



Community Asset Mapping Refresh North East Essex 2020

EXECUTIVE SUMMARY



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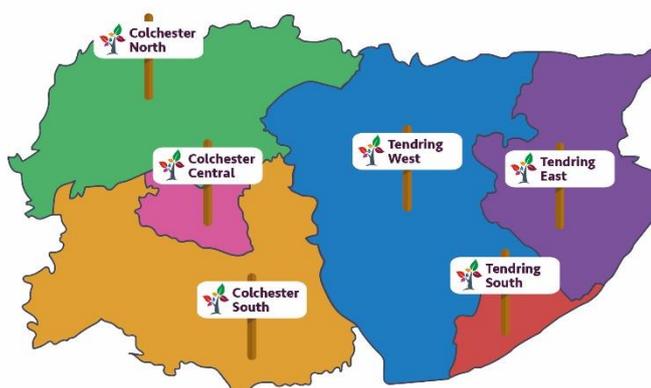
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Executive summary

There is little argument against the importance local groups and organisations have and the role they play in the day-to-day functioning of local communities. However, although we speak about how critical and integral, they are, we do not often look at them in a collective calculable manner. This could be either across the whole of a county, or down to a local and neighbourhood level. We do not allow ourselves to consider exactly the unmet need that would be left if they did not exist.

Research conducted by Community 360 and Community Voluntary Services Tendring (CVST) back in 2019 endeavoured to do just this to show how community assets are part and parcel of the communities that exist in Colchester and Tendring.

North East Essex was divided into six neighbourhoods, three in Colchester and three in Tendring – this is known as the 'Neighbourhood Model', reflecting the neighbourhoods identified for primary health and social care services.



The key findings were:

- There is a significant variation in the type and quality of information available, and it is often difficult to find services or sufficient detail about them
- There are strong and varied community assets out there
- Transport into and around Tendring is variable; in Colchester and Tendring accessibility to transport was vital to community members to access therapy and support
- Providers of the services report that the social aspect is as, if not more, important than the type of physical activity
- Services are abundant in towns and villages, but not necessarily matching population need
- Partnership working is essential – a joined up approach
- The need to investigate further the support required by all communities
- The need to invest in community assets if they are to continue to provide preventative support and promote independence to enable people to live well at home, as recommended later in this report.

Several crosscutting themes came to light during the research and these are reflected upon for both the Colchester and Tendring communities. Also considered are how the different community assets work within the six Essex-wide Live Well domains; Start Well, Stay Well, Feel Well, Be Well, Age Well and Die Well. This has been important as not only does it show what is working well, but it has also highlighted important areas that are severely lacking organisations and support.

Key findings

The report observes that across the board community assets are often looked upon as a first port of call for people in the community and that without them they would not know where to turn. Other key findings and points are shown below:

- Technology – this can be both a barrier and a well-used tool to break down barriers
- Knowledge is golden – people need to be empowered to have the information they need and know where to find it
- It is not a one size fits all – it is important to use neighbourhood and local knowledge of what is needed to plan for services
- There are plenty of community assets but are they the right ones? And are they in the right place? Make sure services feed into local needs
- Trusted / leading the way – there is a need to utilise the important role the current assets have within the community and learn from them
- Ownership within the community – importance of giving the communities the opportunities and support to create and run their own. Assets need time – they cannot just be expected to work straight away

Overall, the report demonstrates the benefits that community assets have for the residents of Colchester and Tendring, and how there is a huge desire from local people to have ownership in what is available to them. It also shows how often the assets cover the shortfall from other funded initiatives that are not providing what is needed and wanted. COVID-19 and the situation we have all found ourselves in since March 2020 has highlighted this even more. The assets help with general wellbeing, give communities resilience against both social and economic problems and help give people a sense of identity.

The report does not come without its limitations, community assets by their very nature are always evolving and changing. Therefore, the information in this report can only be a snapshot in time and continued frequent updating of research must be considered to truly understand community assets across north east Essex.

Recommendations

We hope that the below recommendations will be taken forward by local commissioners, providers and contractors who will engage with others to embed community asset approach¹. The Asset Based Community Development approaches should be used within design and delivery of services and support.

Focus on the strengths

Research has shown the breadth and depth of assets that remain or have been formed over the last eight months in response to the pandemic. The voluntary sector should respond quickly, efficiently and effectively to support the needs of communities. Good examples are the formation of groups like the Anti-loo roll brigade or case studies from the community hubs or groups such as Age Concern Colchester, Tendring and Witham.

Approximately 41% of Colchester assets were available online (moved to or existing). Yet many are operating knowing they may face future changes – such as volunteer retention.

¹ [ABCD Training and Resources - Nurture Development](#)

Call to Action:

Build on the value of information sharing:

- Community response and residents' packs
- Embed routine research and knowledge gathering
- Reinvest in infrastructure support and promote programmes
- Maintain high profile of VCSE and support it as it transitions into the next phase of activity

Gaps in knowledge

There remain further questions which are yet to be answered through the process to date. They include:

- Size, scale and needs of veteran communities (limited data available but research ongoing)
- Future for arts/culture sector which is affected by continued restrictions
- Ongoing mental health needs of people, including those who are shielding or affected by restrictions – suicide rates in working age men and increased demand on services from over 70's.

Call to Action:

Work on data gathering, especially in areas of deficit:

- Identify how we can help smaller organisations to gather data in a neighbourhood level
- Monitor and share data
- Explore consistent approaches across community assets for data recording

Volunteering key to keep assets working

Nationally and locally an unprecedented number of volunteers have stepped forward to support neighbours, friends, and strangers during the pandemic. This creates a higher profile of volunteering. However, not all offers have been mobilised quickly enough and groups are concerned about medium to long term engagement from volunteers.

For example, we see this in some reduction in volunteer numbers from VCSE survey data, and conversely the scale of localised responses.

Creative solutions to volunteer recruitment should be explored. Volunteers need to be supported with training, personal support, information, awareness, and recompense for expenses so volunteer coordination is a key role which needs investment.

Call to Action:

Embed volunteering within system wide response work:

- Develop system-wide recruitment/retention campaign
- Review neighbourhood level activity
- Develop targeted actions

Digital inclusion

The shift to digital for many services, GPs, hospital appointments etc. exacerbates the challenges that people with no digital access or experience face. Further work is needed to establish how widespread a problem this is, especially in times when face-to-face access is not available, and what

can be done to promote digital inclusion. Data and feedback from the sector highlights possible levels of exclusion. In contrast VCSE survey data has shown that digital accessibility has been a bonus for many groups.

Healthwatch Essex is currently looking at digital inclusion using different engagement methods such as surveys, interviews and focus groups with participants from different cohorts of volunteers working in collaboration with Healthwatch Essex. This work will look at issues around digital inclusion, poverty and literacy continuing from phase one.

Call to Action:

- Prioritising digital accessibility and skills development across the area, as well as innovation to utilise increasing reliance on online solutions which improve speed of access
- Review the results of work undertaken by the University of Essex in conjunction with C360 to identify ways in which we can effectively measure impact of online services, such as Facebook groups
- Sharing the learning across north east Essex

Neighbourhood level engagement

Clear differences are being identified across the neighbourhoods in access to services (i.e., local responses in parishes versus centralised support in towns) and take up of services and needs. Factors influencing inequalities are also variable.

We need to truly engage with communities – different areas of NEE have very different characteristics and one size will never fit all. There are reasons why change does not happen. Local people should be able to lead community development and work with partners to identify what would work where they live. This will take a significant resource but if it delivers positive results it is worthwhile. Language, approach, understanding, and listening are keys to lasting change.

Call to Action:

- VCSE data sources should be integrated into the mainstream
- Cross comparison of different types of data would benefit planning and development
- There should be greater leadership through the neighbourhoods programme and multi-disciplinary teams
- Local leadership needs a better understanding of 'culture' place and identity

Corporate social responsibility

Business engagement is an integral part of system wide working and has been influential in response to programmes like Holiday Hunger, COVID-19 shopping, and winter planning. Strategic work is underway with activities like Anchor Project, Town Deal, Dementia Action Alliances and Business Improvement District.

Call to Action:

- Work more closely with local businesses
- Further explore lessons learnt from work already carried out with local businesses

Prevention

Overcoming barriers to health and wellbeing, community interviews and VCSE survey data shows the power of sector to contribute to prevention but some resourcing, commissioning and planning structures do not enable effective investment of time or resources to support this.

Call to Action:

- Review of current working practices
- Increase length of funding
- Allow assets time to consolidate

Caring for carers

National statistics show that most carers identified that their caring role increased through the first stages of the pandemic and with ongoing pressures on time, respite and resources, carers are under pressure. This also extends to childcare and the responsibilities placed on parents with homeworking or limits to contact with extended families and friends.

VCSE groups have recognised the impact of travel restrictions and anecdotally identified calls from carers outside of the county who are seeking local support for relatives. Care homes are also a priority for many groups, including people living with dementia as identified by Dementia Voices.

Call to Action:

- Review carers' strategy locally and respite opportunities, including overnight or custom breaks
- Look at increasing support for those that need it most and develop solutions with communities

Wider determinants of health

The health and wellbeing of local people is influenced by economic, social, and cultural factors which have contributed to inequalities and challenges. For example, BAME community groups have identified changes which must be implemented. In Tendring, there is concern for neglected coastal communities. Here, we also consider community safety, environment, and financial capability – such as foodbanks, housing, and employment.

Call to Action:

- Embed a high value BAME action plan
- Assess risks and opportunities for other vulnerable groups/places which may include lack of activity, falls and mobility
- Effective co-ordinated collaboration across support groups (i.e., advice, foodbanks) in those identified areas where this is not already in place
- Focus on support for younger people (especially those in rented accommodation).

Social connectedness

Demand on befriending services and activities is very high. Services report low confidence of some volunteers and service users, concerns for mental health and mixed capacity levels across agencies. Evidence highlights that good physical and mental health are affected by isolation and shielding.

Call to Action:

- Extend reach of services, especially across age ranges and offer mixed access points (face to face requested to return as soon as possible, where possible at increasing scale)

Longer term strategies

Need to look beyond short-term responses or solutions to be able to embed traceable and sustainable change. Reframing of conversations (i.e., between funders and fundraisers) has been welcomed through the pandemic because it encouraged open conversations. We have also seen that the voluntary and community sector can operate at scale with localised and district wide programmes. However, sustainability is a concern, both for funding, maintaining physical assets such as buildings, and membership.

Call to Action:

- Encourage a review of longer-term funding relationships, pooling, and a periodic capacity review of sector with a NEE VCSE strategy linked to One Colchester Community Strategy and Tendring Health and Wellbeing Board.
- Consider the format of the asset map – how it can be accessed, searched and developed.

Innovation should be organic – assets need time to settle and establish themselves and not just end after one year of funding and another asset created.

Increase the capacity and extend the reach of services in specific areas, where there are still shortfalls:

- Child & adolescent mental health – build resources that young people have confidence and trust in using; listen to the young peoples' voices, share knowledge within existing resources and encourage partnerships to expand the service available. The Young Mental Health Ambassador programme at Healthwatch Essex helps allow the patient voice to be heard and impact positive change across NEE.
- Adult mental health and suicide prevention – need to boost resources to meet the aftermath of the pandemic. Loneliness and social isolation may result in loss of confidence so we need to strengthen befriending and buddying services, building on what works now. The stigma surrounding mental health still exists, and work needs to be done to address this. Further work needs to be done to investigate, understand and address the significantly high and rising suicide rate in Tendring. NEECCG has just announced that it is setting up a task and finish group to look at this issue, the group will include the community & voluntary sector and will hear the user voice.
- Transport – to promote access and inclusion. There is still widespread demand and services will need support to continue at pre-COVID-19 levels.
- Seven day working – availability of services outside the working week is hard to find. There are some evening groups and more have evolved since COVID-19. With the increased use of digital platforms support and access to information can be developed further.
- End of life care – there is still a disparity in where people die in NEE. Tendring has disproportionately high levels of deaths in hospitals, but there is evidence of an identifiable shift where people have completed a 'My Care Choices' Record. There is still a taboo about talking about and planning for death and a positive shift could be from a medical model of death to a more social one.

- Advice and information – there is a tendency for people not to look for advice and information, or to take notice of where it is, until a need arises. Then it is often seen as hard to find. Standards for advice and information and a more integrated response will help residents to get the information they need at point of access. There are a plethora of databases including the Essex Map, an online platform featuring a wide range of organisations operating across the county. A project to bring them together across NEE could represent good value. Healthwatch Essex Information & Signposting Service provide a support helpline to assist with the navigation of the health and social care system.
- Employment – Tendring has relatively high rates of unemployment compared with the rest of Essex and the impact of COVID-19 will create further challenges – this will impact on family relationships, housing, and mental health.
- Carers – there needs to be recognition for the enormous financial and social impact of the support that informal carers give their loved ones allowing them to maintain some independence and preventing dependency on statutory services. Recognising and understanding the challenges and need for different types of support is necessary and could be achieved through consultation which is community led. This could develop workstreams that could support this community enabling them to continue their contribution of care without impacting our health and social care services.

Colchester specific

Financial capability – we have referenced the importance of the wider determinants of health within our general aims. Still, the demand on Holiday Hunger activities and additional evidence of increased access to support services highlights an increasing need. This especially highlighted the necessary support needed for single men and for younger adults, suggesting that we must continue to address inequalities.

Greater work with faith organisations – we can see the strength of assets tied to faith based organisations within our neighbourhoods but both through the BAME action plan and work with the Essex Faith Covenant, we anticipate an opportunity to do more and develop.

Role of One Colchester – we have a proactive partnership which has been fundamental through our collaborative COVID-19 response. We must integrate our activities into this asset and continue to enhance representation at a Delivery Board level to the advantage of neighbourhoods and communities.

Tendring specific

Prevention of homelessness – the economic climate and fragility of the living arrangements of some Tendring residents is likely to cause continuing growth in the number of people who find themselves homeless or at risk of homelessness. Further work is needed to develop homelessness prevention strategies as a whole system and to support those already homeless or at risk. Tendring council has adopted a 'draft homelessness reduction and rough sleeping strategy 2019-2024' which is available on their website.

Community halls – in many villages community halls are the hub of village activity, but with a lack of bookings they have a challenging long-term financial viability. CVST is currently undertaking an in-depth study with the aim of strengthening this vital community resource. What is clear is that work needs to be done to explore how the community and voluntary sector can work together with statutory

partners, to avoid closure of these vital community assets and support those, in many cases few people, who are keeping them going.

Greater work with faith organisations – we can see the strength of assets tied to faith based organisations within our neighbourhoods but both through the BAME action plan and work with the Essex Faith Covenant, this is equally as important on a local level in Colchester and Tendring.

Deprivation - Tendring South has increasing levels of deprivation, despite having a large number of community assets in terms of organisations it is recommended that this area is the focus of a deep dive moving forward.