

# Report

## Health Inequalities Investment Programme

### Edinburgh Integration Joint Board

15 July 2016



## Executive Summary

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- 1.1 In order to support the development and delivery of community based approaches to tackle inequalities the City of Edinburgh Council and NHS Lothian through the Edinburgh Community Health Partnership have invested in a Health Inequalities Grants Programme for a number of years. Responsibility for planning the health and social care response to tackling inequalities and the related budgets has now been delegated to the Integration Joint Board. In recognition of this change in responsibility grants under the Health inequalities Programme were awarded for 2016/17 only rather than the planned three years. The total value of this programme in the current year is £1.8million.
- 1.2 A number of organisations use funding received from the Health Inequalities Grants Programme to employ staff and have legal obligations in terms of giving notice to terminate employment. These organisations need a decision by December on funding for the next financial year. If grants are to be continued beyond March 2017 the process will need to commence in September 2016.
- 1.3 This report proposes a way forward that will inform the future strategic focus and allocation of resources to tackle inequalities, whilst providing continuity for citizens making use of the services being funded and some financial stability for existing recipients of grants.

## Recommendations

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- 2.1 The Integration Joint Board is asked to approve:
  - i. the awarding of Health Inequality grants for a further year until March 2018 based on the 2016/17 funding criteria with continued funding being subject to satisfactory performance of projects against agreed targets

- ii. the amount available for Health Inequalities Grants in 2016/17 being reduced by 3.4% to take account of the outstanding 10% reduction applied by the Council over 3 years
- iii. the process for awarding grants for 2016/17 to be a closed process involving projects already in receipt of a Health Inequality grant

2.2 The Integration Joint Board is asked to note:

- i. that a further report will be presented to the Board towards the end of in the first quarter of 2017 setting out proposals for investment in tackling inequalities beyond March 2018

## Background

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- 3.1 That 'Edinburgh's citizens experience improved health and wellbeing, with reduced inequalities in health' is one of the four strategic outcomes for the Edinburgh Community Planning Partnership. Responsibility for overseeing the delivery of this outcome previously sat with the Edinburgh Community Health Partnership (CHP); following the demise of the CHP, this responsibility has transferred to the Edinburgh Health and Social Care Partnership. Responsibility for Health and Social Care grant systems has also transferred to the Health and Social Care Partnership.
- 3.2 The Community Planning Partnership strategic approach to tackling inequalities including health inequalities in the city has been driven through a Poverty and Inequality Partnership and a Health Inequalities Standing Group that operated under the auspices of the CHP. Work is currently underway to bring these together a single partnership operating as part of the Community Planning Partnership. The new partnership will coordinate the strategic approach to tackling inequalities and developing preventative approaches for the city across all community planning partners.
- 3.3 The Health Inequalities Standing Group has developed a Health Inequalities framework for the city and established and overseen the work of a number of workstreams seeking to take forward the objectives and outcomes within the framework. This group has also supported the operation of the Health Inequalities Grant Programme, evaluating applications and making recommendations for award to the Health Social Care and Housing Committee.
- 3.4 The Health Inequality Standing Group partners, including voluntary sector representation and the Lothian Community Health Initiatives Forum, reviewed the main health inequality objectives and priority outcomes in 2016. This review resulted in a revised funding criteria being set for the new preventive programme in 2016/17. Details of the process undertaken to review the Health Inequalities funding criteria and the rationale for changes made to the funding

criteria were [reported](#) to the Integration Joint Board in September 2015. The revised funding priorities and funding criteria for the Health Inequalities Grant Programme 2016/17 is listed in Appendix 1a and 1b for information.

- 3.5 The report to the Integration Joint Board in September 2015 also outlined the intention to phase in 3 year Health Inequalities grants in order to align the Council's Health Inequalities funding with funding from NHS Lothian and the Edinburgh Community Health Partnership. Such an approach was proposed to allow the Board to consider plans for future grant programmes in the light of emerging commissioning priorities. Consequently, the health inequality grant allocations in 2016/17 were limited to a one year period and will end on 31 March 2017. An agreed way forward is now required to ensure health inequality investment continues in the city.
- 3.6 The overall investment in the Health Inequalities Grant Programme in 2016.17 is shown below:

	<u>£million</u>
Health and Social Care Grants (CEC)	1.4
Community Health Partnership Grants	<u>0.381</u>
<u>Total</u>	<u>£1.781</u>

Altogether 30 Grants were awarded to organisations tackling Health Inequalities in the city. A full list of projects receiving awards in 2016/17 awards is set out at Appendix 2.

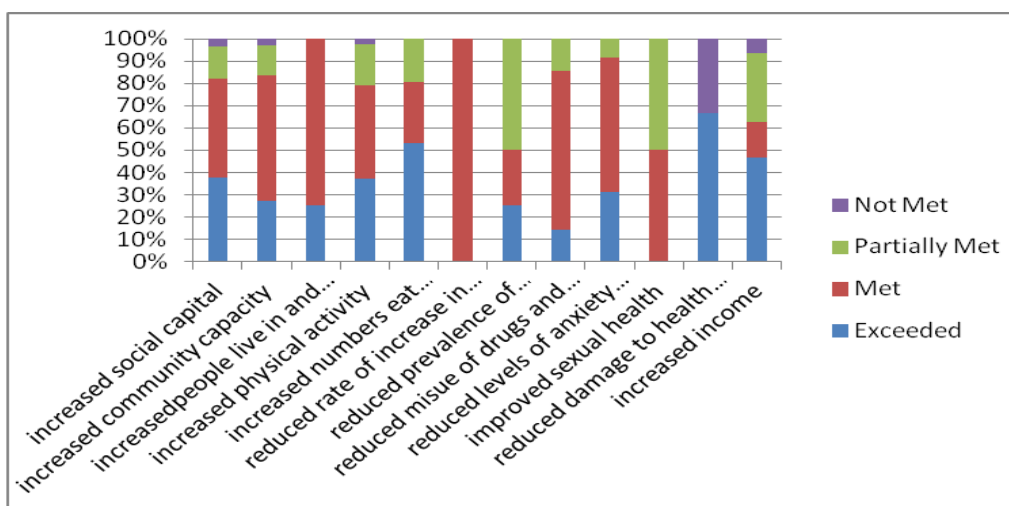
## Main report

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- 4.1 Commissioning for the Health Inequalities brings together a broad range of activity across different agencies and partnerships and includes joint action with other funders seeking to address health inequality. The Health Inequalities Standing Group (HISG) has taken on the lead role in making grant recommendations to committee and has routinely reviewed and updated investment priorities for Health inequalities activities within the city.
- 4.2 The investment in this preventive programme is relatively small in comparison to mainstream resources that can address health inequality. To increase the impact from the limited preventive programme, the Health Inequality Standing Group targeted the key health inequality outcomes which are not the remit of other partnerships or joint groups in the city.
- Measures of success**
- 4.3 Evaluation of the services funded to reduce health inequality are reported regularly. These monitor achievement of agreed targets, levels of contact with communities, funding leverage and volunteering against the priority outcomes in the Health Inequality Framework.

4.4 The annual evaluation of the Council Health Inequalities Programme for 2014-15, (the last year for which analysed data is available) demonstrates that it delivered a valuable diverse range of activities and effective prioritisation of the key outcomes within the Health Inequalities Framework. Services benefited over 30,141 people for an investment of £1.4m. The evaluation was developed for corporate reporting within the Council using a system of summarised self-reporting by providers, based on the targets in individual funding agreements. Targets are set jointly between the funder and the organisation at the beginning of the year to specify a challenging yet achievable standard.

4.5 The diagram below illustrates high level of targets met or exceeded (97%) and demonstrates excellent performance by the organisations across the programme. Where targets were not met, appropriate actions were suggested after further examination of the reasons.



4.6 A new joint evaluation system has been developed through the work of the Health Inequalities Standing Group to provide a more efficient, single reporting system for those organisations who receive joint funding. Using a systematic and uniform framework for reporting this new approach supports evidence based evaluation for health inequalities activities at a city wide level and examines both impacts as well as outputs.

4.7 Interest in the joint evaluation system has been received from across the UK, including the Joseph Rowntree Foundation, Stirling University, Glasgow University and a number of Local Authorities in England. The Health Inequalities Standing Group is in discussion with academic researchers to further explore the possibility of sharing the merits of the evaluation system to the wider research community.

- 4.8 The initial analysis from the year long pilot shows that the Health Inequalities Grant Programme is delivering good results and having a positive impact on the lives of service users. The results shown in Appendix 4 illustrate both the scale of activities of the entire grant programme as well as showing the impacts that have been compiled at a city wide level for the 8 projects in the pilot study.

**Health Inequalities Grant Programme from 2017/18 onwards**

- 4.9 In order to establish a new grants programme for 2017/18 a new set of funding criteria would need to be developed based on the requirements of the strategic plan 2016-19 to ensure three year investment in relevant services which progress the objectives of the strategic plan are realised. Co-production of this process would require a minimum of 6 months to successfully engage with providers and client groups. This would be completed at the earliest around December 2016. Once criteria had been agreed an application and assessment process would need to be put in place.
- 4.10 In order to award grants from April 2017 the application and assessment process would need to commence by September and conclude in November 2016 to allow unsuccessful applicants a 3 month redundancy notice period where disinvestment is recommended. A breakdown of the required timescale for the grant allocation process is detailed in Appendix 3. The available timescale would not allow a successful co-production process to be undertaken and an open three year application process to be completed by December 2016.
- 4.11 Whilst work is underway to establish the new partnership to coordinate the strategic approach to tackling inequality across community planning partners including the Integration Joint Board, the steering group has not yet been established. Localities are central to the implementation of any strategic approach to tackling health inequality and although work is underway to establish new locality structures and processes for both the Health and Social Care Partnership and the wider Community Planning Partnership these structures are not yet in place.
- 4.12 Clearly there is a need for further work to be undertaken to allow the Integration Joint Board to make informed decisions about investment in work to tackle inequalities in the medium to long term. This work can only be undertaken once the structures and processes currently being put in place have bedded down. The current Health Inequalities Grants Programme is operating well and delivering positive results. It is therefore recommended that Health Inequality Grants be awarded for a further year based on the current funding criteria and that the process of grant renewal for 2017/18 be a closed process with only those organisations receiving funding able to make applications. This approach would:

- continue investment in projects that are making a positive difference
- maintain the provision of valued services for the citizens who use them
- provide some financial stability for organisations that are dependent upon this funding
- allow proposals for the future approach to tackling inequalities and related investment to be developed in a realistic time frame

## Key risks

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- 5.1 There are a number of risks that could arise from any decision made by the Integration Joint Board not to continue to fund third sector organisations to tackle health inequalities from April 2017, including :
- some third sector organisations working in areas of high deprivation may become financially unsustainable. In many cases these are organisations offering services that reduce pressure on formal health and social care services
  - loss of support from organisations or the programme of work which provides preventative community based services could have an effect on presentations at accident and emergency departments or GP services which are presently struggling to cope with demand
  - loss of reputation with GPs and third sector organisations who are beginning to work together around social prescribing
  - Health and social care staff have limited capacity and need to have somewhere to move people onto within communities who can help support their needs. Third sector organisations provide an ideal opportunity to undertake this type of work.

## Financial implications

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- 6.1 The effectiveness of the health Inequalities Grant Programme is augmented through funding leverage estimated at £4.76m, and significant social and financial value through volunteering estimated at approximately £800,000. A drop in match funding levels from the previous year gives an indication of the widespread strain placed on funding streams as cutbacks continue.
- 6.2 A saving of 10% was agreed on payments to third parties through the CEC's Transformation Programme over the period 2015-16 to 2017/18. This saving is based on 2014/15 baseline revenue funding and is intended to be made to overall spend on grants and community contracts by 2017/18. The Health Inequalities Grant Programme achieved 3.3% savings in 2015/16 and a further 3.3% saving in 2016/17, with the final 3.4% saving to be found in 2017/18.

## Involving people

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- 7.1 The development of the new Health Inequalities Grant Programme for 2016-17 was undertaken using a co production process, involving a series of workshops with potential providers and service users as well as the use of self completion questionnaires. The evaluation process currently being used with those organisations receiving funding from both the Council and the NHS has also been produced in partnership with the third sector.
- 7.2 members of the Health Inequalities Standing Group have been involved in the development of this report.

### **Impact on plans of other parties**

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- 8.1 The proposals in this report are of relevance to:
- The Edinburgh Community Planning Partnership's Community Plan
  - The strategic plans of the City of Edinburgh Council, NHS Lothian and the three other Integration Joint Boards in Lothian to the extent that any of these organisations also fund organisations in receipt of grants under the Health Inequalities Grants Programme

### **Background reading/references**

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[New Grant Programme for Prevention of Health Inequality from 2016/17, Edinburgh Integration Joint Board, 25 September 2015](#)

[Health and Inequality Grants Programme, Health Social Care and Housing Committee, 26 January 2016](#)

### **Report author**

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**Rob McCulloch-Graham**

**Chief Officer, Health and Social Care Partnership**

Contact: Wendy Dale, Strategic Planning Manager,

E-mail: [wendy.dale@edinburgh.gov.uk](mailto:wendy.dale@edinburgh.gov.uk)

Tel: 0131 553 8322

### **Links to priorities in the strategic plan**

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Tackling inequalities and preventing poor health and wellbeing outcomes are two of the six key priorities within the Integration Joint Board's Strategic Plan. The Strategic Plan also details a number of actions to tackle inequalities. Action 7 is of particular relevance in relation to the Health Inequalities Grants.

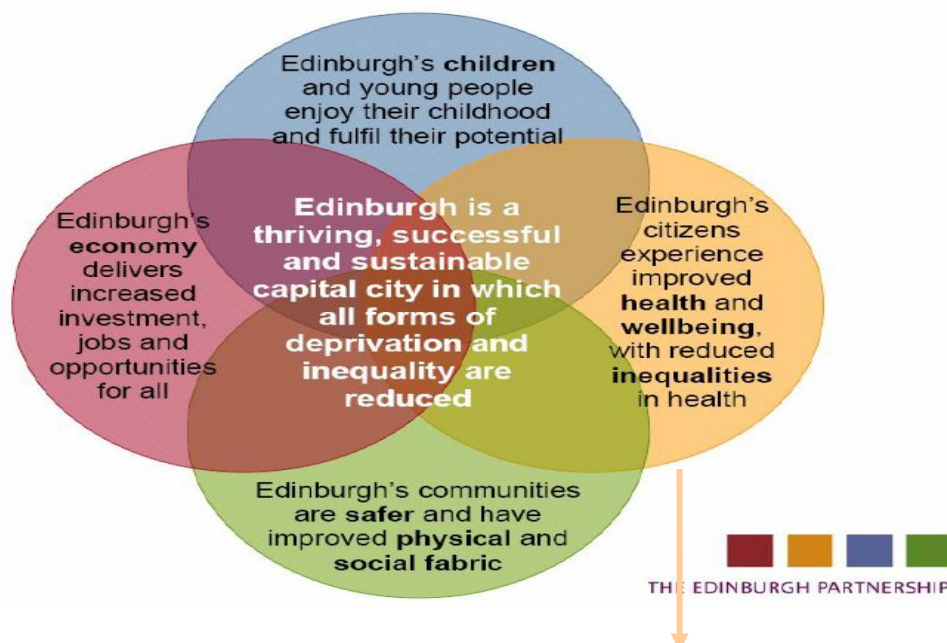
**7. Work with Community Planning Partnership to tackle inequalities**

*During 2016/17 we will work with our community planning partners to:*

- a) determine the most effective way of developing and implementing a coordinated approach to tackling inequalities, including health inequalities, across the City*
- b) deliver the health inequalities grants programme in line with funding decisions made by the Council and NHS Lothian*
- c) assess the impact of the current grants programme on tackling inequalities in order to inform future funding arrangements*

The diagram in Appendix 5 illustrates the linkages between these priorities and the objectives and outcomes between the Health Inequality Funding Criteria and Priorities approved by the Integration Joint Board in September 2015 as the basis for grant funding in 2016/17.





**Health Inequalities Framework**  
Edinburgh Community Health Partnership/ Health and Social Care Partnership

- Objective 1**  
Enable people in Edinburgh to maximise their capabilities and have control over their lives
- Objective 2**  
Create and develop healthy and sustainable places and communities
- Objective 3**  
Strengthen the role and impact of ill-health prevention
- Objective 4**  
Ensure a healthy standard of living for all
- Objective 5**  
Give every child the best start in life; and enable all children and young people to maximise their capabilities and have control over their lives
- Objective 6**  
Create fair employment and good work for all

- Outcomes**  
(1.1) Increased social capital: reduced social isolation; increased community participation and volunteering  
  
(1.2) Increased community capacity: communities of place and interest and cultural bridging  
  
(1.3) Reduce the stigma surrounding poverty and health inequality and tackle discrimination
- Outcomes**  
(2.1) More people live in healthy environments and use greenspace
- Outcomes**  
(3.1) Increased participation in physical activity: including walking, cycling, dance, active travel, gardening  
  
(3.2) Increased number of people eat healthily; increased number of people know how to cook healthy food and how to eat healthily on a budget  
  
(3.3) Reduced damage to physical and mental health from misuse of alcohol and drugs  
  
(3.4) Reduced levels of anxiety and depression  
  
(3.5) Reduced damage to physical and mental health from all forms of abuse and violence
- Outcomes**  
(4.1) Groups at risk of poor health outcomes have increased incomes due to improved access to income maximisation services and advice on problem debt levels

## Appendix 1b: STRATEGIC OBJECTIVES AND PRIORITY OUTCOMES 2016-17

Health Inequalities can only be reduced through an integrated strategy and joint action to reduce inequality and deprivation as a whole through more equity of opportunity for people across the city.

To address and reduce health inequalities a preventive approach requires three types of action that **mitigate** or reduce the severity of the health and social consequences of social inequalities, help individuals and communities **resist** the effects of inequality on health and wellbeing and actions that **undo** the underlying structural inequalities in power and resources.

Any actions or interventions should be targeted in proportion to the level of ill health presented in a community of interest or place. HISG funding primarily focuses on preventive and mitigating actions.

Strategic Objectives	Health Inequalities Priority Outcomes from 2016/17
<b>HI 1:</b> Enable all adults to maximise their capabilities and have control over their lives	(1.1) Increased social capital: reduced social isolation; increased community participation and volunteering (PO1) (1.2) Increased community capacity: communities of place and interest and cultural bridging (PO 2) (1.3) Reduce the stigma surrounding poverty and health inequality and tackle discrimination (PO 3)
<b>HI 2:</b> Create and develop healthy and sustainable places and communities	(2.1) More people live in healthy environments and use greenspace (PO 4)
<b>HI 3:</b> Strengthen the role and impact of ill-health prevention by increasing preventative Interventions and improving take-up of treatment services	(3.1) Increased participation in physical activity: including walking, cycling, dance, active travel, gardening (PO 5) (3.2) Increased number of people eat healthily; increased number of people know how to cook healthy food and how to eat healthily on a budget (PO 6) (3.3) Reduced damage to physical and mental health from misuse of alcohol and drugs (PO 7) (3.4) Reduced levels of anxiety and depression (PO 8) (3.5) Reduced damage to physical and mental health from all forms of abuse and violence (PO 9)
<b>HI 4:</b> Ensure a healthy standard of living for all	(4.1) Increased income due to improved access to income maximisation services and advice on problem debt levels (PO 10)

### KEY PRIORITIES from 2016/17

The Community Health Partnership has set the priority outcomes above for action to reduce health inequality in the objectives which it leads or contributes toward. From these, ten key outcomes have been chosen as priorities for direct action. These are selected to fill gaps, complement existing services or partnership initiatives, and to react to new issues.

<ul style="list-style-type: none"> <li>• <b>Social Capital</b> (1.1) Including local Community Health Initiatives</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Reducing Stigma</b> (1.3)</li> <li>• <b>Healthy Environments</b> (2.1)</li> <li>• <b>Physical Activity</b> (3.1)</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Food and Health</b> (3.2)</li> <li>• <b>Maximising Income</b> (4.1)</li> </ul>
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## Appendix 2

### Summary of project receiving funding from the Health Inequalities Programme for 2016/17 – details of the projects funded by the CHP to be added

Provider Organisation / Service Name	Service type	Service description	Grant received in 2016/17
Bingham & District 50+ Project	Older people activities	To deliver a service of educational adult learning classes, health / fitness classes/activities and social events for local people aged 50+. Employing trained tutors to teach and guide participants and structure their classes to suit a mixed ability group situation. Use community transport of to take older and disabled participants to and from their chosen class and activities. Office base is in Bingham and project uses local venues such as school, community centres and library.	£9,536
Broomhouse Strategy Group	Health Project	The aim of the B&SCHH is to reduce health inequalities and improve the health and well-being of residents of Broomhouse and Sighthill. The B&SCHH offers a drop-in service of advice and signposting from Tuesday to Friday at the Health Strategy Group in Broomhouse (mornings) and at The Broomhouse Centre (afternoons). The B&SCHH co-ordinates an advisory group for local people to address opportunities and put into action health initiatives for the area. The Hub also organises classes and activities to encourage health and well-being, healthy eating and preventive measures. The B&SCHH will set up health groups, organise open days, develop a Time Bank, provide opportunities for volunteering and mentor/supervise volunteers.	£24,735

<b>Provider Organisation / Service Name</b>	<b>Service type</b>	<b>Service description</b>	<b>Grant received in 2016/17</b>
CAE	Advice service	Deliver practical and emotional support to clients seeking advice. Refer clients appropriately for ongoing support with mental/emotional health. Refer clients appropriately for specialist debt advice. Deliver advice on income maximisation and financial capability. Deliver welfare rights advice to protect individual rights (tackling discrimination). Promote availability of advice to relevant agencies, particularly those working with minority groups, and to potential service users (reducing stigma).	£17,100
Carr Gomm	Social prescribing	Carr Gomm delivers an enhanced model of community referral (social prescribing) in Craigmillar, to improve the health, wellbeing and life chances of local people. The project takes a person-centred approach to identify issues, and offers 1-to-1 support to attend relevant services or groups, and establish appropriate new activities where gaps have been identified by local people. This funding integrates evidence-based psychological training into existing work and further develops the project's community catalyst approach. The project takes referrals from a wide range of local agencies, including Primary Care (the Craigmillar Medical Group (CMG); Niddrie Medical Practice (both Deep End practices); the Minority Ethnic Health Inclusion Service (MEHIS)), statutory services (including Housing and Social Work), Third Sector organisations and self-referrals. Support provided is diverse - attending specialist health appointments; accessing therapeutic activities such as arts or music groups; getting support to return to work or help with sorting benefits or debt issues. The project then supports participants to put together a person-centred action plan of how those changes will be made. The service is tailor-made for the individual, depending on their needs, wishes and barriers.	£29,009

<b>Provider Organisation / Service Name</b>	<b>Service type</b>	<b>Service description</b>	<b>Grant received in 2016/17</b>
CHAI	Advice service	The project provides advice and support in dealing with problem debt levels, resulting in more manageable finances and less stress for individuals. Advice, information and representation on issues affecting individual's income is also provided. Clients who are subject to adverse benefit decisions can be advised, supported and represented through the formal Appeal process. Significant additional income is often gained for clients, easing financial pressures and associated stress.	£145,895
Community Ability Network (CAN)	Advice service	To facilitate and signpost individual members to improve quality of life and to empower local residents to move on from lives impaired by disability, poverty and disadvantage. Provide information, advice and guidance on opportunities for training, education, skills development and employment for people with disabilities. Provide opportunities and support for disabled people and others to adopt healthier more active lifestyles. Provide volunteering opportunities and encourage volunteering. Provide money and debt advice to disadvantaged groups. Provide employment advice and support.	£97,035

<b>Provider Organisation / Service Name</b>	<b>Service type</b>	<b>Service description</b>	<b>Grant received in 2016/17</b>
Community One Stop Shop (COSS)	Foodbank	COSS addresses Health Inequalities through the positive work of the Foodbank plus model. The Broomhouse Foodbank plus model is part of the three main services available at COSS which provide a holistic approach to clients using the foodbank including foodbank provision, Citizen's Advice Broomhouse outreach and an employability service. The client base is predominantly people in poverty and at risk of homelessness and debt. The service has a wide impact on clients and helps them through a particularly vulnerable period in their lives. This in turn helps reduce the risk of further health issues due to lack of nutrition, and improves their financial situation. The Citizens Advice worker has a client financial gain figure of over £20,000 per month. The project works with an average 130 foodbank clients per month and Citizens Advice see around 110 clients per month with a current two week waiting time. There are on average 30 employability visits per month	£6,659
Corstorphine youth and community centre	Older peoples activities	Provide a walking group, an activity group, a gentle exercise group and a men's health group.	£7,020

<b>Provider Organisation / Service Name</b>	<b>Service type</b>	<b>Service description</b>	<b>Grant received in 2016/17</b>
Crossreach	Post natal depression	To provide a Postnatal Depression Counselling Service to parents/carers of babies who are affected by Postnatal Depression and living in Burdiehouse, Southhouse, Gracemount, Liberton, Moredun, and the Inch, where a high instance of PND has been identified. To provide Creche facilities for clients attending the PND Counselling sessions to ensure they can have time away from their baby to talk in a counselling setting. To offer support and counselling near to where people live to ensure ease of access to the support. The service will also promote additional follow on support offered by local voluntary and statutory services.	£9,513
Drylaw Neighbourhood Centre	Community Activities	Drylaw Neighbourhood Centre (DNC) is a local community centre managed by local people. Provides educational, social, recreational classes & activities for all in Inverleith and surrounding area e.g. clubs for the elderly and vulnerable, adult keep fit classes, adult computer classes, healthy cooking class, community café, gardening group and junior and senior youth clubs. Hosts a breakfast club at Ferryhill Primary School and delivers Duke Edinburgh award Scheme and Youth Achievement Awards. Other partner organisations that use the centre include Stepping Stones, Community Employability, NW Carers, Edinburgh Support Services, Community Council, parent toddler groups.	£45,759



<b>Provider Organisation / Service Name</b>	<b>Service type</b>	<b>Service description</b>	<b>Grant received in 2016/17</b>
Edinburgh & Lothian Greenspace Trust	Greening for health project	ELGT improves quality of life for Edinburgh Communities by improving their local environment. Access to quality local greenspaces has a positive impact on health and wellbeing of individuals, particularly those affected by inequalities. ELGT works with CEC, communities, agencies and partners to create sustainable, well-managed and accessible greenspaces. ELGT creates and improves community gardens, parks, school grounds, woodlands and other greenspaces. Services also include community consultation and engagement, project development, fundraising and implementation of capital improvement projects. Garden site development are concentrated in areas of deprivation and with groups which experience homelessness, alcohol and drug misuse, older people and mental health issues.	£70,406
Edinburgh Community Food	Healthy Eating Project	ECF provides a range of services and activities promoting healthy eating and tackling health inequalities across the city particularly with people on low incomes, in poor communities and with marginalised communities of interest. Food and Health Development – the project delivers food and health activities including cooking courses, nutrition workshops, menu planning, eating on a budget, healthy eating and health promotion sessions. Training – as an accredited training centre for REHIS, ECF delivers certificated courses in Introduction to Food Hygiene, Elementary Food Hygiene and Elementary Food and Health as well as managing the Food and Health Training Hub. Community Food Co-ops - the project supplies and supports 8 community food co-ops including support and training for the co-op volunteers. In addition to the above, the project operates as a social enterprise running six outlets in Primary Care settings as well as deliveries to organisations and businesses across Edinburgh.	£143,837

<b>Provider Organisation / Service Name</b>	<b>Service type</b>	<b>Service description</b>	<b>Grant received in 2016/17</b>
Feniks	Community activities - Polish community	Feniks delivers three 'Conversation Cafés' encouraging cultural bridging in Leith and bringing together people from different ethnic backgrounds for mutual support on immigration and health issues. The part time Volunteer Coordinator (two days per week) recruits, supervises and provides prevention training suitable to the needs of 10 - 15 volunteers. The volunteers deliver the conversation sessions in a welcoming, safe spaces for people to participate in activities relating to health and wellbeing depending on their needs. This project also provides 3 workshops per month for people at risk of low mood, depression or isolation and complements Feniks's 'See Me'-funded project tackling stigma and mental health within the Polish community by training Polish Community Champions.	£9,413
Fresh Start	Homeless	Fresh Start's Social and Practical Support Services deliver a range of services to people in Edinburgh who have experienced or are at risk of homelessness with support and skills to help them live independently in the community. The services are delivered by volunteers who provide help to address practical issues, teach new life skills and help people gain self-confidence, and assist Fresh Start to address social exclusion and isolation for this vulnerable client group. The services provided include Hit Squads which help vulnerable individuals to establish and maintain their tenancies (300 Households), cooking and budgeting classes (180 Clients), referrals from support agencies (500 Clients), food growing sessions (45 Clients), social circles drop ins to address social isolation (120 Clients) and the development of a volunteer network involving up to 90 Volunteers.	£37,565

<b>Provider Organisation / Service Name</b>	<b>Service type</b>	<b>Service description</b>	<b>Grant received in 2016/17</b>
Gorgie City Farm	Healthy Eating Project	Deliver 'Fork to Fork' Cookery sessions to encourage people to grow and prepare own food. Provide Volunteering opportunities for regular 'green space' physical activity for inactive people with additional needs. Provide volunteering opportunities for adults to get hands-on experience of farm animal husbandry.	£17,977
GP Welfare Rights (NHS Lothian)	Advice service	This project is based in Based in 16 GP practices, primarily in areas of deprivation in Edinburgh and provides welfare rights advice, casework and representation; debt management; representation at appeal tribunals; employability support; housing advice, casework and representation; and training/briefings for NHS staff on the welfare and financial inclusion agenda. The project aims to tackle health inequalities through the reduction of poverty and maximisation of income. Evidence demonstrates that, in relation to the Edinburgh outcomes, this service makes a direct and positive contribution towards the improvement of mental health and well-being; improvement of health and well-being of people with disabilities; and a reduction of deprivation and all forms of inequality.	£54,542
Granton Information Centre	Advice service	The project provides responses to problem levels of debt, including establishment of debt repayment programmes and court representation; responses to enquiries relating to income maximisation, income maintenance, health benefits and other issues, including casework and tribunal representation; Crisis Drop in' enquiries, including the provision of emergency food parcels where required	£138,239

<b>Provider Organisation / Service Name</b>	<b>Service type</b>	<b>Service description</b>	<b>Grant received in 2016/17</b>
Health All Round	Health Project	Health All Round (HAR) is a Community Health Project situated in the Gorgie Dalry area of Edinburgh. Using a Community Development approach HAR seeks to improve and maintain health and well-being in Gorgie Dalry and surrounding areas and to contribute to the reduction of health inequalities within the city of Edinburgh. HAR averages around 5000 visits (service episodes) per year and sees 100-150 people per week. Activities include: exercise and walking groups; gardening, cookery & healthy eating/weight management; a range of activities to improve mental wellbeing, cultural bridging and employability.	£58,142
LGBT Centre for Health and Wellbeing	Community Activies for LGBT community	The project is a Healthy Living Centre which promotes the health, wellbeing and equality of lesbian, gay, bisexual and transgender (LGBT) people. It provides a varied programme of services, most delivered from its Edinburgh base. LGBT people continue to be a very marginalised and invisible minority. Whilst there have been significant positive changes in legislation, the day-to-day lived experience of many is that stigma, discrimination and prejudice continue. Discriminatory attitudes can have a devastating effect on self esteem, often leading to poor mental and physical health and social isolation. The organisation's objectives are to provide a programme of activities which tackle the life circumstances that contribute to ill-health; reduce levels of isolation and social exclusion; strengthen the capacity of individuals to adopt and sustain healthy lifestyles and to ensure that LGBT people have equity of access to mainstream services and information which are responsive to their needs.	£43,425

Provider Organisation / Service Name	Service type	Service description	Grant received in 2016/17
Link Up	mental health	<p>Provide a women only support group in the evening for women living with a mental health condition or illness for a minimum of 6 and a maximum of 12 registered members. Delivery of a weekly 'Saturday Coffee Morning' aimed at women living with a mental health condition or illness. No referral necessary. Creche provision provided. Each session will last for two hours. And will fill a gap in Link Up Women's Support Centre's current provision providing a more flexible service and one that can be accessed by women whose employment, childcare or caring responsibilities act as a barrier to attending during the day during the week. The 'Saturday Coffee Morning' will provide a socially connecting, safe space during weekend hours when access to other services is restricted. Each programme will have a mix of activities and workshops that cover a range of key areas. The following examples have all been taken from recent programmes within the Centre:</p> <p><i>emotional wellbeing</i> – positive affirmation work, mindfulness meditation, life management skills, laughter workshop, <i>physical wellbeing</i> – food and it's relation to mood, walking activities, opportunities to try things such as 'armchair pilates', badminton and zumba as a group, <i>opportunities to learn new skills, try new things and build confidence</i> – creative writing, craft based workshops such as stained glass window work using paper and card making , knitting and crochet.</p>	£14,814

Provider Organisation / Service Name	Service type	Service description	Grant received in 2016/17
MECOPP	BME	Individual health improvement plans for 40 – 60 beneficiaries per year. Introductory health information/awareness sessions to support behavioural and attitudinal change and reduce. Structured educational workshops to develop skills and knowledge, e.g. healthy cooking and nutrition (6 per year / 50 – 60 beneficiaries). Physical activity programme including gender specific activities (e.g. walking groups, cycling groups, yoga, tai chi, seated exercise, fishing, walking football) Minimum 6 activity groups per year. Targeted support to individuals with a long term condition, e.g. diabetes, arthritis (20 - 30 beneficiaries per year). Casework support to improve the socio-economic circumstances of beneficiaries (20 – 30 beneficiaries per year)	£22,500
Muirhouse Millennium Centre	Community Activities	The project provides training in numeracy /literacy /computing /Internet and life skills and job placements & college placements to motivate and help self development. Provides access for Community Employability/Community Renewal, Telford/Stevenson College to see clients and also make referrals. Enables children to access healthy snacks at no cost on a regular basis. Provides cooking classes for all ages producing low cost nutritional healthy meals. Provides opportunities for local residents to access various health and fitness programmes and live in a healthy environment and have access to green space and information and support for local residents from the Chest Heart & Stroke Association Scotland whom we are affiliated to. The project aims to improve mental health and well-being of older people. It offers support to single parents from the Muirhouse area through social and group work sessions and provides a safe and secure environment for counselling/mediation sessions. It also provides weight management and exercise groups.	£49,659

<b>Provider Organisation / Service Name</b>	<b>Service type</b>	<b>Service description</b>	<b>Grant received in 2016/17</b>
Pilton Community Health Project	Health Project	PCHP is a generic community health project. It provides a range of activities including support to volunteers, providing the Women Supporting Women project which delivers interventions to vulnerable women living in the North Edinburgh area experiencing ranging mental health issues and abuse related issues including individual therapeutic and group supports with a high quality crèche service to allow parents access to the services. The project offers individual and group Parenting Early Education Programme (PEEP) sessions to mothers and children to improve their attachment and strengthen the bonding. The project also provides healthy eating services which aims to overcome identified barriers to healthy eating. It delivers outreach work with food stalls and cooking demonstrations and 'taster' cooking sessions. The project follows this outreach work up with in house cooking sessions, food hygiene and food nutrition courses.	£74,741
South Edinburgh CHI (Virtual Community Flat Network)	Health Project	The South Edinburgh Virtual Community Flats Network provides a forum for local people and partner agencies to engage effectively with each other and to enhance partnership working between the local community and multi agency services. The project delivers local training sessions for partner organisations, provides health information sessions in the format of Drop-Ins via libraries and community centres and encourages increased access to NHS Inform and other appropriate health and social care resources. It works with volunteers and holds community events around health and well being themes. It supports a local Survivors group, the South Edinburgh Domestic Abuse Action group & THE Older Peoples Action Group. The project is also developing a social prescribing service with local GP practices.	£42,810

<b>Provider Organisation / Service Name</b>	<b>Service type</b>	<b>Service description</b>	<b>Grant received in 2016/17</b>
South Edinburgh Amenities Group (SEAG)	Community Transport	SEAG provides a with-driver transport service to 30 registered groups in South Edinburgh in specially adapted, mobility accessible minibuses. This allows groups of the elderly, disabled and those (of any age) living in areas of deprivation to access day centres, lunch clubs, and other social, leisure and health activities. This vital enabling service principally underpins the health inequalities work of our registered user groups in the Liberton Gilmerton and South Central Neighbourhood Partnership areas.	£74,165
The Ripple (£30,678+£5414)	Community Activities	The project aims to improve health & wellbeing for all ages in Restalrig, Lochend, Craigentiny. It runs a daily Lunch Club and weekly Social Clubs for older people; Toddler groups; Children's performing arts group; range of youth services including Drop in Youth Café; Mobile Youth Facility; Restalrig Open Spaces for targeted young people in partnership with police; Sexual Health Clinic; Detached Streetwork; Ripple Buddies (referred children linked with supported youth mentors); Listening support for adults in crisis; Gentle exercise; Creative writing; Knitting network and Walking groups; Community newspaper and Community café. We are also managing and developing Restalrig Lochend Community Hub as a vibrant community venue for health and wellbeing accommodating appropriate agencies and support services including Social group for adults with learning difficulties; Tenants' arrears advice; Employment projects; Benefits advice, Food co-op; Creche, Third Age computer classes; English language classes; Zumba Public meetings, Restalrig Festival. The project works with 80+ volunteers and numerous partnerships.	£36,092



<b>Provider Organisation / Service Name</b>	<b>Service type</b>	<b>Service description</b>	<b>Grant received in 2016/17</b>
Volunteer Centre Edinburgh	Timebank	This project supports Timebanks which is an assets-based approach in which individuals and communities share skills for reciprocal benefit. This builds social capital & strong community networks, reduces isolation & health inequalities, & improves health and wellbeing. VCE supports a timebank in North Edinburgh. The project supports 100 timebank members to use/share their skills and talents to help other timebank members through Individual “good neighbour” activities such as shopping, helping to move furniture, booking train tickets on-line, small DIY tasks; Collective activities such as community meals, reflecting the diversity of North Edinburgh, a community choir, a knitting Group which provides multicultural interaction and inter-generational learning, and the Community Chat Café which acts as a cultural bridging project where BME women are able to practice conversational English, and make local connections.	£26,899
Welcoming Association	Community activities for migrants	The Welcoming delivers to newly arrived and existing refugee and migrant participants. The project aims to reduce levels of anxiety/depression and increasing community capacity through its programme of activities including which aim to build confidence, independence, and reduce social isolation, anxiety and depression by connecting with other migrant and refugee communities for friendship, support and guidance for 100 participants per year. It provides weekly workshops on Scottish heritage, culture, social history, politics, food and music with visits to places of interest to enhance knowledge and understanding of Scotland to make it easier to form friendships with the local Scottish communities in which they reside. Opportunities to volunteer with local projects to develop understanding of local community issues, politics and services, and in turn, contribute their own knowledge, skills and experiences gained overseas. It provides opportunities for volunteers to assist the Welcoming in its collaborations	£9,590

Provider Organisation / Service Name	Service type	Service description	Grant received in 2016/17
		with local projects and organisations in tackling climate change, challenging hate-crime and sectarianism, raising cultural awareness and welcoming new migrant and refugee communities. It also aims to increase migrant's income due to improved access to income maximisation services, advice on problem debt levels and housing issues as well as increased participation in physical activity and enabling migrants to cook and eat healthily on a budget.	
Wester Hailes Health Agency (WHHA)	Health Project	The project takes on a central role in carrying out local consultation and community involvement, raising awareness of health issues and participates in the formulation of the local health plans. It provides specialised support services for people with substance misuse problems, encourages the take up of physical activity and exercise in the community and promotes improvement in dietary habits and nutrition through healthy eating and cooking classes as well as growing projects through it Edible Edinburgh project. The project also provides counselling and cognitive behavioural therapy, 1-1 solution focused support and group work for people who are suffering from mental health difficulties. It supports a time bank for local people and provides a health drop in service for BME community. It offers a range of volunteering opportunities for local people and provides support for people affected by cancer.	£57,131

<b>Provider Organisation / Service Name</b>	<b>Service type</b>	<b>Service description</b>	<b>Grant received in 2016/17</b>
WHALE	Art and health project	WHALE Arts delivers a range of creative activities to engage and inspire people who live in an area which is in the lowest 5% on the SIMD Health rank and who experience a wide range of health inequalities. The project runs regular groups and classes in Drama, Dance, Visual Arts, Textiles, Creative Gardening, Music, Book Groups, and supports people to access creative/cultural events outwith their own community. All activities are part of an integrated approach to local issues; engage and empower our community; relate to National, Edinburgh City, Local Neighbourhood and Reduce Health Inequalities.	£41,357

**Appendix 3:**  
**TIMETABLE for 2017/18 GRANTS PROCESS**  
**Health Inequality Grant Programme**

<b>Month</b>	<b>Item</b>	<b>Date</b>
<b><u>August 16</u></b>	Revise Health Inequality Grant Programme application form, guidance, etc  Information/briefing session for Health Inequality applicants	mid August  end August
<b><u>Sept 16</u></b>	Funding criteria and application/proposal forms available on-line  Health Inequality application process open	7 Sept  9 Sept
<b><u>Oct 16</u></b>	Deadline for application/proposal forms to be returned  IJB/partnership assessments of applications/proposals	7 Oct  end Oct
<b><u>Nov 16</u></b>	Health Inequality Standing Group meeting/IJB Funding Panels Equality Impact Assessments to be complete where required Partnership meeting to agree recommendations Draft IJB report Disinvestments – consultation and reporting Balance grant recommendations to known budgets	Early Nov  Mid Nov  End Nov
<b><u>Dec 16</u></b>	Report for on recommendations for 17/18 grant allocation finalised	Mid Dec
<b><u>Jan 17</u></b>	Agenda Planning for Integration Joint Board (TBC) Integration Joint Board (Dates TBC)	Jan 2017/ Feb 2017
<b><u>Feb 17</u></b>	Budget setting by Council	Feb 17
<b><u>Mar 17</u></b>	Implement grant/contract awards from Council report through agreements or contract documents, initial payments	1 April 17

## Appendix 4 Evaluation of Health Inequalities Grant Programme 2014/15

### HEALTHINEQUALITIES GRANT PROGRAMME 2014/15

Health inequalities projects funded across Edinburgh have proven to be an effective means to tackle inequalities across the City.



OF PARTICIPANTS FELT THAT ACTIVITIES HAD **POSITIVELY** IMPACTED THEIR LIVES

IMPACT DATA FROM **8** PILOT PROJECTS SHOWED THAT...

Over **95%** of participants felt **LESS SOCIALLY ISOLATED**



**97%** felt a difference with **BETTER MENTAL HEALTH**



Over **98%** had changed and **INCREASED PHYSICAL ACTIVITY**



**85%** people reported eating **MORE HEALTHY FOOD**



*"I feel less anxious and I feel relieved that I understand what was happening. I feel myself again and I can cope with problems better."*



**98%** feel more confident to seek help with debt issues



**94%** are using greenspace and local parks more often

#### SERVICE USERS BY PRIORITY OUTCOME

13890	■■■■■■■■■■	Increased income
3805	■■■■	Increased social capital
3094	■■■■	Increased physical activity
3049	■■■■	Increased numbers eating healthily
2561	■■■■	Increased community capacity
1811	■■■■	Reduced levels of anxiety and depression
1117	■■■■	Increased greenspace usage
349	■■■■	Improved sexual health
199	■■■■	Reduced drug and alcohol misuse
266	■■■■	Other Outcomes

**30,141** PEOPLE

BENEFITED FROM ACTIVITIES

**97%** ACTION PLAN IMPACTS MET

**12** PRIORITY OUTCOMES

**28** HEALTH PROJECTS FUNDED

*"(I) increased my cooking skills and knowledge about healthy eating... (I'm) cooking more at home, I also learnt to cook meals on a budget..."*

*"A great help. I wasn't able to cope when I started, couldn't work or see friends. I am now in employment and have taken control of my life. The skills learnt here will always be with me."*



In the pilot, people attended on average **13** SESSIONS PER ACTIVITY

That's over **120,116** ATTENDANCES AT SESSIONS for pilot projects

Produced in collaboration between  
**NHS** Lothian  
**EDINBURGH** THE CITY OF EDINBURGH COUNCIL  
**Lothian** Community Health Initiatives' Forum

## Appendix 5

### Linkages between Strategic Plan Key Priorities 2016-19 and Health Inequality Funding Criteria and Priorities 2016/17

