



Knowing Me, Knowing You 2 Glasgow



At The IET Teacher Building, Glasgow

**A Learning Exchange Between
Local Community and Voluntary Sector Organisations
And National Policy Makers**

3rd March 2015

Introduction

This event is one of a series of events which have been collaboratively organised over two years by Community Food and Health Scotland, CFHS (now within NHS, Health Scotland), Community Health Exchange, CHEX (part of the Scottish Community Development Centre, SCDC) and Voluntary Health Scotland, VHS. These events have built on the lessons first learnt in a pilot programme organised and delivered in 2012/13. The focus for all of these events has been how increased understanding between sectors can help to address Scotland's health inequalities. Funding was provided for the programme of learning exchanges by The Third Sector Unit of Scottish Government.

This particular event took place in the IET, Teacher Building in Glasgow when ten Scottish Government officials and two members of NHS national bodies gathered with 17 representatives of local community and voluntary sector organisations to discuss their differing perspectives of the shared task of tackling Scotland's seemingly intractable health inequalities.

Input was provided by three speakers working in communities experiencing some of Scotland's worst inequalities. They spoke of their personal experience of taking practical steps that they are involved in on a daily basis to support positive change for individuals and groups of people living in those communities. They were specifically briefed to provide personal testimony of those experiences using a method called Story Dialogue. Their stories were then used to stimulate round table discussion of what participants now felt could be done to enhance understanding between their sectors and to improve efforts to reverse inequalities in health in Scotland for the future.

The organisers wish to express their grateful thanks to the speakers on the day: Nicky Thomson of the Good Morning Service, Amber Cully of Drumchapel L.I.F.E., Ian Shankland of Lanarkshire Community Food and Health Partnership our Chairperson for the event Pauline Craig of NHS Health Scotland and Gareth Allan of the Third Sector Unit of Scottish Government who authorised the funding.

Welcome and Introduction to the Event

Pauline Craig of NHS Health Scotland chaired the day. Pauline summarised the current policy environment making reference to the fact that community involvement in policy and strategy came strongly to the fore in the run up to the Scottish referendum. This has been further enhanced by the Community Empowerment (Scotland) Bill as it makes its way through the Scottish Parliament. She concluded that the context in Scotland is therefore very supportive of opportunities for policy development and community-led health to come together to understand better each other's perspectives in order to create opportunities for co-producing strategies.

Pauline provided a summary of previous learning exchanges in which CHEX, VHS and Community Food and Health Scotland have collaborated and spoke of her confidence that this learning exchange would be equally as productive.

Pauline asked participants to introduce themselves to somebody they had not previously known and exchange their reason for being part of today's event and what they hoped to gain by taking part.



Commenting on the positive buzz in the air Pauline reminded us of the importance of understanding the work undertaken across the sectors in terms of tackling Scotland's health inequalities today. The need for policy makers and those working at a community level to understand each other better and the potential benefits of realigning our more traditional ways of working.

Pauline then introduced Elspeth Gracey from Community Health Exchange, CHEX, to explain what would happen in the course of the session.

'Story Dialogue' Methodology

Elspeth introduced the concept of Story Dialogue in which people describe a personal experience to highlight the 'generative theme' – in this case 'how we are tackling health inequalities'. Each of our three 'story tellers' then spoke of their own experiences of working to tackle health inequalities and their input was used to stimulate small group discussions at tables of delegates from across the sectors.

Commissioning Community-led Health Services: A Recent Success Story

The first speaker was Nicky Thomson from the Good Morning Service. Nicky told us briefly about the organisation and its successful track record of working as a telephone befriending service for over 14 years in the Glasgow area.

The project came together when people felt that something needed to be done to support older people living alone following the unrecognised death of an older local resident. Their service now provides in excess of 52,000 calls a year to older people every morning and if a call is unanswered this triggers an alert system to identify if there is a problem needing emergency intervention



or if somebody is merely at an appointment that they haven't notified the Good Morning staff about.

Based on their success in their 'home territory' of Glasgow they were encouraged to bid for a service contract in the NHS Ayrshire and Arran Health Board area. Nicky explained that although this was a Health Board contract their success in

becoming the service provider still required strenuous efforts on their part to secure the referral systems that they had hoped would readily flow from having received Health Board funding for their programme.

Nicky described the NHS staff who did refer people to them as "*golden nuggets of referral*". Some NHS staff had expressed concern about their liability in referring to an outside service provider, an area of concern long overcome in Glasgow. They also asked questions about how long the service would be available: awareness that the contract was only for a year also brought questions of what would happen after this funding period elapsed. Ultimately, having exhausted all the internal ways of raising awareness of their service, and with numbers of referrals still falling short of expectations, the service used local press and media to advertise its availability. When asked what had been the most successful way of 'getting the word out' Nicky told us that an appearance on STV when a Scottish Government Minister had visited them had increased referrals more than any other single outlet. Despite all these challenges the Good Morning Service has provided its service for Ayrshire and Arran and they are hopeful that the value of their service will be recognised and that future funding will flow in Ayrshire as it has in Glasgow, offering older people a valuable life line for the future.

Tackling Inequality in Drumchapel Through Debt and Income Advice

Amber Cully, Money and Financial Capability Advisor from Drumchapel L.I.F.E. (Living is for Everyone) told us of her previous work for a private sector provider contracted to support people back to work. Having worked closely with staff in statutory services Amber spoke of her understanding of people in statutory services who may be required to process overwhelming numbers of people in need of support and said *“It can be easy to forget that people are people.”*

Amber described the very different organisational culture in which she now finds herself through her work at Drumchapel L.I.F.E. She illustrated the work she does through the story of two sisters struggling to survive both financially and emotionally on a daily basis. She highlighted the difference between what



a ‘basic service’ would provide for them and what she is able to provide in terms of support for the sisters. She told us that a basic service which dealt only with the issues with which they first presented would never have been able to deal with the underlying causes of the women’s financial and emotional distress. By

spending time with the sisters and building trust with them Amber was able to more fully understand much more of what was at play in their lives and help them to find a way through all of that to a more secure place both physically and emotionally. This is likely to mean that the positive changes that they have made in their day to day living will be sustainable and that they will not become ‘revolving door’ people seeking basic services for crisis management every few months.

By working in this way Amber and the team at Drumchapel L.I.F.E. are confident they are saving costs in the longer run. She suggested that future services should recognise this way of working to meet people’s wider needs by providing more ‘tailored’ programmes. This would be of benefit to all. To the individuals themselves who are supported into lasting positive changes in their lives and to the services that currently provide support to them on a recurring basis. Having made long-lasting changes many users of services become independent of any support, thus reducing the resources needed within statutory provision. Provision of a basic service would not have had such a good outcome and would have continued dependency on services, ultimately a more costly process.

At the end of her very insightful input Amber concluded by posing a question for us all *“What can I do to change inequalities?”*

Tackling food inequality in North Lanarkshire

Ian Shankland from Lanarkshire Community Food and Health Partnership described his experiences of “doing stuff with food” in Lanarkshire in an organisation that has supplied a range of food initiatives for more than 20 years. He spoke of the increasing awareness of staff and volunteers of people seeking “*the cheapest possible, or indeed free food*”. He said that these were either those in work “*struggling to get through to their next pay cheque or those on benefits awaiting their benefits payment*”. 30% of recipients were using the food bank because of benefit delays and 28% because of benefit ‘sanctions’. Ian described the organisation’s experience of the rise in severe food poverty and told us that “*Food poverty is not about food but about poverty – this country doesn’t have a lack of food.*”

He went on to explain the concerns of volunteers and staff that simply giving away food to those in emergency need was not really addressing the underlying issues. He asked us to consider “*Is it a human right to have a **choice** of what to eat?*”

Ian told us that food banks work best when linked to other organisations and listed the range of other local organisations to which they could refer their customers.

As well as food people are also given nutritional and cooking information and the opportunity to be involved in cooking and nutrition classes.

Ian told us that volunteers in particular were increasingly concerned that they were now delivering what should be ‘frontline services’ and many reported feelings of isolation with a sense that “*this is not what we signed up for*”. Clients themselves speak in terms of “*being punished*” for having to resort to the use of food banks.



Ian said he felt that the problem was growing faster than the policy and that within the community and voluntary sector there was now a sense of being unsure about whether we are part of the problem rather than part of the solution, since by continuing to provide emergency food we diminish the incentive to solve the underlying causes of food poverty.

Ian concluded his remarks by sharing with us an experience which brings into sharp focus the face of inequality in Scotland today. In the week between Christmas and New Year he was asked by a Health Visitor to deliver an emergency food package to a family living near his own home. He was met by a family of two adults and three children, all wearing their outdoor coats in an effort to keep warm in their unheated house which was without electricity. Finding people in such difficult circumstances at a time in the year when many others in the streets around them were able to indulge in the traditional seasonal surplus of food and gifts was a stark reminder of those facing the challenges of inequality on a daily basis.



Themes from Discussions

Following the input of each of our story tellers, discussions took place at each table. Participants captured their particular insights on post-it notes which were subsequently sorted into themes. The discussions from the tables are summarised here under the headings of those themes.

Policy implementation

People discussed the practical implementation of policy. Some felt it important to plan to **implement** policy, *“not just to plan the policy”*. A view in the room was that this should connect to the local issues upon which policy decisions are made.

“Policy makers mustn’t become disconnected from the issues they are making decisions on”

Quality of staff

The quality of staff and the challenges involved in the recruitment of quality staff with the right value base was also discussed. Recognising people who *“go that extra mile”* when delivering services was felt to be important as were the competencies and skills required.

“Bringing ‘self’ into the service – being approachable in order to get the whole picture”

“Behaviour more important or at least as important as competences and skills”

Funding

The discussion relating to funding covered many issues including the feedback required for funders and the resources required to obtain funding.

A suggestion was made that a less formal arrangement between funders and funded organisations would bring some benefits for both. E.g being able to be more honest about what hasn't worked in an informal setting.

“Need to let people do what they are good at and relax system requirements”

“Monitoring and evaluation takes over!”

It was felt that a better understanding of preventative work would allow the third sector to be more easily resourced.

“Better understanding of value, cost and outcomes of preventative services so that 3rd sector can concentrate on what they do well”

Partnership Working

Much of the discussion centred around partnership working across all sectors. This included exploration of the barriers to effective collaboration with primary care which can be challenging due to statutory commitments within primary care services.

“Cultural change is needed, common goals. It's about people. Collaboration / remove barriers”

“Using GP surgeries as a communication channel is a challenge”

“A daunting task to infiltrate the inner sanctum of primary care”

“GPs under pressure – so much info to communicate”

People also talked about the time required to undertake meaningful partnership working and that since many organisations are working at full capacity to deliver services it was felt that partnership working isn't afforded the time they would like to invest in it. This was recognised by all sectors.

Discussion continued around the challenges of partnership working and the particular challenges for the 3rd Sector. Some felt the 3rd sector may be 'masking issues' so that national solutions may not be forthcoming. E.g. by

providing increasing numbers of food banks the underlying issue of food poverty remains unaddressed.

“Do 3rd sector organisations plaster over problems so that a national solution doesn’t have to be sought?”

“In danger of food banks becoming part of the system and accepted as such when they should not be!”

The wide ranging discussion at the tables highlighted varying insights but at one table they captured the universality of the task which was illuminated by the event for them.

“Learnt that we’re all facing the same issues!”

Reflections on the Day

As the afternoon drew to a close Chairperson Pauline Craig facilitated a general discussion by summarising that we find ourselves facing some very serious situations and we have examples of some of the very good work being done. She then posed the following questions.

- What have you learned?
- What actions could we take?
- Have we got the right policies?

The first speaker suggested that those of us working in local organisations need to capture how we are supplementing the work of the statutory sector. He suggested that we need to share more not just what works but also what doesn’t *“Don’t hide it, we can all learn from it.”*

Sharon Colvin from 3D Drumchapel said that local organisations in Drumchapel come together in an ‘early years collaborative’.

Oriane Brunet from Woodlands Community Gardens spoke of providing free meals in their community café and sign posting people to other services. Also, providing people with information e.g. how to appeal after having been ‘sanctioned’ and so blocked from receiving benefits.

Pauline asked about the common factors between all of these pieces of work and responses suggested that it was all about connections. One participant said *“Just get people to talk to one another”*.

Ian Shankland from Lanarkshire Community Food and Health Partnership suggested that when people come together in networks or forums it is better if there are clear understandings of what the roles are. He said that events like this build trust and that commissioning can be built on good relationships.

Pauline invited Shirley Laing, a senior civil servant in the Scottish Government, to respond to the points raised in the discussion. Shirley said she had been considering *“What is government’s role in all of this? What did we do before food banks? What is it about the system that needs to change? What does a socially just Scotland look like?”*

Pauline’s concluding remarks reminded us that *“All of this work requires us to work across existing boundaries and sectors in constructive partnership and that is why events which allow the sectors to come together and learn more of each other are so valuable.”*



Lessons learned

Sharing Practice

The learning exchange programme organisers have learned that creating a space for people to come together to share practice has been highly beneficial as evidenced by respondents comments in our evaluations.

“A better understanding of on the ground community-led services, the audiences that they deal with and the huge and diverse range of challenges that they face” Scottish Government participant

Organisers have facilitated the sharing of practice and provided opportunities for meaningful conversations between policy makers and practitioners to take place. Each event has offered the opportunity for further engagement and some staff from Scottish Government have attended a series of events and visits which have allowed them to build their knowledge cumulatively from experience of ‘on the ground’ practice.

Local Visits

Planning smaller learning exchange visits within local organisations was logistically challenging. However, these visits proved to be greatly valued by visitors as they provided people with the opportunity to explore the issues faced locally which they could then relate to the policy arenas within their own policy remit.

Sequence of events

Having the events where people came together first and then the smaller visits worked well. This allowed relationships to form in advance and to be built upon during the visits.

Bringing people together in this way can lead to further developmental opportunities. E.g. Several participants from Scottish Government have follow up with further contact with those they have met at these events.

Clear communication

Organisers felt it important to communicate clearly the benefits of attending and participating in the learning exchange programme. Effective communication ensured that people were fully engaged in the programme and knew what to expect before attending both the dialogue sessions and field visits.

Feedback from participants has been that the opportunity to experiencing at first-hand how organisations tackle health inequalities at a local level was particularly beneficial and the initial promotional material which highlighted this engendered considerable interest in these events including requests for follow up information even from those who were not available to attend the actual events.

Additional resources

Video clips from the day are available below:

- 1) <https://www.youtube.com/watch?v=ATw-nSwAe0I>
- 2) <https://www.youtube.com/watch?v=gHTmxBW6t6Q>
- 3) <https://www.youtube.com/watch?v=fcRslzDKlpo>

Two subsequent visits were offered to participants at this event; a visit to Lothian Community Health Initiatives Forum on 24th March 2015 and a Day in Drumchapel on 31st March 2015 visiting three local organisations. Reports of these visits and video clips taken on the day are also available.

Previous reports from earlier events are available on CHEX, VHS and Community Food and Health's websites, see last page.

Evaluation

An evaluation form was used on the day to assess the views of participants of the event. Here is the analysis of those evaluations, including a representative selection of quotations from their written responses.

All ten civil servants from the Scottish Government and both NHS staff returned an evaluation form. Twelve of the seventeen community and voluntary sector organisation participants also returned forms. Of those respondents here are the tables of how they viewed the event in terms of its usefulness, organisation and whether they felt the intended outcomes were met.

Relevance and Organisation		Excellent	Fair	Poor
It was interesting and informative	S Gvt/NHS	9	1	2
	Com &Vol	13	0	0
It was relevant for me and my organisation	S Gvt/NHS	9	2	1
	Com &Vol	11	1	1
It was well organised	S Gvt/NHS	9	2	1
	Com &Vol	13	0	0

Event Outcomes		Yes	Partly	No
Participants will have increased understanding of the challenges, limitations and barriers facing those working in other sectors	S Gvt/NHS	12	0	0
	Com &Vol	12	1	0
Participants will have increased understanding of the skills and expertise used by those working in other sectors	S Gvt/NHS	10	2	0
	Com &Vol	11	2	0
Participants will have increased understanding of how to engage with those working in other sectors	S Gvt/NHS	8	4	0
	Com &Vol	10	3	0

What was the most useful part of today's event and why?

Scottish Government and NHS

- “The real life examples provided by speakers, the opportunity to discuss them and the passion of the people round the table. It generated thoughts and ideas.”
- “Helpful to hear about the barriers and challenges faced by the third sector in obtaining and evaluating funding”
- “Meeting people who are approaching the same issues from a totally different perspective”
- “Talking to different people – 3 excellent talks – really ties in with issues we’re grappling with”

- “A better understanding of on the ground community-led services, the audiences that they deal with and the huge and diverse range of challenges that they face”
- “Some of the ideas generated in discussion – particularly around procurement and contracting support as we move towards integration authorities taking on commissioning.”

Community and Voluntary Sector

- “Talks from orgs – very inspiring and interesting. Table discussions / whole format was great”
- “This was a great opportunity for 3rd Sector organisations to speak face to face with Scottish Government civil servants to explain the complex needs of the sector”
- “In-depth discussions with people involved in different sectors with different types and lengths of experiences”
- “Round table discussions – good to hear and debate different perspectives – learn where others are coming from and the role they play etc.”

Please describe any specific actions which you will take based on your experience today

Scottish Government and Civil Service and NHS

- “I will be thinking of how we can use these new found projects to integrate into policy”
- “Look to join up with the 3rd Sector across national campaign work”
- “Thinking about the key issues that can affect policies and equalities”
- “The stories are bound to arise in conversations – in my team we are doing a lot of thinking about culture change for improvement”
- “It will inform the work we are taking forward on developing our social justice actions. I will be following up conversations with lots of people!”
- “Considering how better support for contracted bodies can be fed through the National Steering Group on Strategic Commissioning”
- “Spend a day in Drumchapel – Think more carefully about how to reach harder to reach audiences”

Community and Voluntary Sector

- “Keep on communicating with third sector organisations and local government about local needs and initiatives.”
- “I will feedback info learned from the event to my work colleagues. As a result of today’s event I have made contact with a member of the Scottish Government who has agreed to assist us in an event that we are organising.”
- “Keep doing my utmost to help improving wellbeing and hope on hope eventually we can make change to the good. Hopeful Gov. policy will learn to change of the good in a local level, so I will be monitoring progress more closely as regards the govt.”

What was the least useful part of the event and why?

Scottish Government and NHS

- “None it’s really food for thought”
- “The session overall felt quite short”
- “No least useful part”
- “Bit short of time at points – more Q&A”

Community and Voluntary Sector

- “N/A – All useful”
- “No element was unhelpful. All very useful and insightful.”
- “The event was really useful, the only downside was the limited time here were sections that were rushed but I feel that to have made the event longer may have resulted in some organisations being unable to attend so all in all I feel that it was a good compromise.”
- “All good”

Any other comments?

Scottish Government and NHS

- “Great event useful and inspiring”
- “Fantastic speakers”
- “Thank you!”

Community and Voluntary Sector

- “Really enjoyed today”
- “Very worthwhile and interesting event”
- “Excellent event and format”
- “A good mix of backgrounds and shared experience”
- “Great event well worthwhile allowing 3rd sector organisations the opportunity to highlight their issues to Scottish Government while allowing the civil servants an opportunity to find out more about the specific needs of the 3rd Sector.”

Report written and compiled collectively in April/May 2015

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Funding for this programme of events provided by
The Third Sector Unit of Scottish Government



community
food and health
(scotland)

