



Voluntary and Community Sector Supporting People During COVID-19



Conversations with Voluntary and Community Sector organisations in the Mid Sussex District to hear their experience of working through the lockdown

Report 2

#BeMoreHumble

September 2020





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Executive Summary

The Covid-19 pandemic has and continues to disrupt and change all our lives and life remains unstable and uncertain, yet the Voluntary and Community Sector (VCS) responded with compassion, care, and humanity to support local people and communities. The sector adapted their service offer with speed, efficiency and innovation redeploying and setting up remote working for staff and moving services from face-to-face to telephone/virtual, ensuring this complied with appropriate policies and procedures. Even though many organisations suspended service provisions, they nonetheless continued to maintain wellbeing contact and support with their volunteers and other service users/members.

Demand for services provided by the VCS has increased and as needs have grown some issues have been exacerbated by the lockdown such as: *mental health*, *bereavement*, *unemployment*, *domestic violence*, *carers*, and some such as *isolation and loneliness* have been highlighted. As the lockdown eases, individuals and communities have an urgent need for recovery and renewal.

Respondents stated *loudly* that **finance** is needed urgently, as many organisations are fighting for survival, and there is real concern for their longer-term future. Without a doubt the pandemic has preyed on many pre-existing economic and social vulnerabilities affecting local communities, families and individuals. The VCS supports many NHS, Public Health and local authority projects and messages such as Social Prescribing, Wellbeing and loneliness - all of which contribute to good physical and mental health. The crisis has provided an opportunity for increased integration and partnership working which is known to be essential in supporting local people and communities. It is now time for the fundamental importance of the VCS and its integration into health systems to be fully recognised, and funded accordingly, for the benefit of local people and communities.







Introduction

Mid Sussex Voluntary Action (MSVA), and Healthwatch West Sussex (HWWS) are working collaboratively to capture the Covid-19 experiences from VCS organisations, their challenges, solutions, and future planning.

Our first report detailed the responses from our Online Resilience Survey, completed by 31 VCS organisations - click here to read the findings.

This report draws from the ten semi-structured conversations -telephone and virtual- with VCS staff - CEO's, Chair, Trustees, managers, and committee members - all members of MSVA. Our aim was to capture their experiences of working through this unprecedented time. These conversations took place during mid-May to mid-July and are a snapshot of a period of rapid change whilst lockdown measures were still in place.

These conversations have been developed into individual Case Studies which accompany this report and are available on our website.

We would like to 'thank' all of the interviewees for their honesty and time, as this report would not be possible without them.

Changes to service operation

The Sector responded and adapted quickly to the Covid-19 crisis and lockdown, moving from predominantly face-to-face services to operating via telephone/virtually. A number of VCS organisations played a critical role by providing frontline and essential services.



Very quickly around 59 of our carer-facing team were redeployed to the Response Line. We moved rapidly to remote working and managing online chats, emails and call-back services to support carers. Our carers counselling service initially stopped, but within three weeks was active by telephone.



We have been providing all services in a reduced form; telephone and shopping support, Home Service hours reduced by two-thirds, Pathfinder support groups are now virtual, and all staff moved to working from home.



Our volunteers rang families regularly - to discuss health issues, refer on to appropriate services and so on. We also provided different stimulations like entertainment online and social media.









We had to switch focus from taking potentially isolated people out and about to getting essential things to those people.

The Covid-19 community response was set up organically supporting vulnerable people in their local area, 3-6 weeks prior to the Local Authority Community Hubs becoming operational. Community Transport Sussex offered support to get people to essential medical appointments and non-emergency journeys. These Covid-19 groups are now reporting the number of people they are supporting directly to West Sussex County Council, Mid Sussex District Council, Community Hubs, and health services across the county.



We had to set up from scratch our 'phone befriending' service; this is where a trained volunteer has a list of people they phone each week. Initally the conversation was around access to food and medications. We've continued this service throughout the crisis.

For organisations with more vulnerable members - those who needed to shield or self-isolate, service provision was suspended. This meant a loss of cashflow from activities, meals, revenue from room hire, and so on.

Know Dementia informed that all services were face-to-face but needed to keep staff/volunteers and service users safe, so they all stopped. However, staff and volunteers have remained in contact with families regularly throughout the lockdown.

Some staff moved to home working by being provided with laptops, mobile phones, and appropriate support. Sussex Oakleaf informed that their *digital knowledge has increased and gone forwards by a few years*. This was the experience of other organisations as well.

Others shared the impact on managers, part-time staff working longer hours as working from home, due to increased demand and workload. Carers Support West Sussex informed that they instigated wellbeing checks with staff - have you taken a break, do you need to reduce your hours, it is ok, it is what is right for you etc. Which can be exhausting for managers, but right for staff, volunteers, and partners.

Communication changed and increased to support staff, volunteers, service users/members, partners. Communication was stated to be an important issue but could be overused.









We redeployed 59 of their 94 staff onto the response lines, set up business resilience meetings with team leads and moved to a Business Recovery Plan within four weeks of the lockdown.

Carers Support West Sussex





4 Sight Vision Support began by tackling three areas: how you support staff and members, integration and cohesion, and finding a means for stability.

Impact of operational changes on staff

Six organisations furloughed some staff for a period of time. For other organisations staff were redeployed to new ways of working. Initially, some staff had reservations that the service provision could be provided by telephone or remotely, possibly due to lack of confidence, and training was provided to support. Many staff missed face-to-face contact, but are also worried about Covid-19, their own safety, childcare needs, and the impact of social distancing regulations on reopening services etc.



Through talking with members, we began finding out more and discovering issues that had not been shared previously. This meant that our staff workload increased massively. *4Sight Vision Support*





Time 4 Children work in 14 schools across Sussex supporting individual children's emotional wellbeing. As schools would not allow external visitors, the service had to stop.

Throughout the lockdown, their staff have been contacting parents regularly to provide support and advice. They informed that it is *difficult to pick up on issues and safeguarding issues by telephone*.

Impact of Covid-19 for volunteers

Respondents informed that many volunteers are aged over 70 years of age and believed or had been told to shield or self-isolate and were unable to volunteer. (A recent <u>survey</u> by Independent Age found 43% of the respondents were wrongly self-isolating). Many are being supported with telephone <u>wellbeing calls</u> each week. A number of organisations have a lot of volunteers not doing anything as the service provision has closed down either fully or partially.









Volunteers rang families regularly to discuss health issues or refer to appropriate services and so on. *Know Dementia*



For carers who volunteer, there were a number of concerns: Covid-19 anxiety, access to money, isolation, depression, lack of NHS services for cared-for person, access to personal protective equipment, Covid-19 testing, and care homes.

All organisations stated that staff needed to be reassured before relaunching faceto-face services to ensure they are safe for their volunteers as well as service users.

Organisations have risk assessed and anticipated future demand and have or are in the process of recruiting new volunteers to help with expected increases. For others Covid-19 presented a plateau in need, which was an ideal time to recruit more volunteers and train remotely.



Cruise Bereavement South developed their online volunteer training as well as telephone training.

Impact of COVID-19 for Service-Users/Members

We were told that early on during the crisis for many service users/members, the main concern was food shopping and medication issues. After 12 weeks or so, this has changed to emotional issues.

4Sight Vision Support spoke about how they discovered issues that had not been shared previously.

Know Dementia informed that the telephone calls have got longer and are more complex as they have nowhere else to go. And that some of the phone calls are ok but the stories break my heart.

The move to digital-based support has been fast, supportive, offers flexibility and is challenging for some. It is important that the Sector reviews IT needs to ensure it is accessible for every service user/members' 'communication needs' post-Covid-19.

Virtual is the best of a worse situation as it's a much harder sensory experience - it's difficult to discuss what's needed, with loss of body language and social cues, and more distractions. Asperger's Voice







Financial impact of COVID-19

All respondents are really concerned about financial stability and solvency, especially as unrestricted funds have been so dramatically reduced due to:temporary closure, loss of membership fees, fundraising opportunities, venue hire, closure of charity shops, rental funds and so on. This is unlikely to change in the foreseeable future due to increased costs of operations to comply with Government guidance and alternative ways of working. Community Transport Sussex informed that they lost 35% of their income. All are extremely worried about their longer-term survival.

Some expressed concern about possible cuts in County Council budgets, less community grants and donations, and uncertainties surrounding income from Trusts and Foundations. Those whose funding is from Corporate Bonds and shares have seen large dips/potential losses due to Covid-19 but since this huge drop, the rates are beginning to improve slowly. Age Concern Hassocks shared that they are considering taking out a government loan from HSBC as it is interest free for a year.

A high number of organisations suspended services, and the furlough scheme helped protect financial reserves. For others, they have seen an increase in demand and staff have been redeployed to support. Know Dementia informed that they *did not* furlough any staff but have reduced hours and pay by 20%.



We are paying the required 20% but this may become more difficult to pay once the Government changes the rules. Age Concern Hassocks





Asperger's Voice informed, one financial challenge during the pandemic has been that we are spread across the county and our filing cabinet is in Brighton. Our members are in Crawley and Mid Sussex so writing cheques has been an issue.

A number of organisations stated they had just sorted out their budget for the year and had challenging targets already, then fundraising activity stopped. This left a void and will involve making cuts and savings. A movement towards operating virtually risks leading to a reduction in the amount of people who will be reached by the more tried-and-tested face-to-face outreach method. Organisations stated they're running services as cost-effectively as possible and trustees are meeting virtually and more frequently to support them.







Impact of Covid-19 on fundraising

Fundraising activities have been impacted hugely, particular for groups providing a one-to-one service and/or are dependent on trading income and large-scale fundraising events. Time 4 Children informed that the service is run on a very tight and small budget...as they do not receive Government or Statutory funding.

Where the fundraising team is still working (many have been furloughed) they are thinking of new ways to raisefunds. Cruise Bereavement informed that they used to get funds from people dropping change into a bucket but even this has now gone.

Impact of Covid-19 on contracts and grants

We were informed that many organisations had put planned projects on hold, and some could not be paused or extended by the funder.

Some organisations with funding in place are concerned they can't meet the agreed outcomes for the contract and grant conditions. Time for Children informed that for their one volunteer training project, we anticipate we will be down on numbers.

MSVA has provided support and advice on how to respond in these circumstances and to find other ways of meeting the obligations. Other organisations shared their appreciation for the flexibility shown by their current funders in response to the changes brought about by Covid-19.

Many applied for Covid-19 specific grants with mixed results which has made it difficult to plan for the future. Know Dementia informed that they had applied for the Rate Relief funds and told they do not apply to charities.



Age Concern Hassock: We were not eligible for any grants as we are not supporting people face-to-face, only by telephone.



We do not receive any funding from West Sussex County Council; we provide our services through fundraising, yet we do receive funding from East Sussex County Council for their residents. *Know Dementia*



Many grants are for the provision of projects not day-to-day provision. Age UK East Grinstead District informed telephone calls are not considered sexy from a media view but are most important and have taken pressure off the local council and other organisations.







The time it takes from applications to confirmation for grants is a real issue. Time 4 Children shared we applied for a Lottery grant a few years ago and it took nine months which is just too long.

Cruise Bereavement South have been successful with applications to Sussex Clinical Commissioning Groups, local authorities, and Sussex Community Foundation for new ways of working, equipment and training. This was not a struggle and was very much appreciated.

A number anticipate that the local authority is going to have to make cuts in the *softer* things. During the pandemic the VCS could have closed totally but instead were inventive and changed how they worked, which shows that the Sector is not afraid of doing things differently and is the trailblazer it has always been.

Forward Planning

Some organisations revised budgets to remove a proportion of fundraising which could necessitate restructuring and lead to redundancies as well as different ways of working. Carers Support West Sussex informed they do not have full information from the Government, which makes keeping Trustees, partners and West Sussex County Council contract leads updated a challenge.

Carers Support West Sussex and 4Sight Vision Support used the ACEVO self-assessment resilience tool to plan for the next three months but are not assuming that everything will go back to how it was before Covid-19. (https://www.acevo.org.uk/)

Many organisations had contingency plans but stated they had *no budget attached* - a learning point for the future.

Those organisations which are part of nationally based organisations, for example Age UK East Grinstead District, have been able to access some funding from national appeals such as the Big Night Out.

Some of the future challenges include:

- Information Technology (IT), which has enabled the Sector to widen their service provision to reach new and more people than before the pandemic. Moving staff to home working and IT was an ambition for the future, now realised for some. This means office spaces may not be needed, used differently, or closed.
- There is concern about Government guidance as the messages have not been clear: "Stay at Home was clear but what does Stay Alert mean? It doesn't mean anything."





- Access to appropriate Personal Protective Equipment (PPE) is a barrier to service provision restarting, for example Sussex Oakleaf Home Start services, Asperger's Voice and Carers Support West Sussex.
- Impact of the current Social Distancing rule is a major barrier to restarting
 many face-to-face services, with luncheon and social groups "being some of
 the last places to re-open due to centre layout and new cleaning routines".
 There was concern about social aspects and how to begin trading in a charity
 shop and working safely in office spaces.
- The anticipated second spike for Covid-19 (September to November) and the ripple effect of this.

Innovation of service provision is something the VCS is known for, as exampled by Age UK East Grinstead setting up a delivery service and food boxes within their local area to keep cash flowing. This is like the 1950s when we delivered Meals on Wheels from the back of a car. It provides a welcome funding stream to keep cash flowing as we still have to pay for the overheads of the building and staff salaries.

Increased needs and demand for services

Covid-19 has highlighted and exacerbated many areas in already fragile health and social systems:

Autism

Impact on people living with Autism: Around 80% also have mental health conditions and hate routines being altered and anchors taken away.

The emotional impact of bereavement: Not being able to say goodbye, where maybe the last time you saw a loved one was in the back of an ambulance and families have not been able to visit in hospital or attend the funeral. The normal grieving processes for families are on hold and people are in survival mode, doing daily things and waiting for lockdown to ease.

Bereavement

Given that one death affects six people on average, there are a lot of people struggling at the moment and in the future. In some ways, one can prepare for an expected death but when figures are reaching 900+ a day, it's a community challenge as well as an individual one.

The *mental health of carers* has not been recognised and they have become invisible - many of the telephone stories *break my heart*.

Carers

Betty: "I cannot put him into a care home as he may get Covid-19."







One effect of Covid-19 is that carers normally have some form of respite, but this ceased in March, which means that "carers are up close and personal 24/7 and many do not want to worry anyone."

Increases in demand for support as highlighted by Know Dementia: The staff and volunteers have supported over 112 people in West Sussex alone, some 130+ hours per week of talk time to support families, which meant our staff workload has increased massively. The calls are now more emotional and are longer and more complex as they have nowhere else to go.

Other organisations have seen similar increases in demand for support.

The impact of routine NHS services having stopped due to Covid-19:

Waiting for an assessment or an appointment for oneself or the cared-for person could impact on cognitive impairment as all stopped and people may have to wait another 12 months before things get back to any form of normal. It has been ok, but it is not ok.

Impact on people living with dementia as many are fearful and scared to go out.

Dementia

The Government gave IT support to children and it would have been great if they could have provided this for people living with dementia.

Domestic Violence and Safeguarding

There has been an increase in telephone calls, relating to domestic violence which have become more complex.

There is a need to proactively focus on homelessness certainly within Mid Sussex. Currently all rough sleepers are safe in hotels etc but what will happen once they leave?

Homelessness

It is important people are not put back on the street as the individual will feel a failure after being housed, especially if their physical and mental health has improved. The local authority can't put people back on the street, stop providing food and emergency universal credit, and close down community hubs. If they do, they are not learning from this crisis.

Maybe it is how the wider Sector can work more collaboratively to help individuals and support homeless charities.







Job losses

The *impact of job losses on communities* and the economy generally within Crawley and Gatwick, could be significant as this area is less likely to recover quickly. How can the VCS ensure that the right level of resources (money, support, and commissioning) is provided whilst protecting the wider VCS organisations?

A number of organisations reported that service users are struggling:

Mary: "I left the front door open, but all was ok."
Peter: "After 3-6 weeks of lockdown, I phoned 999 a couple of times a day for reassurance."

Mental Health Some staff have struggled with the *isolation effects* of having to work from home. Sussex Oakleaf *have a short check-in each morning to ensure staff are ok.*

The effect of staff working from home - After 14 days working from home, I began to have aches and pains, headaches, eye strain and emotional issues. I recognised what was happening and changed the way I was working so I now take regular breaks etc.

The 'Stay at Home' message: Parents are struggling with mental health issues but will not talk over the phone. This is where physical visits are beneficial.

Personal Protective Equipment Access to PPE is a challenge for most VCS organisations going forward, to enable groups to re-open, provide transport, carry out projects, and protect carers, as examples. It is not just availability but also the extra cost.

Some organisations aren't able to provide any support for people with disabilities to get on and off buses/cars, which is a big challenge.

Transport Issues Bluebird Community Partnership is currently providing 'Supportive Assisted Transport' that assists the person to the car etc and takes you where you need to go with assistance, and back again.

The real challenge is how to fund a cost effective, community 'Supportive Assisted Transport' working within post-Covid-19 Government guidance for the whole county - something Community Transport Sussex is exploring.







Impact on volunteer recruitment

The pandemic has highlighted the incredible work that volunteers do. As high number of volunteers in the Mid-Sussex area are aged over 70 years, many are fearful of Covid-19, live with long-term health conditions, lack confidence or families feel uncomfortable and are not returning or are stepping down from their volunteer roles. This is leaving huge gaps for many services at a time of increased demand.

Age Concern Hassocks informed that they struggle to recruit younger managerial volunteers to the board i.e. those under 60 years.

Cruse Bereavement South informed that they are expecting a surge this summer and have taken advantage of time to recruit more volunteers. We have also developed online and telephone training to support.

Time 4 Children informed that as there are no fundraising events planned, they cannot plan their next volunteer training course.

Summary

In summary, interviewees shared their experiences of the VCS as they have worked and lived through the Covid-19 crisis. It details organisations' leadership, innovation and compassion, as although service provision stopped for many, others have seen increases in demand, and most have remained in active contact with service users/members to give advice and support. This has reduced the impact on statutory services during this time and needs to be acknowledged by the wider system.

Financial stability is urgently needed for organisations especially those who depend on a trading income and fundraising. There is an urgent need for statutory partnerships to be developed as the VCS is the bedrock of NHS and local authority initiatives such as Social Prescribing. Grants and tender processes need to be easier, quicker and more flexible. However, some groups do seem reticent or lack the knowledge or confidence to make applications; so maybe some form of basic funding advice/training is needed.

The VCS is part of the strategic solution of compassionate communities supporting each other, and this means that it needs to be an active part of future solutions, listened to and funded appropriately.

It is recognised this is a small sample size to be regarded as statistically viable but when combined with our Resilience Survey report and previous surveys and evidence from MSVA, it does provide an indication of where effort is needed in the short to medium term to best support the Sector.





Next Steps

Publish this report on our websites and circulate widely and ensure that this information forms part of the planned pan-Sussex reporting.



- Increased partnership and networking between statutory and the VCS.
- Grant information needs to be clear, simple and the process needs to be quicker than currently, as it is taking too long for a decision.
- Grants are needed for operational needs not just for project work.
- Basic funding advice and training to support medium/small organisations or groups.
- Government guidance needs to be clearer so that it can be acted upon quickly.
- Basic promotions training for medium/small organisations or groups.

MSVA supporting the VCS

The contents of this report illustrate the breadth of challenges facing the VCS sector in Mid Sussex both at the current time, but also in the future, with income levels having dropped dramatically since March, and with no current date for when face-to-face service provision or, income generation can resume.

MSVA is proud of our rapid and immediate response to support our member groups through the Covid-19 pandemic. Initially we focussed on supporting Mutual Aid groups and our members to respond to need in a safe way, which enabled them to continue to support their service users where possible. As time has progressed, it has become clear that many MSVA members are struggling financially due to a drastic fall in fundraising and earned income, and we are therefore advocating for the VCS in Mid Sussex to local funders and statutory services, highlighting our members' immediate and long-term funding needs; the availability of funding for core costs/unrestricted funds is paramount to ensure the survival of so many VCS organisations in Mid Sussex. We are also putting on a series of fundraising training sessions to meet identified need and to further enhance our members' ability to secure funds.

We are strengthening our partnership work with MSDC and are an active member of The West Sussex Voluntary Sector Alliance, where we have played a pivotal role in supporting the wider West Sussex VCS sector through the Covid-19 pandemic.

We have secured additional funding via Sussex Community Foundation which will enable us to enhance our ability to support our members to secure volunteers, in response to need highlighted in this report.





MSVA also aims to address Digital Exclusion, as highlighted in this report, so that older people in particular are able to access services online and are less isolated in Mid Sussex.

We will continue to respond to the needs of the VCS in Mid Sussex and support our members to the best of our ability. Individuals in our communities need the support of the Voluntary Sector more than ever, yet at the same time, our VCS partners are experiencing the hardest, most challenging time they have ever been through. Mid Sussex Voluntary Action is grateful to Healthwatch West Sussex for carrying out these interviews with our members and highlighting the needs of the VCS. MSVA is ready to respond wherever possible to ensure the sustainability of the excellent VCS sector in Mid Sussex.

Thank you

We would like to take this opportunity to thank all who took the time to speak with Healthwatch West Sussex.

Asperger's Voice Committee members
Barry Gilbert, Chief Operations Manager, Age UK East Grinstead District
Dudley Edwards, Head of Community Services, Sussex Oakleaf
Jennie Morrison-Cowan, Trustee, Know Dementia
John Rose, Chair, Age Concern Hassocks
Matt Roberts, CEO, Community Transport Sussex
Nik Demetriades, CEO, 4Sight Vision Support
Sonia Magan, CEO, Carers Support West Sussex
Ted Hill, Hub Manager, Cruise Bereavement South
Vicky Chambers, Founder, Time 4 Children



Mid Sussex Voluntary Action

Supporting community action across Mid Sussex

Admin Hub: Delmon House, 36-38 Church Road, Burgess Hill, RH15 9AE

General Enquiries: 01444 258102 Registered charity number: 1158780

Learn more from our webpage: www.msva.org.uk







Talk to us

If you have questions about the content of this update, please either call 0300 012 0122 or email cheryl.berry@healthwatchwestsussex.co.uk

How this insight will be used?

We recognise that all health and care services are under pressure at this time and have had to adapt their ways of working. We will share this report with the local NHS, local Government, and other providers to help them understand where things are working well and services are adapting to meet peoples' needs, and to help them identify any gaps.

For help, advice, and information or to share your experience

We are the independent champion for people who use health and social care services. We're here to find out what matters to people and help make sure their views shape the support they need.

We also help people find the information they need about health, care and community and voluntary health and care support services in West Sussex.



Here to help you on the next step of your health and social care journey

We have the power to make sure that the government and those in charge of services hear people's voices. As well as seeking the public's views ourselves, we also encourage services to involve people in decisions that affect them.



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