCSE sector and the need for the council's contribution to show tangible benefits in terms of outcomes.

| Local Authority Area | Number of registered charities | Millions |
|-----------------------------|--------------------------------|----------|
| Plymouth | 430 | £128.59 |
| Exeter | 360 | £127.25 |
| East Devon | 572 | £88.79 |
| North Devon | 327 | £57.59 |
| Torbay | 251 | £53.17 |
| Teignbridge | 474 | £43.89 |
| South Hams | 463 | £36.97 |
| Mid Devon | 396 | £19.44 |
| Torridge | 258 | £18.80 |
| Sedgemoor | 338 | £15.88 |
| <i>NCVO Almanac 2019/20</i> | | |

7.2 As well as funding the grants programme the Council also utilises NHCIL to fund its contribution to Wellbeing Exeter (£270,000 in 23/24 towards an annual budget of @ £850,000). Over the last 10 years the Council and its strategic partners (Devon County Council, Sport England, Devon Community Foundation and NHS Primary Care Networks) have jointly invested in developing asset based community development in the city through Wellbeing Exeter. Considerable knowledge has been built up about the difference this strategic and long term approach can make. For example in 2022 Sport England's, internationally regarded annual Active Lives Survey, highlighted that Exeter showed a significant bounce back in activity levels post COVID, in comparison with the rest of England which continued to show a decline.

- 7.3 In 2023 the local Active Lives Survey shows that compared to all previous years, fewer people in our priority areas reported themselves as inactive and a larger proportion suggested they did some light activity compared to both 2019 and 2022. This is significant evidence that the targeted, asset and place based approach, delivered through the Wellbeing Exeter partners, is having a long term and positive impact on people in the city. Getting those who are inactive to start to move more is the hardest change to effect at population level and the one that is most likely to have lasting improvements in population health gain and reducing inequalities. In addition independent research undertaken by Public Health at University of Exeter shows a significant mean increases in wellbeing, the development of relationships and community engagement from baseline to post intervention for people supported in the Wellbeing Exeter Programme.
- 7.4 Within the Community Grants Programme evaluation and impact reports are not routinely being received from grant recipients and the Council has no other mechanisms (independent or otherwise) to confirm/evaluate impact of the funding. Therefore we don't know what the impacts of the funding are by any measure. The open and rolling nature of the grants programme is resource intensive for officers (and members on the Grants Panel) leaving little time available to chase impact evaluation reports from organisations who themselves may be operating on tight margins or reliant on volunteers so some thought will need to be given to how the impact of grants can be identified as the programme moves forward. One way could be to link local awards more closely to the work of Wellbeing Exeter Community builders and consequently the well embedded evaluation of Wellbeing Exeter.
- 7.5 There are currently no restrictions on the number of grants an organisation can apply for, although this is taken into account during deliberations by the grants panel. The data in section 4 shows that the majority of the larger grants available has been awarded to the larger, well established organisations in the City with 15 organisations receiving more than half of all the available funding. 30% of all the available funding was spent on 8 building renovation projects- 1% of all grants - with limited financial diligence undertaken prior to grants being awarded some of these organisations may have been well placed to secure funding from sources other than the Council and the funds better directed to projects more aligned with the Councils strategic aims and objectives.
- 7.6 The Strategic Fund, Large Grants Fund, Community Buildings Fund and the Warm Grants Fund awarded funding for community buildings, either for the renovation of buildings or their running costs. A total of £518,954 was spent on community buildings which is 59% of all available funding. Building projects in themselves will not achieve the Councils objectives and in the absence of impact data it is impossible to assess what benefit the target communities have derived from this funding. However it should be noted that, Community Associations/Centres have the potential to operate as Community Anchor Organisation (CAO). Locality² has recently published research that highlights the depth and breadth of impact that CAOs can have on reducing inequalities in their communities. The independent evaluation of Wellbeing Exeter also highlights the effectiveness of people based community development which should encourage the Council to re-focus its grant giving on evidence based approaches in order to make best use of the available funds.
- 7.8 The data shows that Ward Grants, had a relatively high reach with 67% - 398 - grants being awarded using 17% of all available funding. Despite each ward councillor having the same amount of funding available there is variation in the amounts actually being spent in each ward,

² *The impact of community anchor organisations on the wider determinants of health' (March 2022) – <https://locality.org.uk/reports/community-anchors-and-the-wider-determinants-of-health>*

councillors have only spent 45% of the available funding. When looking at which of the 6 Council priorities the ward grant aimed to address the data tells us that improving health and wellbeing is the priority most often addressed and addressing inequalities is the least.

- 7.9 The council has identified 20 Priority Neighbourhoods (see appendix 9). These are the areas of greatest need and with the lowest comparative life expectancy and highest disparity in terms of health inequalities. A key priority for the Community Grants Programme is to address inequalities: however the data available implies that the grants programme does not reflect this priority, although the commentary above explains that the data has to be treated with some caution as the postcode of the recipient organisation may not reflect where the activity is taking place. .
- 7.10 The policy including match funding as a core part of the programme following expert advice and successful local pilots of using match funding platforms. Professional advice from the sector reminds us how important it is for organisations to demonstrate support for their activities through crowd and match funding. The council may want to consider are more positive and rigorous approach to both match and crowdfunding using evidence based and best practice approaches.
- 7.11 In 2023 the Portfolio holder for communities championed the introduction of an Exeter Lottery. By November 2023 the Lottery has sold 1685 tickets and is estimating an annual sales income of £86,000 which will generate around £57,000 of funding for community groups. Already 96 organisations in the city have benefited, including the Council as £19,000 of this annual estimated income is earmarked the Councils community fund. Given the level of support for the Lottery to date it is worth the Council continuing to pursue this route of funding for community groups.
- 7.12 During 2021/22, as a direct result of the pandemic, CIL income was lower than anticipated and this has a direct impact on the operation of the Community Grants programme as it is almost entirely funded by the NH CIL. The Council can only spend this money once it has received it as receipts were lower than planned the Community Grants programme was temporarily suspended in 2023. The income projections are now back on track with payments and plans in place for full recovery of outstanding late payments. However this is a reminder of the need to maintain a “buffer” within the NH CIL account to ensure on-going commitments can be met as set out in the 2019 policy.
- 7.13 In addition the grants programme could stop running as a rolling programme (i.e. open for applications all year) and switch to time and fund limited programmes. For example the Council could open the grant fund in April calling for bids over a 2 month period, closing the fund whilst it assessed the bids and then awarding up to a conservative sum. As the in-year receipts are banked the fund could re-open again in September and January allocating funding to the limits allowed by the actual income. This is a more efficient approach and would also make better use of officer time allowing for effective management and freeing up officer time to focus more in impact evaluation and due diligence as required. It would also make better use of member time as the Grants Panel would only need to meet 3 times a year. An added benefit to this approach would be the public relations and campaigning around the launching of 3 grant funds a year and the following celebrations of the successful receipts of the grants.
- 7.14 The grants programme has been funded almost exclusively from the Neighbourhood portion of the CIL. The rules on spending CIL monies are very clearly set out in the CIL Regulations and supporting guidance. Care has been taken to ensure that any CIL spend complies with these provisions, namely that any grant application or other use of the fund must demonstrate that the funds will be used to support the development of the relevant area of Exeter by funding:

(a) the provision, improvement, replacement, operation or maintenance of infrastructure; or
(b) anything else that is concerned with addressing the demands that development places on an area.

- 7.16 The listening exercise of 2018 and the consultation process in 2019 enabled the Council to demonstrate that the policy approach complied with the statutory provisions of the CIL Regulations 2010 and its underpinning Planning Practice Guidance. These requirements are built into the grant fund application and evaluation processes. However we are not able to advise on the continued use of the NH CIL funds to pay for the contracts for services as we have no evidence to show that these contracts address the demands that development places on the area. Should members wish to support the work of a service provider like the CAE in future this will have to be funded from alternative sources other than the NH CIL.

8. Summary of Findings

8.1 Community Grants

1. The majority of all available funding has been spent on buildings and building renovations in particular. With 8 building renovation projects consuming 30% of all funding.
2. Priority Neighbourhoods are not getting a higher share of the money or even an equal share.
3. There are currently no restrictions on the number of grants an organisation can apply for. Smaller, local community groups are potentially being disadvantaged with the majority of funding being awarded to larger, better resourced organisations. 59% of all available funding was awarded to 15 organisations.
4. Ward grants arguably have greatest potential reach - 17% of all funding into 67% (398) of all grants – compared to other grants, yet some Councillors, particularly in our most disadvantaged areas are not utilising the funds which are underspent year on year.
5. There is limited financial diligence undertaken prior to larger grants being awarded and some of the organisations may be able to secure funding from sources other than the Council and the funds better directed to projects more aligned with the Councils strategic aims and objectives.
6. With limited impact data it is difficult to assess what benefit the target communities have derived from this funding. However, the independent evaluation of Wellbeing Exeter highlights the effectiveness of capacity building work in communities which should encourage the Council to re-think its grant giving on evidence based approaches in order to make best use of the available funds.
7. Professional advice from the sector reminds us how important it is for organisations to demonstrate support for their activities through crowd and match funding, the Councils reluctance to take a more rigorous approach to both match and crowdfunding is potentially acting against its own aim of helping people to help themselves.

Contracts for Services

8. The Information Advice and Advocacy Contract has improved the working relationship between Citizen Advice Exeter (CAE), Council and other partner organisations, however it is unclear what benefits a contractual arrangement brings over the traditional grant model. The work of the CAE is of significant value and importance to the city however it's apparent that CAE is dependent on the Council for over 1/3 of its core funding: this is a high risk strategy for the CAE

and the Council. Should members wish to support the work of a service provider like the CAE in future this will have to be funded from alternative sources other than the NH CIL.

9. The Council has been able to influence the development of Exeter Connect as a new service. There is activity data to indicate that there has been more collaboration across the VCSE sector in the city supported by Exeter Connects network co-ordination work and support for existing and emerging groups/organisations. This was evident by the collaboration that took place during the Covid pandemic when Exeter Connect supported the Exeter Community Wellbeing approach led by the City Council. There is also other significant VCSE co-ordination and networking taking place through Wellbeing Exeter delivered through CoLab Exeter.

9. Recommendations

Based on the report finding it is recommended that consideration should be given to the following:

1. A strategic needs assessment of community buildings should take place before any further investment is made in building projects.
2. More stringent targeting should take place alongside proactive promotion of small community grants which could be more effective if linked into the work of Wellbeing Exeter's locality based Community Builders.
3. Allocating grants to addressing specific issues faced predominately in priority neighbourhoods such as digital exclusion, where there is a strong evidence based on effective approaches that deliver measureable impacts.
4. Placing a cap on the amount of grant funding that can be awarded to any one organisation over a 3 year period and also on the number of applications that can be made in any financial year. (Though it is recognised, and would need to be taken into account, that some of the larger organisations (e.g. ECI) act as an umbrella organisation for smaller grass roots groups that are not constituted and do not have their own bank account).
5. The Executive to continue to allow for grant award decisions to be made by members on the cross party Grants Panel but to consider more pro-active monitoring of the deployment of ward grants and reducing the annual allocation to better reflect average annual spend over the last 4 years: £3,000 per ward.
6. That more robust due diligence, including ensuring the receipt of impact evaluation be undertaken prior to the award any grant in excess of £5,000.
7. A re-focus of grant giving on evidence based approaches to make best use of the available funds. This could be achieved by linking ECC community grants into the work of Wellbeing Exeter's locality based Community Builders which would ensure robust impact assessment in line with Wellbeing Exeter policy and practice.
8. Adopting a more explicit and positive approach to match funding.
9. Switching from an open annual rolling grant programmes to a more structured approach opening the grant fund for limited periods 2 or 3 times a year. This would be less resource intensive for staff and members and provides flexibility in managing fluctuations in NHCIL income in year without disrupting the grants programme.
10. When the Information, Advice and Advocacy Contract comes to an end in March 2024 it is not re-tendered. There is no evidence to show that this contract met the needs of development in the area so if Council wish to continue to support the work of the work of CAE in future

years this will need to be from other sources of funding than the Neighbourhood CIL. The Council could consider, if funding is available, an annual grant to support the general work of CAE. The council can then make an annual decision as to whether to continue to grant fund the CAE depending on its priorities and the funding available. This is sustainable and best value approach for the Council and also provides clarity for the Trustees of CAE who are responsible for the financial wellbeing of their organisation.

11. As the long term future of Wellbeing Exeter is also under consideration it makes sense for the Council to consider embedding key aspects of the Exeter Connect contract into Wellbeing Exeter's future role. This makes financial and system sense and avoids duplication of effort and spend. If the Council decides to discontinue funding Wellbeing Exeter it could then reconsider if it is a priority for the Council to re-establish a VCSE support organisation in the city.

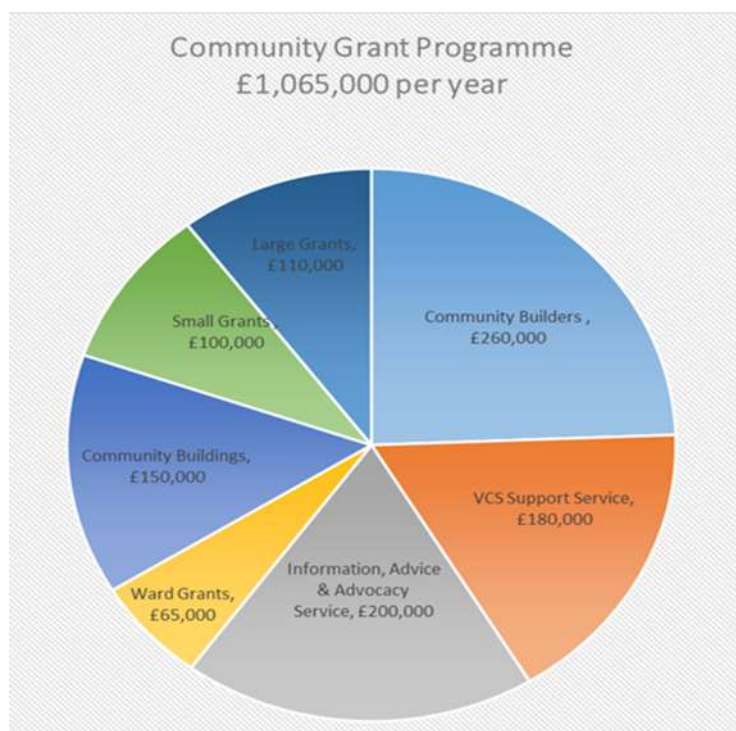
10. Appendices

Appendix 1: The Exeter Grants Fund 2019/21

| City Grant Fund Name | Description | Purpose | |
|---|--|---|---|
| Exeter Ward Grants £65,000 Maximum grant £500 No match Funding | Each ward will have an annual Fund of £5,000 with maximum award to any group in any one year of £500. Councillors will give priority to first timer applicants and will positively encourage new groups to apply. | This fund can be used by ward councillors to support one-off community led initiatives that reflect Council priorities. | Cannot be used to pay for everyday running costs. Applicants will need to demonstrate that there is community support for their project. |
| Exeter Community Buildings Fund £150,000 Maximum grant £5,000 *50% match funding | Community Associations will be able to apply for a three year grant towards the annual running costs of their community centre up to £5,000 per year. Pledges will be for a maximum of 50% of the funding target. Pledges will only be made once 10% of the project target has been met. | This fund can be used to support registered Community Associations with the running costs of existing community centres. This fund is for every day running costs of community centres run by Community Associations. | Cannot be used for refurbishment or building costs. Applicants will need to demonstrate that there is community support for their project |
| Exeter Small Grants Fund £100,000 Maximum grant £3,000 *Minimum of 20% match funding Volunteering hours may count as the match funding | Voluntary and community groups will be able to apply for a grant of up to £3,000. Pledges will be for a maximum of 80% of the funding target. Pledges will only be made once 10% of the project target has been met. | This fund can be used to support any community led initiative to support locally identified needs that tie in with the Council priorities. This fund can be used for putting on or running an event, festival or celebration. This fund can be used to pay for one-off purchase or repair of equipment. | Cannot be used to fund every day running costs. Applicants will need to demonstrate that there is community support for their project |
| For Small Grants Fund projects that aim to encourage community participation we will consider counting the projected hours of volunteer involvement for the delivery of the project towards the funding match. We will count volunteering hours as equivalent of living wage hourly rate. | | | |
| Exeter Large Grants Fund £110,000 Maximum grant £30,000 | Voluntary and community groups will be able to apply for a grant of up to £30,000. | This fund can be used to support any community led initiative to support locally identified needs that tie in with the Council priorities. | Cannot be used to fund every day running costs. Applicants will need to demonstrate that there is community support for their project |

| | | | |
|--|---|---|---|
| <p>*Minimum of 50% match funding</p> | <p>Pledges will be for a maximum of 50% of the funding target. Pledges will only be made once 25% of the project target has been met.</p> | <p>This fund will pay towards building or refurbishment costs or the purchase of equipment.</p> | |
| <p>Exeter Move More Small Grants £55,000</p> <p>Maximum grant £300 No match funding</p> | <p>Voluntary and community groups will be able to apply for a grant of up to £300.</p> <p>Priority will be given to projects in the target geographical areas and groups.</p> | <p>This fund can be used to support community led initiatives that get inactive people taking part in physical activity.</p> <p>This fund will pay for the purchase of kit and equipment or the hire of a hall or instructor to start up a group or session.</p> | <p>Applicants will need to demonstrate that there is community support for their project.</p> |

**The Grant Panel will consider a reduced match % for grant requests for projects within the top 20 LSOA's (i.e. the most disadvantaged communities) set out in the Physical Activity Strategy*



Appendix 2: Community Building Grant Spend 2019/2023

| Community Building Grant Spend 2019/2023 | 19/20 | 20/21 | 21/22 | 22/23 | Grand Total |
|---|----------------|----------------|----------------|----------------|----------------|
| ExeAccess | | 5,000 | 5,000 | | 10,000 |
| St Katherine's Prioory | | 5,000 | 5,000 | | 10,000 |
| Isca Community Enterprises | | 5,000 | 5,000 | | 10,000 |
| Exeter Communities Together CIC | 5,000 | | | | 5,000 |
| Alphington Community Association | 5,000 | | | | 5,000 |
| Positive Light Projects Creative Hub | | | | 5,000 | 5,000 |
| Stoke Hill Community Association | | | | 5,000 | 5,000 |
| St Sidwell's Community Centre | 5,000 | | | | 5,000 |
| The Club | 5,000 | | | | 5,000 |
| Wonford Community & Learning Centre | 5,000 | | | | 5,000 |
| Topsham Community Association Ltd | 5,000 | | | | 5,000 |
| Newcourt Community Association | 5,000 | | | | 5,000 |
| Age UK Exeter | 5,000 | | | | 5,000 |
| Pinhoe Community Centre | | | | 5,000 | 5,000 |
| Devon Family History Society | | | | 2,000 | 2,000 |
| Sylvania Play and Community Family Assoc. | 2,000 | | | | 2,000 |
| Grand Total | £42,000 | £15,000 | £15,000 | £17,000 | £89,000 |

Appendix 3: Large Grant Spend 2021/2023

| Large Grant Spend 2021/2023 | Award Amount |
|--|----------------|
| 21/22 | 19,600 |
| Exeter Scrapstore | 10,000 |
| Magic Carpet | 9,600 |
| 22/23 | 59,100 |
| Whipton Community Association | 10,000 |
| Exeter Islamic Cultural Centre | 8,500 |
| Co Create Exeter CIC (formerly Wood for Good Exeter) | 7,500 |
| Positive Light Projects Creative Hub | 6,500 |
| Exeter Community Responders | 5,600 |
| St Sidwell's Community Centre | 5,000 |
| Hospiscare | 5,000 |
| The Estuary Community Hub CIC | 4,000 |
| Exeter Food Action | 3,500 |
| Isca Community Enterprises | 3,500 |
| Grand Total | £78,700 |

Appendix 4: Small Grant Fund Spend 2019/2023

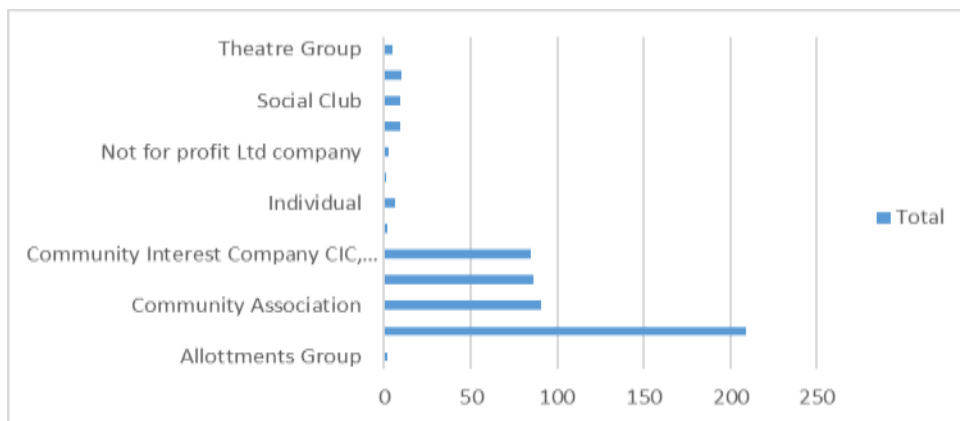
| Small Grant Fund Spend 2019/2023 | 19/20 | 20/21 | 21/22 | 22/23 | Grand Total |
|---|-------|-------|-------|-------|-------------|
| Exeter Respect CIC | 3,000 | | 3,000 | | 6,000 |
| PaddleBoat Theatre CIC | 1,500 | | 1,000 | 1,500 | 4,000 |
| Inclusive Exeter CIC | | | | 3,900 | 3,900 |
| Freemovement UK CIC | 2,400 | | 1,000 | | 3,400 |
| Dentaid | | | 3,000 | | 3,000 |
| Park Life Heavitree | 3,000 | | | | 3,000 |
| Magic Carpet | 2,810 | | | | 2,810 |
| St Matt's Exeter | | 2,800 | | | 2,800 |
| Wonford Planters | | 2,800 | | | 2,800 |
| Wren Music | 2,625 | | | | 2,625 |
| Better Health Exeter | 2,450 | | | | 2,450 |
| The Pelican Project Exeter CIC | | | | 2,000 | 2,000 |
| SNUG | | | | 2,000 | 2,000 |
| Quirk Theatre CIC | | | | 2,000 | 2,000 |
| CEDA | 2,000 | | | | 2,000 |
| Sweetpea Smallholdings CIC | | | | 2,000 | 2,000 |
| Home-Start Exeter, East and Mid Devon | | | 2,000 | | 2,000 |
| Promenade Promotions Limited | | | | 2,000 | 2,000 |
| Co Create Exeter CIC | | | 2,000 | | 2,000 |
| Rediscover Church | | | | 2,000 | 2,000 |
| Connections Group Exeter | | | | 2,000 | 2,000 |
| DYS Space Ltd | | | | 2,000 | 2,000 |
| Art Work Exeter CIC | | | | 2,000 | 2,000 |
| The Olive Project | | | | 2,000 | 2,000 |
| Wonford Planters | | | | 2,000 | 2,000 |
| Exeter Spitfires Softball & Baseball Club | | | | 2,000 | 2,000 |
| Exeter Aces Cycle Speedway Club | | | | 2,000 | 2,000 |
| Polsloe Community Association | | | | 2,000 | 2,000 |
| Double Elephant Print Workshop | | | | 2,000 | 2,000 |
| Richard Chappell Dance CIC | | | | 1,950 | 1,950 |
| Sciencedipity CIC | | | | 1,765 | 1,765 |
| Exeter Kerala Community | | 600 | | 1,000 | 1,600 |
| Yoga for the Front Line | | | | 1,500 | 1,500 |
| Exeter Fringe Festival | | 1,500 | | | 1,500 |
| Phlixa Productions CIC | | | 1,500 | | 1,500 |
| Hospital Radio Exeter | 1,400 | | | | 1,400 |
| Maria's Books | | | | 1,200 | 1,200 |
| Art Work Exeter | | 1,000 | | | 1,000 |
| Food Cycle | | | | 1,000 | 1,000 |
| CoLab Exeter Resilient Women | | | 1,000 | | 1,000 |
| Exeter Seed Bank | | | 1,000 | | 1,000 |
| St Thomas Christmas Market | | 1,000 | | | 1,000 |
| Burn the Curtain | | | 1,000 | | 1,000 |

| | | | | | |
|------------------------|----------------|---------------|----------------|----------------|----------------|
| Dreadnought South West | 1,000 | | | | 1,000 |
| South West Dance Hub | | | | 1,000 | 1,000 |
| Age UK Exeter | | | 1,000 | | 1,000 |
| Grand Total | £22,185 | £9,700 | £17,500 | £44,815 | £94,200 |

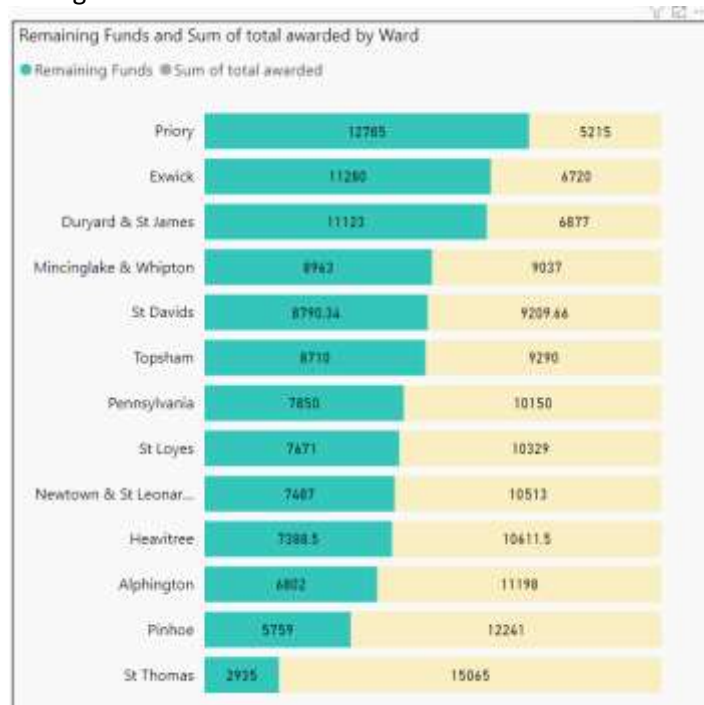
Appendix 5: Ward Grant Spend 2019/2023

| Ward Grant | Awarded | Grants |
|----------------------|-----------------|------------|
| Total Grant | £230,000 | |
| 19/20 | 40,634 | 122 |
| 20/21 | 29,171 | 62 |
| 21/22 | 46,074 | 103 |
| 22/23 | 35,012 | 111 |
| Total Awarded | £150,890 | 398 |

Number of ward grants by organisation type



The table shows the variation in the amount of grant across the wards: the larger the circle the higher the amount of the grant was awarded.



Appendix 6: Warm Spaces Grant Spend 2022/2023

| Organisation | Amount £ | Organisation | Amount £ |
|----------------------------------|-------------|----------------------------------|-------------|
| The Estuary League of Friends | 500 | Rediscover Church Exeter | 500 |
| Park Life Heavitree | 500 | Exeter Quakers | 500 |
| 100 Club Community Group | 500 | Sylvania Community Stores & Café | 500 |
| Alphington Community Association | 500 | Headway Devon | 500 |
| St Katherine's Community Larder | 500 | Topsham Community Association | 500 |
| Exeter City Community Trust | 500 | Isca Community Enterprises | 500 |
| Wonford Methodist Church | 500 | Maketank | 500 |
| Exeter Community Church | 500 | Newtown Community Association | 500 |
| Pants Over Trousers | 500 | South St Baptist Church Exeter | 440 |
| Exeter Northcott Theatre | 500 | Pinhoe Road Baptist Church | 400 |

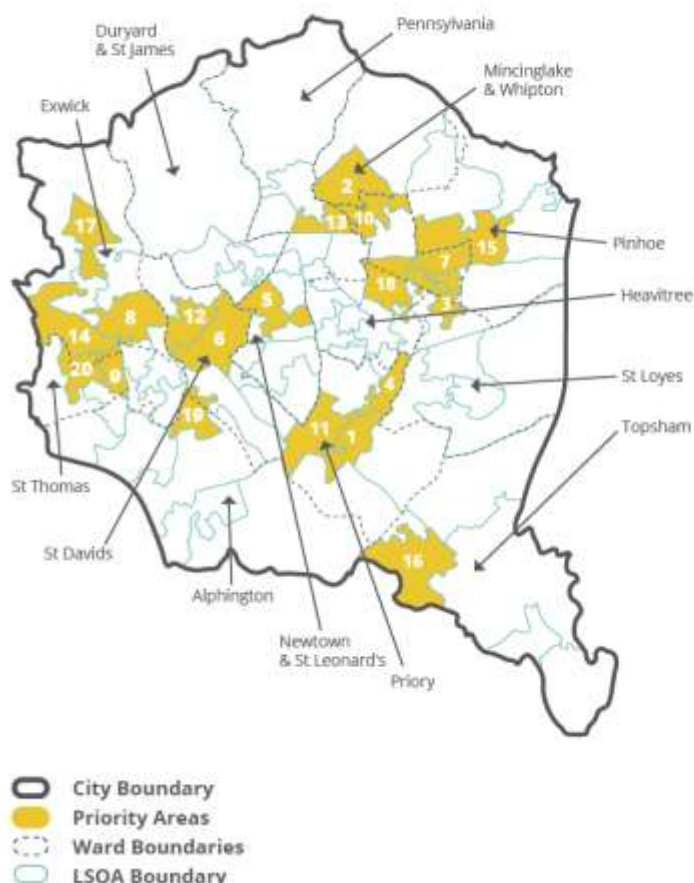
Appendix 7: Contracts for Services: Information and Advice Contract with Exeter Citizens Advice Bureau. Contract Performance Data

| Outcome | Indicator | Annual Target | Actual 20/21 | Actual 21/22 | Actual 22/23 |
|--|---|--------------------------|-----------------|-----------------|-----------------|
| Benefit advice and income maximisation | Nos of cases of previously unclaimed benefits identified | 9000 advice issued codes | 6,744 | 14,819 | 10,538 |
| | Potential Income gained | £3.5m | £2.6m | £3.7m | £4.1m |
| Housing advice and homelessness prevention | Nos cases where homelessness has been avoided | 1000 advice issue codes | 895 | 1317 | 1496 |
| | Nos avoided at Court | 80 | 0 | 0 | 0 |
| Debt advice | Nos cases where debt advice has been given | 4000 Advice issue codes | 2416 | 2278 | 1718 |
| | Amount of debt resolved | £1m of debt written off | £610,044 | £588,128 | £198,297 |
| Advocacy | Number of evidence forms completed | N/A | 454 | 464 | 483 |
| To what extent did you find a way forward? | % of people who report they feel more capable of finding a way forward as a result of the service | 80% | 94% | | |
| To what extent is your problem now resolved? | % of people who successfully resolve issues. | 80% | 79% | 77.5% | 71 % |
| Client behavioural changes | Outcome of client behavioural change where they have had a DRO more than 6-months ago | N/A | 0 | 0 | 0 |
| Housing advice and homelessness prevention | Number of clients assisted by Homemaker South West | N/A | 54 | 46 | 94 |

Appendix 8: Contracts for Services: Exeter Connect Contract with Exeter Community Initiatives. Contract Performance Data

| Outcome | Indicator | Target 20/21 | Actual 2020/21 | Target 21/22 | Actual 21/22 | Target 22/23 | Actual 22/23 |
|--|--|--------------|----------------|--------------|--------------|--------------|--------------|
| Support for New & Emerging Groups | Number of new groups supported to develop governance | 5 | 15 | 20 | 41 | 20 | 29 |
| | No. of Groups using ECI to hold funds | 0 | 11 | 0 | 8 | 0 | 8 |
| | Value of funds held | 0 | £9,180 | 0 | £6,081 | 0 | £7,360 |
| Support for Existing VCS organisations | No of groups supported | 50 | 77 | 75 | 65 | 75 | 80 |
| Training & Development | Events organised to support the sector | 15 | 3 | 25 | 23 | 25 | 23 |
| | Attendees | 0 | 0 | 0 | 206 | 0 | 243 |
| Influencing | No. of Consultations and other opportunities for influencing that are promoted | 3 | 2 | 3 | 2 | 3 | 8 |
| Widening Participation | No. of activities focussed on increasing participation | 2 | 1 | 2 | 4 | 2 | 8 |
| Networks & Connecting | No. of networks that bring groups & organisations together | 4 | 3 | 4 | 6 | 4 | 8 |
| Supporting diversity & inclusion | No. of activities / events held to widen diversity within the sector | 4 | 0 | 4 | 3 | 4 | 2 |
| Celebrating Achievement | Annual celebration of groups & organisations in Exeter | 1 | 1 | 1 | 1 | 1 | 0 |

Appendix 9 Exeter's 20 priority Neighbourhoods



| Rank | Description |
|------|--|
| 1 | Burnthouse lane (Trees) |
| 2 | Lancelot Road |
| 3 | Whipton (Leypark Road & Brambley Avenue) |
| 4 | Burnthouse Lane (Riford Road) |
| 5 | Sidwell Street & Clifton Road |
| 6 | Cathedral & City Centre (East) |
| 7 | Whipton (Hillyfield Road) |
| 8 | Exwick (Cemetery) |
| 9 | Cowick (Newman Road) |
| 10 | Beacon Heath |
| 11 | Burnthouse Lane (Poets) |
| 12 | City Centre (West) |
| 13 | Stoke Hill |
| 14 | Exwick (Redhills) |
| 15 | Summerway |
| 16 | Countess Wear (Lower) |
| 17 | Exwick (Farm Hill) |
| 18 | Hamilite Lane & Honeylands |
| 19 | Alphington Road (Ebrington Road) |
| 20 | Cowick (Barley Farm Road) |

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Community Grants in Devon: Information from Council Websites December 2023

| Council | Grants Offered |
|-----------------------------|--|
| Devon County Council | <ul style="list-style-type: none"> • Growing Communities Fund: £500 - £1,000, focus on cost of living issues through reducing food and fuel inequalities, building self-reliance, community resilience and improving mental health and wellbeing. • Locality Budget: each County Councillor allocated £5,000 to support local needs. Scheme very similar to the Exeter Ward Grant. • Community Library Support Fund: £100 - £300, focus on enhancement of community libraries in Devon i.e. shelving; seating; books; lighting. |
| East Devon District Council | <ul style="list-style-type: none"> • Small Community Grants: £300 - £500, focus on community led ideas and initiatives that will benefit East Devon's communities. • Community Buildings Fund: up to £5,000, focus on helping refurbish, improve or even build village halls, community shops or community buildings in rural areas. Scheme very similar to Exeter Large Grant / Strategic Fund. • East Devon Action on Poverty Fund: up to £5,000, focus on community led ideas and initiatives that will benefit East Devon's communities. Examples include tackling hidden poverty, debt/money advice, supporting people access services, low income residents access internet/develop digital skills, community events etc. |
| Mid Devon District Council | <ul style="list-style-type: none"> • Vibrant Town Centres: up to £5,000, focus on supporting ideas/projects that will help to revitalise town centres, i.e. revive high streets. • Mid Devon Prosperity Programme: £1,000 - £20,000 across five business grant schemes: <ul style="list-style-type: none"> – Field to Fork – grants towards equipment needed to support businesses to develop, produce and market local food and drink products. – Business Growth and Innovation – a mixed grants programme targeting micro-businesses and social enterprises with innovative ideas and high growth potential to help them buy new equipment, improve processes etc. This includes capital funding for net zero infrastructure for rural businesses and diversification of farm businesses. – Visitor Economy (Sustainable Tourism) – capital grants towards the development of quality visitor attractions and experiences to expand or enhance the tourism offer and support farm diversification. – Work Hub Development Scheme – grants for local businesses to support incubator space and work hub development to create small flexible office and workshop space for start-up and growing micro-businesses. – Investment in the Social Economy (2024/25) – capital grants to support community businesses such as community shops, community pubs, and community energy organisations, to increase access to key services, support community infrastructure and facilitate de-carbonisation. |
| North Devon Council | <ul style="list-style-type: none"> • Community Councillor Grants: each District Councillor allocated £1,000 to award local groups that benefit the residents or environment of North Devon, can be used to help with equipment costs, activities or just to help with day-to-day running and operation costs. Scheme very similar to the Exeter Ward Grant. |
| Plymouth City Council | <ul style="list-style-type: none"> • Councillor Community Grants: annual grant allocation (amount not disclosed on website) to help not-for-profit groups and organisations with local community projects. • Living Streets Grant: not a grant, but a community-based initiative where Councillors work with residents to direct funding to resolve highways related issues in their wards. |

| Council | Grants Offered |
|--|--|
| South Hams District / West Devon Borough Council | <ul style="list-style-type: none"> • Sustainable Communities Locality Fund: each Councillor allocated £2,000 (South Hams) or £500 (West Devon) to support community projects that benefit their Ward or the wider local community. Scheme very similar to the Exeter Ward Grant. • Community Project Grants: up to £5,000, focus on helping community groups purchase equipment or fund building related costs, e.g. sports equipment or repairs to a village hall. Scheme very similar to Exeter Large Grant / Strategic Fund. • Shared Prosperity Fund incorporating the following schemes: <ul style="list-style-type: none"> – Decarbonisation Grant – businesses that have developed a decarbonisation plan as part of a recognised scheme can apply for up to £10,000 to implement the solutions identified in their plan. The funding is for activities to reduce the carbon footprint of your business and reduce expenditure on energy/fuel. Limited companies, including social enterprises and CICs, sole traders/ partnerships and registered charities can apply. – Agri-tech Grant – capital grants for agricultural businesses of between £5,000 and £10,000 to adopt new technologies and products, preferably that they have piloted as part of the agri-tech alliance project. Businesses in the agricultural sector can apply. – Clean Diversification Grant – for businesses diversifying into areas of activity that will enable them to operate more sustainably, efficiently and for them to be as low-carbon as possible. Grants can be from £2,000 to £10,000. Limited companies, including social enterprises and CICs, sole traders/ partnerships and registered charities can apply. – Community Resilience Grant – to support the resilience of community facilities, such as community and village halls, village shops, and other sites which provide a range of services to their local communities. Grants can be from £2,000 to £10,000. Social enterprises and CICs, registered charities and town/parish councils can apply. |
| Teignbridge District Council | <ul style="list-style-type: none"> • Councillors' Community Fund: each Councillor allocated £1,000, focus on supporting one-off projects within their wards. Scheme very similar to the Exeter Ward Grant. • Teign Estuary and Coastal Partnership – Small Grants Scheme: up to £500, focus on supporting projects that positively address the social, economic and environmental wellbeing of communities around the Teign Estuary and adjacent open coastline, including Dawlish, Holcombe and the Ness. To encourage community groups, clubs and organisations to undertake projects for the good of the area which are broadly in line with one or more of the TECP's Strategic Policies. |
| Torbay Council | <ul style="list-style-type: none"> • Community Ward Fund: each Councillor allocated £2,000, focus on help with replacing and repairing a number of council and community owned assets across the Bay that due to years of austerity and hard decisions have being made they have not been replaced or fixed. Scheme very similar to the Exeter Ward Grant, but focused on assets rather than community activities/events. • Torbay Community Fund: up to £400, focus on small community-led schemes that improve people's health and wellbeing e.g. purchase equipment or to promote a project that enables local communities to get more active, look after themselves better, or become more connected. |
| Torrige District Council | (no information found on Council website) |

Equality Impact Assessment: Exeter Community Grants Programme proposals 2024/25

The Equality Act 2010 includes a general duty which requires public authorities, in the exercise of their functions, to have due regard to the need to:

- **Eliminate discrimination**, harassment and victimisation and any other conduct that is prohibited by or under the Act.
- **Advance equality of opportunity** between people who share a relevant protected characteristic and people who do not share it.
- **Foster good relations** between people who share a relevant protected characteristic and those who do not

In order to comply with the general duty authorities must assess the impact on equality of decisions, policies and practices. These duties do not prevent the authority from reducing services where necessary, but they offer a way of developing proposals that consider the impacts on all members of the community.

Authorities which fail to carry out equality impact assessments risk making poor and unfair decisions which may discriminate against particular groups and worsen inequality.

| Committee name and date: | Report Title | Decisions being recommended: | People with protected characteristics potentially impacted by the decisions to be made: |
|---|--|---|--|
| Executive 22 nd January 2024 Council 20 February 2024 | Exeter Community Grants Programme review | That Executive recommends and Council approves:- proposals for the Community Grants Programme for 24/25 and how out this can be funded using the Neighbourhood portion of the | All residents in Exeter impacted by the decision to be made, particularly those from most deprived LSOAs within the city |

| Committee name and date: | Report Title | Decisions being recommended: | People with protected characteristics potentially impacted by the decisions to be made: |
|--------------------------|--------------|--|---|
| | | Community Infrastructure Levy (NHCIL) in 24/25 | |

Factors to consider in the assessment: For each of the groups below, an assessment has been made on whether the proposed decision will have a **positive, negative or neutral impact**. This must be noted in the table below alongside brief details of why this conclusion has been reached and notes of any mitigation proposed. Where the impact is negative, a **high, medium or low assessment** is given. The assessment rates the impact of the policy based on the current situation (i.e. disregarding any actions planned to be carried out in future).

High impact – a significant potential impact, risk of exposure, history of complaints, no mitigating measures in place etc.

Medium impact – some potential impact exists, some mitigating measures are in place, poor evidence

Low impact – almost no relevancy to the process, e.g. an area that is very much legislation led and where the Council has very little discretion

| Protected characteristic/ area of interest | Positive or Negative Impact | High, Medium or Low Impact | Reason |
|---|-----------------------------|----------------------------|--|
| Race and ethnicity (including Gypsies and Travellers; migrant workers; asylum seekers). | Positive | High | <p>Relevant for all groups with protected characteristics: The review and proposals for the 2024/25 Exeter Community Grants programme (including Funding committed for Wellbeing Exeter) seeks to provide resources & funds for the local voluntary sector and be available to all community groups and organisations that represent a wide and diverse range of residents across the city</p> <p>Priority will be given to those community organisations and groups that have a positive effect on community health and wellbeing and tackling health inequalities across the city.</p> |

| Protected characteristic/ area of interest | Positive or Negative Impact | High, Medium or Low Impact | Reason |
|--|-----------------------------|----------------------------|---|
| | | | <p>Examples include Wellbeing Exeter Community Connectors embedded within Inclusive Exeter and the work to support asylum seekers, guests from Afghanistan and Ukraine.</p> <p>17% of the young people in community connecting in 2021/22 were from a non-white, non-British background.</p> |
| Disability: as defined by the Equality Act – a person has a disability if they have a physical or mental impairment that has a substantial and long-term adverse impact on their ability to carry out normal day-to-day activities. | Positive | Medium | <p>As above</p> <p>Wellbeing Exeter community connectors and builders regularly work with people with long term health problems and those with disabilities. 35% of adults working with Wellbeing Exeter/Cranbrook in 2023 were supported by Community Connectors were unable to work due to sickness or disability.</p> |
| Sex/Gender | Positive | Low | <p>As above</p> <p>In 2021/22 58% of adults referred into community connecting were female. Wellbeing Exeter’s family work evidences that 94% of those we work with are female.</p> |
| Gender reassignment | Positive | Low | As above |
| Religion and belief (includes no belief, some philosophical beliefs such as Buddhism and sects within religions). | Positive | Low | As above |
| Sexual orientation (including heterosexual, lesbian, gay, bisexual). | Positive | Low | As above |
| Age (children and young people aged 0-24; adults aged 25-50; younger older people aged 51-75/80; older | Positive | Medium | As above |

| Protected characteristic/ area of interest | Positive or Negative Impact | High, Medium or Low Impact | Reason |
|--|-----------------------------|----------------------------|---|
| people 81+; frail older people; people living with age related conditions. The age categories are for illustration only as overriding consideration should be given to needs). | | | <p>WE's age based work includes two adult community connectors based at RAMM/Age UK Exeter, where their work focuses on isolated older adults. This area of work enables us to work with older adults who are most likely to suffer from loneliness and isolation or suffer from cost of living crisis, connecting them with cultural community based cultural opportunities.</p> <p>Our six 'Community Connectors – Young People' focus their work on younger people and they are hosted via local partners YMCA, Space and Young Devon. 228 young people were referred to Wellbeing Exeter in 2021/22.</p> <p>Wellbeing Exeter also has two Family Community Connectors working with young families, to which there were 65 referrals in 2021/22.</p> |
| Pregnancy and maternity including new and breast feeding mothers | Positive | Low | As above |
| Marriage and civil partnership status | Positive | Low | As above |

Actions identified that will mitigate any negative impacts and/or promote inclusion

- Our Wellbeing Exeter case for support highlights the focus of the new core model, which prioritises support for individuals from our communities in Exeter with the poorest health incomes. These communities have a higher percentage ofm groups from protected characteristics than the mean average across the city.
- The report proposes that future grant funding is targeted towards communities and projects that will have the greatest impact against local need. For example, allocating grants to addressing specific issues faced predominately in priority neighbourhoods such as digital exclusion, where there is a strong evidence based on effective approaches that deliver measurable impacts.

- Priority given to those organisations applying for community grants that address inequalities and promote inclusion of those residents and communities within protected characteristic groups
- Continued work and prioritisation with organisations within the Wellbeing Exeter alliance that specifically work with groups with protected characteristics – e.g. Inclusive Exeter

Officer: James Bogue

Date: 10/01/2023

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