Social Recovery Taskforce
5 August 2021 at 14:00
Via Microsoft Teams

Agenda

1. Welcome, Introductions and Apologies
   Chair

2. Minute of Previous Meeting — Attached
   Chair

3. Community Engagement Project — Attached
   Judith Hunter

4. Academic Advisory Group Proposal — Attached
   Des McNulty

5. Workstream Updates — Attached
   John Dawson

6. Community Action Plan — Verbal
   John Dawson

7. A.O.B
   Potential future update on Children's and Young people (Mike Burns)

8. Meeting Schedule:
   02/09/2021, 14:00
   07/10/2021. 14:00
   04/11/2021, 14:00
   02/12/2021, 14:00

SRT – Agenda Item 2

MINUTES
Social Recovery Task Force
10th June 2021, at 15:00
via Microsoft Teams

Present: Councillor Jennifer Layden, Glasgow City Council (Chair); Bernadette Monaghan, Glasgow City Council, Community Empowerment Services; Shaw Anderson, Glasgow City Council, Community Empowerment Services; John Dawson, GCC Chief Executive Department; Jatin Haria, BAME Representative; Dawn Fyfe, Glasgow Women's Voluntary Sector Network; Tressa Burke, Glasgow Disability Alliance; Kirsti Hay, Glasgow City Council, Violence Against Women; Anne Fehilly, Glasgow City Council, Violence Against Women; Lorraine Barrie, Glasgow Equality Forum; Jill Miller, Glasgow Life; Pete Seaman, Glasgow Centre for Population Health; Michael McNally, Glasgow City Council Glasgow Partnership for Economic Growth; Fiona Moss, NHSGGC; Marshall Poulton, Glasgow City Council, Neighbourhoods & Sustainability (Transport); Cormac Quinn, Glasgow City Council, Strategic Policy & Planning; Naomi Shoba; Elaine Feeney, Children's Neighbourhoods Scotland; Marc McGill, Scottish Fire and Rescue Service; Paul Buchanan, Glasgow Colleges Regional Board; Sarah Weakley; Gary Dover, Glasgow City Health & Social Care Partnership; Matthew Barrett, GCC Chief Executive Department; Janie Thomson-Goldie, Police Scotland; Claire Bynner, Children's Neighbourhoods Scotland; Ian Bruce, Glasgow Third Sector Interface; Vicky Bond, GCC Chief Executive Department; Alex MacLean; Parveen Khan, BAME Representative; Valerie McNeice, Glasgow Centre for Population Health.

In attendance:
Mary McPhail, Glasgow City Council, Community Empowerment Services

Apologies:
Councillor Richard Bell, Glasgow City Council; Linda De Caestecker, Glasgow City Health and Social Care Partnership; Des McNulty, Academic Advisory Group; Ian Robertson; Gabrielle MacBeth, Glasgow Women's Library; Candy Walker, Glasgow's Advice & Information Network (GAIN); Louise MacKenzie, Glasgow City Council, Strategic Policy & Planning (Equalities);

1. Welcome, Introductions and Apologies
The Chair welcomed everyone to the meeting and apologies were given.

2. Minute of Previous Meeting
No amendments were requested, and the minute was approved.

3. Matters Arising
No matters were raised.

4. Workstream Updates
Further to the information contained in the Flash Reports, John invited each of the workstream leaders to give an update.

- **Mental Health (Public Health Oversight Board)**
  The first Flourish Glasgow Partnership meeting was held with 26 people attending. A colleague from Edinburgh (who has been working on the Thrive Edinburgh Programme) has been invited to the next meeting to give an insight into what could be learnt from them.

- **Technology and Digital (Digital Glasgow Board)**
  No representative was in attendance.

- **Third Sector (GCVS)**
  The standalone group has now finished its meetings and are in the process of drafting their report - this will help when engaging with public sector colleagues on devising an action plan on how to take it forward. Recommendations have been made – some simple and some may take some years to develop. Ian should be able to share the draft report within the next few weeks.

- **Black and Minority Ethnic Communities (GCC BME Taskforce Group)**
  Jatin had nothing new to report as he missed the last BME task group meeting.

- **Disabled Communities (Glasgow Disability Alliance)**
  Workstream meetings were planned where agendas were set, and co-designed themed events planned (2 of which have already been held). The meeting on Poverty and Work on May 26th was well attended and recommendations are underway. Due to time restraints, the next meetings will be more paced out. A Health & Social Care meeting is planned for the autumn.

- **Food Provision (Glasgow Food Policy Partnership/Glasgow Community Food Network)**
  Cormac advised that the plan was agreed by all partners and presented at the GP.

- **Violence Against Women (Violence Against Women Partnership)**
  An online workshop was held for women experiencing violence who have pre and settled status and who are EU citizens.
  A monitoring meeting was held with the Family Support Project in relation to Making a House a Home.
  The Routes Out Service gave a presentation at the last VAW partnership and Kirsti is keen for them to present at the SRT.
  The Partnership is currently reviewing where they are and how to move forward.

- **Volunteering (Volunteering Strategy Governance Group)**
  All is going to plan. A review has taken place with actions agreed. The group has reached the stage where they know what needs to be done. A meeting is being held next week with the stakeholders, who will begin to look at the recommendations/ actions and allocate them to whoever should take them forward.

- **Child Poverty (Child Poverty Governance Board)**
  The Board is working towards the updated Local Child Poverty Report. There is a meeting next week of the Challenge Child Poverty Group to look at the Scottish Child Payments and to help support families who have no recourse to funds.

- **Young People/Transitions (Colleges/Skills Development Scotland)**
  The last meeting of the Local Employability Partnership was held. It looked at the development of the partnership and how it takes forward the Young Persons Guarantee and the Scottish Government funding. An action plan will be developed within the next month as to how they continue to deliver activities over the next couple of years.

- **Property (Making Best Use of Our Assets: Property Group)**
  The group is currently working on Community Hubs and People Make Glasgow Communities. As people are looking to take over venues, the group is looking at how governance can be merged.

Throughout the workstream updates, questions/comments were raised and answered.

5. Children's Neighbourhoods Scotland

Claire explained the background of the CNS and gave an overview of the research carried out on local responses to COVID 19 during the first lockdown. CNS is a place-based child centred approach to improve well-being and outcomes for children and young people; the focus is on the empowerment of children and young people and support in connecting to activities. CNS collaborates with GCPH and the University of Glasgow and is funded by the Scottish Government (amongst others).

Claire went onto give an overview of the range of services studied, the issues identified and the local responses to them.

Elaine's research was specifically around vulnerable families (asylum, refugee and Roma) and the impact of the pandemic on them. Existing inequalities were increased – these included poverty, housing, health, education, racism and immigration.

A lengthy discussion followed with questions and comments answered.

The relationship between the public and third sector was discussed. The Chair asked how the SRT could take these findings/evidence forward. Bernadette suggested a thematic SRT that focuses on children and young people and that she'd pick it up off table and come back with a plan. Bernadette asked the group to get in touch if they wanted to be involved.

The Chair thanked Claire and Elaine for their presentations.

Agreed Action

- Bernadette to pick up off-table a thematic SRT focusing on children and young people and devise a plan.

6. Property Workstream Update

Alex MacLean spoke of the work being carried out in People Make Glasgow Communities (PMGC). He explained that a part of the Property and Land Strategy manifesto administration was to involve communities in running services locally using council run assets. A package of support was quickly put together as providing access to local venues for community groups is seen as an important part of recovery.

Alex went onto explain:

- the aims and objectives of the programme
- expressions of interest (287 received to date)
- the number of E.O.I.'s received for each of the Council owned assets
- the programme management office
- the process
- the asset lists
- competing interests
- timescales
- reporting and communication.

Lorraine raised her concerns about the impact the policy will have on equality groups (no equality impact assessments have been done based on the policy) and the lack of communication. She stressed that people were worried by E.O.I.'s being made when no assessments or consultations have been carried out. Alex advised that equality impact assessments would be carried out and when moving into the public consultation phases, opportunities will be addressed. The Chair suggested setting up a separate meeting to discuss the equality issues further and invited others to get in touch should they want to be invited – Bernadette will facilitate this.

The Chair thanked Alex for his presentation.

Agreed Action

- Bernadette to arrange a meeting to discuss the equalities issues.

7. Agent for Change Working Model (Race)

As the meeting had run over time the Chair asked if Naomi would be willing to return to another meeting to give her presentation. Naomi was happy to do so.

Agreed Action

- Naomi to present at the next meeting.

8. A.O.C.B.

No other business was raised.

9. Date of next meeting

Thursday, 5th August at 14:00.

DRAFT

Draft Report on Community Engagement Project February 2021

Glasgow Social Recovery Task Force June 2021

1. Report summary

This report provides data and reflections from a community engagement project requested by the Social Recovery Taskforce as part of its commitment to have its strategic direction informed by the lived experiences of the pandemic by individuals, families and communities in Glasgow. The purpose of this report is to set out the issues for communities, propose recommendations about what to do about them and to propose the use of an agreed framework for involving communities in planning social recovery.

To date, using available intelligence and contributions from taskforce members, the SRT has been able to identify issues and develop workstreams to resolve those issues. Our community engagement findings indicate a requirement for the taskforce and its workstream leads to embed community engagement and development in their recovery approaches and planning from the earliest stages. In other words, we are asking the SRTF through its workstreams to act on the recommendations of this report to work directly alongside communities in a development process designed to help communities shape social recovery planning and actions.

As agreed with the SRT, this project heard from two groups reported to be experiencing adverse impacts of the pandemic: adults who were shielded during the first lockdown (who had given permission to be contacted again) and young people.

Key findings:

Our community engagement findings indicate a requirement for the taskforce and its workstream leads to work directly alongside communities in a development process designed to help communities shape social recovery planning and actions.

A key message is that while people found it hard to visualise a way out of the pandemic, many did signal an appetite to help services to help identify workable and realistic solutions to support social recovery and renewal. While keen to contribute, many people reported a lack of confidence that their voices would be heard and make a difference. Therefore, we recommend that there is a clear and compelling responsibility for this task force to not only listen and learn from the voices of 'lived experiences' but to transform these into action that shapes recovery and restores trust.

Nearly every young person spoken to reported massive changes to their lives. The most common comments were about missing their friends at school and the challenges of learning online.

Of the shielding adults who spoke to us, almost 40% reported some type of useful support during the pandemic - family help was crucial, followed by friends and agencies at the same level. Food parcels were of great relief to many; some had no-one to get shopping for them or couldn't access online deliveries, others were in food poverty prior to the crisis.

A key theme emerging from the engagement with individuals and young people is the detrimental impact of the pandemic on mental wellbeing due to a number of factors such as bereavement, loneliness and social isolation. Almost all (171) shielding respondents reported negative impacts of the pandemic. Almost half (47%) of respondents reported some form of isolation, with most reporting "Missing Family/Friends" (30% of respondents). 38% of respondents reported experiencing an impact on their health and wellbeing, of which the most frequent response was "Impact on Mental Health – Depression". Young people we heard from anticipated that they may need support to socialize again and they cited the potential of groups, like youth agencies, to support this type of recovery.

Young people we heard from thought that the outdoor learning practices they experienced in youth work settings during the pandemic "builds resilience and tackles trauma", leading them to recommend that mainstream education could benefit from adopting these practices: "the results are there and Glasgow could really benefit".

In terms of looking to the future, young people we heard described needing opportunities for training and employment being opened back up again. They also called for the maintenance of existing physical activity schemes like bike loans, including those run by local groups.

Recommendations:

With the findings indicating a strong requirement to plan and action social recovery with communities, and with the SRT committed basing its decisions on communities' experiences, this report recommends that the taskforce develops its strategic direction to set out how this will be done. This report proposes a framework that could usefully structure and optimise workstreams' engagement with communities.

While a number of issues encountered in our key findings may be mitigated as and when lockdown restrictions open back up to allow people to interact again, especially with family, we recommend taking a longer-term approach to tackle problems that we can anticipate enduring for some time, including: depression, anxiety (including coping with social situations) and further health issues due to delays in treatment caused by the pandemic.

The extent of the impacts reported by adults and young people on their wellbeing (including grief, arguments with family and boredom) leads us to recommend that mental wellbeing and inclusion of diverse groups are put at the heart of recovery approaches going forward. This is especially crucial for the most vulnerable and disadvantaged in our communities who were disproportionately affected by the pandemic's effects on wellbeing and poverty.

We recommend that practices used in youth work settings that young people have reported to us build resilience and tackle trauma, such as outdoor learning, are explored with a view to understanding how other youth services and settings, including mainstream education could adopt these practices.

In terms of pragmatic future support, we recommend mobilising support for young people to access employment and training opportunities, while also understanding how the extent of such opportunities are increased and opened up for young people. We also recommend ongoing support of local activity initiatives, such as bike loans, run by small community-led groups and third sector organisations.

In terms of pragmatic future support for shielding adults, our findings indicate that food parcels/prescription collections and support for utilities or financial support/guidance would be welcome and we recommend considering how services across the city can best meet such needs. Having a choice in the food parcel contents e.g. no meat products for vegetarians or people with religious dietary requirements was also mentioned as a potential improvement for any future food parcel support, again illustrating that many people wish to have a say in how support is planned and delivered.

Key Actions to support the recommendations:

- **Identify resources to take recommendations forward**.
  This process will be initiated by the working group at the August SRT meeting, where we will facilitate a group discussion, leading to agreed actions, including scoping of necessary resources to adopt a deliberative dialogue process on some of the workstreams. While the SRT may not exist after December, the need for services will continue.
- **Decide how the SRT will include the 'lived experience and voices of communities'**
  Although the SRT may not exist after 2021, the key partners around the table will continue to report from most of the structures into the Community Planning Partnership Strategic Group. We recommend that the CPP partners are best placed to discuss and agree how lived experience influences service planning and design.
- **Youth work settings and schools**
  Explore the extent that learning from youth work settings during the pandemic, such as outdoor learning, can be taken up by schools by working with youth groups, education services and schools
- **Mobilising support for young people**
  Understand how support can best be mobilised for young people to access employment and training opportunities across the city by mapping current provision and identifying how new opportunities can be created and how existing services may be enhanced.

- **Commit to ongoing engagement with citizens and communities, which should be evidenced in the workplans**
  As an outcome of discussion at the SRT in August, it is recommended that concrete actions are agreed relating to:

  - Evidencing community influence on the workstreams
  - Identification of community engagement resources across partners and gaps
  - Leadership and sphere of influence of the work
  - Future links to the CPP and Community Plan.

2. Why we did this

The Social Recovery Taskforce (SRT) in Glasgow has committed to engaging with citizens about its work, to support the social and economic renewal of the city following the (ongoing) COVID-19 pandemic. As part of this commitment, the Taskforce approved the formation of a short life working group to carry out a community engagement project with people on Glasgow City Council's shielding list and with young people. This report provides data and reflections from this project and provides recommendations to inform the Taskforce and its workstreams. A key recommendation outlines a framework to involve communities in planning recovery in a process of genuine co-production.

The aim of this community engagement project was to enable people on Glasgow City Council's shielding list to share their experience of how their lives have changed in the last year and what support they might need, so that workstream leads in the Social Recovery Taskforce and Economic Recovery Taskforce can understand the extent that their services and organisations could pivot to support Glasgow's communities of place, interest and identity to recover from the ongoing pandemic, *from their perspective and based on their lived experiences*.

Our interviews showed that while people found it hard to visualise a way out of the pandemic due to the uncertainties associated with the virus and the continuation of mostly negative impacts on their lives, many did report appreciation at being asked, and signalled that there is appetite across the city to work with services to help identify workable and realistic solutions to support social recovery and renewal. This finding strongly indicates a requirement for the taskforce and its workstream leads to work directly alongside communities in a development process designed to help communities shape social recovery planning and actions. With this requirement in mind, we recommend that the taskforce and its workstreams embed co-production to plan and action social recovery with communities:

'*Co-production is not just a word, it's not just a concept, it is a meeting of minds coming together to find a shared solution. In practice, it involves people who use services being*

*consulted, included and working together from **the start to the end** of any project that affects them.'*[1]

The pandemic is teaching us many lessons about the fragility and strengths of our society and how easily inequalities can be amplified and worsened. But most of all, from hearing from people's experiences we can draw an overarching sense that life isn't going to be the same again, or certainly not for a while. It therefore makes sense to apply co-production to our own ways of working, so that our social recovery and renewal is built with communities most affected by the pandemic as part of efforts to create a fairer, healthier city. This is not the time for the usual.

3. How we planned it

Who delivered this project?

The SRT agreed the following in October 2020:

1. A working group should bring together a few partners to make a community engagement plan and deliver it. *These partners must have resources they can commit*, either expertise (in case of equalities for example) or staff who have the experience of engagement and can carry it out. CES/GL to lead this process – with other partners and the Third Sector, bearing in mind the shifting priorities for many organisations.
2. The group needs to be able to engage with both the SRT and the ERT[2] to ensure that engagement is joined up and covers the proposed work streams, with both groups agreeing to be responsive to the needs identified by communities.
3. The group needs to be able to plan and carry out targeted engagement over the next three months to avoid progressing work streams without engagement. To borrow a phrase popular with community groups: 'nothing for us, without us.'

A working group was formed comprising of:

- Judith Hunter & Jonny Pickering, Community Empowerment Services, GCC
- Alex Byers and Coleen Willoughby, Communities and Adult Learning, Glasgow Life
- Cat Tabbner, Community Engagement, GCPH
- Maggie Murphy, Youth and Community work, Glasgow Kelvin College
- Callum Lynch, Community Engagement, Glasgow HSCP

[1] From the social care institute for excellence www.scie.org.uk

[2] Originally this project intended to work with the Economic Recovery Taskforce but this was not achieved.

Each member of the group was able to mobilise resources from within their own organisation to carry out the project and the Community Connectors from the Govanhill, Easterhouse, Springboig/Barlanark and Govan Thriving Places also took part.

The important point to note about this is that different public and third sector colleagues worked together to develop the project, then carried out the same work across each of their organisations. No additional funding was allocated to the work, although this did mean delays at times, when colleagues needed to prioritise other work areas.

What did we do?

Early on, the working group proposed to carry out very general and open interviews, to allow people to identify the things that mattered to them. In September 2020, the Communities Team in GCC and some of the Community Connectors carried out interviews for the Scottish Government Social Renewal Board, asking people about how their lives had changed, what was good/bad, and how did they see the future. On consideration of the broad themes of the SRT remit and early stage of the workstreams, it was felt that further interviews of this nature would be helpful.

Therefore, the decision was made to use three questions:

1. How has life changed for you since the start of the pandemic?
2. What are the good and bad things about that? (prompting to focus on the challenges)
3. What help, if any, do you think you will need in the future? (short and longer term, prompting for ideas about what this might look like) and
4. a final question, asking people if they would like to be involved in this work going forward.

It was also agreed not to duplicate the engagement already carried out by a wide variety of partners, especially within the Third Sector, including those relevant for specific SRT work streams, e.g. GDA's reports from service users, or CRER's engagement with BME communities.[3]

It was felt that added value would be gained, in the first instance, by engaging with two groups already identified by the Taskforces as among the types of communities experiencing adverse impacts of the pandemic and associated mitigation and control measures:

- Adults who were shielded during the first lockdown (who had given permission to be contacted again)
- young people.

[3] Further information is provided about some of the partner research in Appendix one of this report.

The shielded group were suggested because it was anticipated that they would include many people who have experienced major changes to their lives as a result of Covid. The shielded group included two main groups with very different experiences of lockdown: older people and those in the 'economically active' age group. With further restrictions possible in future, this is a group that will need 'recovery' in different ways.

In the medium to longer term, young people are arguably one of the most affected groups, particularly regarding employment and education.

What methods did we use?

Following the experience of carrying out telephone interviews for the Scottish Government, it was agreed that in order to comply with lockdown restrictions and advice on safe working practices, telephone calls would be the most practical and safest method of engagement. Telephone engagement was anticipated to also be most accessible for some of the target group, e.g. older people, some of who can be less digitally connected.

As most public sector staff in Glasgow have no access to Zoom, planning meetings were conducted using Microsoft Teams. For engaging young people, Teams was not fit for purpose because it is a platform that is not widely used or accessible for groups to use compared to other more suitable and freely available software such as Zoom. For this reason, partners in this group with access to Zoom used this software to plan and conduct online engagements with young people.

All interviews were carried out over January and February 2021 when Scotland was still under tight 'Stay at Home' lockdown restrictions.

4. What we heard

Overall, 400 people from the 2020 shielding list had agreed to be contacted again

- Of those: 196 calls were completed successfully, giving a 55% return. These calls were made by staff in Glasgow Life, Community Empowerment Services, the Glasgow Centre for Population Health, Health and Social Care Partnership and four community connectors from the Thriving Places programme.
- 21 interviews were carried out with young people via Glasgow Kelvin College and one group work session with twelve young people at the Urban Fox programme.

Of the non-completed calls:

- 11 had died/seriously ill
- 25 did not want to participate

- 55 wrong no/no answer[4]

Life Changes since Pandemic: "Good Things"

Of those who did provide a "good thing" response, 90 of those were of a "support" nature, accounting for 42% of positive responses. A further 72 (37%) respondents identified that the support they needed was "support from partner/family". Among the 49 "delivery" good thing responses, the more frequent type of delivery was "food parcels" (30 people; 15% of the respondents). 76 (38.8%) people didn't identify anything good resulting from the pandemic.

Good Things About How Life Has Changed Since the Pandemic (Grouped Responses)	No. of Responses*	% of "Good Thing" Responses (exc. nothing good) (n213)	No. of Respondents*	% of Respondents**
Nothing Good	76		76	38.8%
Support	90	42.3%	72	36.7%
Delivery	49	23.0%	39	19.9%
New/Increased Activities	41	19.3%	39	19.9%
Other	33	15.5%	29	14.8%
Grand Total	**289**			

* 196 people were interviewed - interviewees could provide more than one "good thing" response
** Percentages will exceed 100% as interviewees could provide more than one "good thing" response

'It makes you appreciate other people and contact with people more. It makes you more aware of mental health pressures on people.'

'I have witnessed some real support and compassion from my family. I have had time to take stock and realise what matters in life like family and also the services like the NHS.'

The table below is a breakdown of the "good things" responses by individual category before they are grouped. This shows that the three most frequent positive responses are "Support – Partner/Family" (27% of respondents mentioned this; "Delivery – Food Parcels" (15%); and in joint third "Support – Friends/Neighbours"/"Support – Agencies" (9%).

Good Things About How Life Has Changed Since the Pandemic	No. of Responses*	% of "Good Thing" Responses (n213)	% of Respondents **

[4] NB Some of this data was not recorded

		(exc. nothing good)	
Nothing Good	76		38.8%
Support - Partner/Family	53	24.9%	27.0%
Support - Friends/Neighbours	17	8.0%	8.7%
Support - Agencies	17	8.0%	8.7%
Support - Financial	3	1.4%	1.5%
Delivery - Food Parcels	30	14.1%	15.3%
Delivery - Prescriptions	11	5.2%	5.6%
Delivery - Shopping	8	3.8%	4.1%
New/Increased Activities - Digital/Online Learning	12	5.6%	6.1%
New/Increased Activities - Reading/Hobbies	12	5.6%	6.1%
New/Increased Activities - Exercise	7	3.3%	3.6%
New/Increased Activities - Working/Studying from Home	6	2.8%	3.1%
New/Increased Activities - Housework/Decorating	4	1.9%	2.0%
Other - Spend time in the Garden	10	4.7%	5.1%
Other - Vaccine	10	4.7%	5.1%
Other - Reduced Living Costs/Spending	6	2.8%	3.1%
Other - Improving Health	5	1.9%	2.6%
Other - Good for Environment	2	1.0%	1.0%
Grand Total	**289**		

* 196 people were interviewed - interviewees could provide more than one "good thing" response
** Percentages will exceed 100% as interviewees could provide more than one "good thing" response

Nearly 40% of people could not identify one positive thing at all. But of those who did, the support of family was crucial, followed by friends and agencies at the same level. The food parcels were of great relief to many; some had no-one to get shopping for them or couldn't access online deliveries, others were already in food poverty.

One respondent was wearing an offending tag and found the lockdown had been a positive experience because it made him equal to everyone else and he didn't need to worry about food. This feeling may have been shared by other marginalised groups who face societal barriers, but this wasn't a common theme amongst those who responded to the calls.

'I've loved lockdown. It's given me a chance to just shut the door and take a break from all the madness in the world. I've been able to watch lots of series' on tv and I got help with food parcels.'

The lack of a formal shielding programme in the second and third lockdowns was raised by many as an issue. Although they could go out, loss of employment leading to less income with more bills to pay, was a challenge.

'Money is a concern for me and my wife and I do struggle. Being at home we are using more heat and eating more. My wife went to the Well Food distribution point in Scotstoun today but it is so popular that we were only able to get 2 loaves.'

Life Changes since Pandemic: "Bad Things"

15 (7.7%) people responded that all bad and there was no "Bad Things" responses recorded for 10 (5.1%) interviews.

So, 171 people provided examples of "bad things" that had changed in their lives since the pandemic, each providing on average 2 "bad things", totalling 351 "bad things". When these responses are grouped under 6 categories, the most frequent "bad thing" was "Isolation" (n110) with 47% of the respondents identified at least one "bad thing" that could be grouped under "Isolation", the majority of which was "Missing Family/Friends" (30% of respondents). 38% (n75) of respondents provided at least one "bad thing" that could be grouped under "Impact on Mental/Physical Health", of which the most frequent response was "Impact on Mental Health – Depression" with nearly a fifth (19%; n37) of respondents mentioning this as a bad thing.

Bad Things About How Life Has Changed Since the Pandemic (Grouped Responses)	No. of Responses*	% of "Bad Things" Responses (n351) (exc. All Bad/Nothing Recorded)	No. of Respondents*	% of Respondents**
All Bad	15		15	7.7%
Nothing Recorded	10		10	5.1%
Isolation	110	31.3%	92	**46.9%**
Impact on Mental/Physical Health	85	24.2%	75	38.3%
Missing Activities	62	17.7%	57	29.1%
Impact to Support/Treatment	52	14.8%	52	26.5%
Other	29	8.3%	27	14.8%
Financial Impact	13	3.7%	12	6.6%
Grand Total	**376**			

* 196 people were interviewed - interviewees could provide more than one "bad thing" response

** Percentages will exceed 100% as interviewees could provide more than one "bad thing" response

Isolation was the worst thing about the pandemic, followed by its impact on mental and physical health. Aside from the health problems caused by delayed access to treatment for pre-existing medical conditions, there are also impacts from less exercise, too much time watching TV/online, unhealthy diet and alcohol etc.

'That's probably the worst thing about it. Some family members I haven't seen in six months. I have a big family, we are close knitted together and we used to always see each other. That's the worst thing. You're cooped up in the house by yourself.'

'I have been scared about my mental health. Everything is with tech, like on the tablet but I don't know how to access it.'

For those not living alone, there were other challenges too, illustrated in some quotes below:

'It has been a very challenging time. I am a lone parent with kids and I live in a flat. I have been shielding so I have been spending all my time in my bedroom and the kitchen because the kids live and sleep in the living room.'

'I have found the lockdown very hard and depressing. I live with my partner who works night shift. The pandemic and lockdown have affected him too and it has put a strain on our relationship at times.'

The table below is a breakdown of the "bad things" responses by individual category before they are grouped. This shows that the five most frequent negative responses are "Isolation – Missing Family/Friends" (30% of respondents mentioned this); "Impact on Mental Health - Depression" (19%); "Missing Activities – Getting Out" (15%); "Impact on Support/Treatment - Delays/Changes to Care Support/Health Treatment (14%) and in joint fifth "Isolation – Loneliness"/"Isolation – Missing Social Interaction".

Bad Things About How Life Has Changed Since the Pandemic	No. of Responses*	% of "Bad Things" Responses (n351) (exc. All Bad/Nothing Recorded)	% of Respondents **
All Bad	15		7.7%
Nothing Recorded	10		5.1%
Isolation - Missing Family/Friends	58	16.5%	**30.0%**
Isolation - Loneliness	26	7.4%	**13.3%**
Isolation - Missing Social Interaction	26	7.4%	**13.3%**
Impact on Mental Health - Depression	37	10.5%	**18.9%**
Impact on Mental Health - Bereavement	10	2.8%	5.1%
Impact on Mental Health - Anxiety/Fear of Going Out	25	7.1%	12.8%
Impact on Physical Health	9	2.6%	4.6%
Impact on Mental Health - Mental Illness	4	1.1%	2.0%
Missing Activities - Getting Out	29	8.3%	**14.8%**
Missing Activities - Boredom	17	4.8%	8.7%
Missing Activities - Exercise	16	4.6%	8.2%
Impact on Support/Treatment - Delays/Changes to Care	28	8.0%	**14.3%**
Impact on Support/Treatment - Food Deliveries/Shopping	17	4.8%	8.7%
Impact on Support/Treatment - Transport	4	1.1%	2.0%
Impact to Support/Treatment - House	3	0.9%	1.5%
Other - Conflicting/Poor Information	8	2.3%	4.1%
Other	7	2.0%	3.6%

Other - Working from Home/Home Schooling/Studying	6	1.7%	3.1%
Other - Lack of Digital Skills/Devices	5	1.4%	2.6%
Other - Practice Faith	2	0.6%	1.0%
Other - Lack of Support from Employer	1	0.3%	0.5%
Financial Impact - More Expensive Shopping/Fuel Costs	7	2.0%	3.6%
Financial Impact - Less Income/Benefit Reduction	5	1.4%	2.6%
Financial Impact - Additional Support/Care Costs	1	0.3%	0.5%
Grand Total	**376**		

* 196 people were interviewed - interviewees could provide more than one "bad thing" response
** Percentages will exceed 100% as interviewees could provide more than one "bad thing" response

While a number of these issues may be resolved as and when lockdown restrictions open up to allow people to interact again, especially with family, there are potentially longer-term problems to address: depression, anxiety and further health issues due to delays in treatment caused by the pandemic. There was also a sense of people needing to re-learn how to cope with social situations again.

'I have anxiety about going out, being around people. I'm scared that I'll catch it because of my illnesses so I stay in. I've been out of the house a handful of times. Otherwise I've got others to help. I only go for hospital appointments which is very scary as you are mixing with people. I'm more anxious in general. It's got to a point that I stop family members from coming into the house.'

'To be honest with you I'm more anxious. My mental health has taken a terrible blow. It's been very difficult and now I'm feeling ten times worse. Now I sleep in the day and I'm awake at night. I'm worried about noises and everything. Watching the news scares me a little bit. I'm scared about the vaccine side effects because of my medications.'

'I get angry with people who don't get masks, I have a chronic asthma so if I can put on one then everyone can. Scottish Government do what they can but people make a mockery of it all. They are selfish. My neighbours have no understanding of mental health, my housing association doesn't either. I don't know how I'll feel after the pandemic.'

Help required in the future

Any analysis of the response to the "future help" needs to be presented with the following caveats:

a) there were significant variations in the level/quality of recording between the different interviewers
b) for a significant number of the responses
    a. it is not clear as to whether the responses were the respondents own future needs or their suggestions for what should be provided to others
    b. the response has been a positive statement of a support that they have received (especially food parcels) which has been recorded as a "future help" and thus it has been included as a "future help" although it may not be

c) some of the "future help" should not now be future help e.g. "vaccinations"; "getting back to college" but was at the time of the interviews

What help, if any, do you think you will need in the future?

35 (18%) people responded that they didn't need any "future help" but in some instances they did identify "future help(s)" that are also included in the analysis below. A further 15 surveys (8%) either didn't have a response recorded for this question or responded that they didn't know re any "future help" that they might need. 146 (74%) interviewees identified at least one "future need".

There was a very wide of responses that resulted in 34 types of response that were grouped into eight main categories of "future help" needs. Some of the "future help(s)" could have been categorised under more than one group so there is a bit of subjectivity in the categorisation. What is clear is that the main service demands for those shielding are:

- Befriending services (by phone or in personal) to tackle isolation, especially if they could include the befriender assisting with shopping
- The reintroduction of health appointments/treatments, especially mental health support services
- Delayed work on house improvements, including aids & adaptations, could be undertaken as soon as safety rules allowed
- The provision of activities to tackle social isolation
- Help with paying utility bills/benefit advice

Of those who did provide a "future help" response, 25% (n61) of "future help" responses were related to "delivery" support. Within the "delivery" future help responses, the majority identified "delivery – food parcels" (n35) as a "future help" but in some instances it is not conclusive that the response was a statement of a "future help" need rather than being a positive statement about the food parcels. However, it is evident that there is a demand for support around the delivery of food/shopping. The level of "Delivery future help" support was followed by Health (n47; 19%) and Social Care (n39; 16%). Within these two group categories, there is an equal number (n18) of responses that stated, "Mental Health" and "Befriending" as a "future help" support need.

Future Help (Grouped Responses)	No. of Responses*	% of "Future Help" Responses (n248) (exc. No help required/Nothing Recorded/Didn't Know)	No. of Respondents*	% of Respondents**
No Help Required	35		35	17.9%
Nothing Recorded/Didn't Know	15		15	7.7%
Delivery	61	24.6%	53	27.0%

Health	47	19.0%	44	22.4%
Social Care	39	15.7%	33	16.8%
Other	35	14.1%	35	17.9%
Activities	25	10.1%	22	11.2%
Learning	17	6.9%	16	8.2%
Financial	14	5.6%	14	7.1%
Housing	10	4.0%	10	5.1%
Grand Total	**298**			

* 196 people were interviewed - interviewees could provide more than one "future help" response

** Percentages will exceed 100% as interviewees could provide more than one "future help" response

The table below is a breakdown of the “future needs” responses, that received at least 10 (5% of interviewees) responses, by individual category before they were grouped, as above. This shows that the three most frequent “future help” needs are “Delivery – Food Parcels” (20% of respondents stated this was a “future help”; and in joint second “Health – Mental Health” (9%) and “Social Care – Befriending” (9%).

Future Help	No. of Responses*	% of "Future Help" Responses (n248) (exc. No help required/Nothing Recorded/Didn’t Know)	% of Respondents**
Delivery - Food Parcels	39	15.7%	19.9%
No Help Required	35		17.9%
Health - Mental Health	18	7.3%	9.2%
Social Care - Befriending	18	7.3%	9.2%
Activities - Social Interaction/Tackle Isolation	17	6.9%	8.7%
Delivery - Shopping	14	5.6%	7.1%
Health - Vaccination	12	4.8%	6.1%
Other - Better/Continued COVID Safety Information	11	4.4%	5.6%
Health - Reintroduction of Appointments/Treatments	11	4.4%	5.6%
Total of 26 Less than 5% categories (excluding no	**108**	43.5%	55.1%
Grand Total	**298**		

* 196 people were interviewed - interviewees could provide more than one "future help" response

** Percentages will not match 100% as a) only “future help” categories mentioned by at least 5% of responses are included in the table and b) interviewees could provide more than one "future help" response

Young People

Background to engagements

Prior to the initial lockdown Glasgow Kelvin College offered a range of Youth work provision including daytime and evening building based programmes, detached youth work sessions and working in direct partnership with local youth and community organisations.

To follow college, national and government guidelines on restrictions, youth work activity primarily moved to online delivery and use of MS Teams channels to connect to young people as well as offering streetwork when the city was temporarily in Level 3, so the majority of the engagement with young people took place whilst still in these restrictions which invariably had an impact.

Whilst we engaged with higher numbers of young people on the street in this way the opportunities for lengthy discussion was greatly hampered by the cold weather and the novelty of the relationships. The Transitions class make up half the formal consultations.

An online session was also carried out with young people via Urban Fox youth project and the comments are recorded here.

How has life changed for you since the start of the pandemic?

Nearly every young person spoken to reported massive changes to their lives. The most common comments were about missing their friends at school and the challenges of learning online.

A sizeable minority of young people were sceptical about the vaccine and many presented conspiracy theories as justification for acting outwith the restrictions (still meeting up with friends, not wearing a mask). Others felt the restrictions were not targeted properly as the virus did not seem to them to be affecting younger people.

'There are a lot of rules to follow and I don't trust that we need to. I think we are being controlled and I don't want to be forced to get an injection'.

The pandemic also seemed to affect large friendship groups. Many young people reported losing contact with their wider social circle but retaining closer links with one or two friends. It remains to be seen whether these changes were temporary or if a reduction in the restrictions will bring with it the reformation of these larger friendship groups.

The topics of general conversation seemed to shift as well, TV/other media events became the dominant themes. Young people who used to speak about sports and activities they were involved in no longer had that to talk about and many expressed frustrations at not being able to take part in these things.

'My life is very different. I used to have a very active social life and had a holiday booked in June 2020. I have tried to follow the rules but don't always manage it. I started college this year but haven't been keeping up with the Zoom classes. I think I would have enjoyed the experience more if I had been in class'.

What are the good and bad things about that?

There were not many young people who thought there was anything good about the pandemic. Even those who enjoyed the extra time in bed from not having to get ready or travel to school did not see this as anything other than a minor bonus which did not come anywhere near compensating for the bad things.

'I feel angry that I have missed out on experiences and opportunities because of the lockdown.'

Perhaps tangentially the removal of ticket inspectors from trains was a move which more than a few young people were happy about. Despite our urging them not to, quite a few took advantage of the de facto free train travel.

The willingness and safety in travelling beyond their home neighbourhood is a good example of the tremendous change in attitudes towards territoriality which we have seen over the last ten years. We have seen no evidence of enforced geographical restrictions reigniting territorial behaviours.

The bad things with the pandemic were frequently discussed with the following themes being repeated across our service:

Missing loved ones, many young people could not meet up with their families and some got very upset talking about it.

Grief, as many young people lost family members during the pandemic and some reported feeling additionally upset with regular funeral rites unavailable. There was also a great deal of fear that people might not get to see grandparents again.

Boredom, as the lockdowns curtailed so many things which young people used to do and a great many young people spoke about being bored during the lockdown. Although most young people reported using online means to relax and communicate none of them suggested this was as good as meeting up in real life.

Family tensions, as most young people reported in increase in arguments at home due to the proximity and duration of time spent with siblings and parents. Some young people talked about the stress apparent when spending time between two households with differing attitudes towards the pandemic and the restrictions.

'It has really affected my ability to do college work online as my house is so busy I cannot concentrate or to be fully involved. I already have issues with depression and motivation and I feel this has made it worse. I can't think of anything good about the pandemic.'

'I really miss seeing my sister and my granny. I can't think of anything good.'

What help, if any, do you think you will need in the future?

This question was the hardest to get a coherent response from young people. After it became clear the initial lockdown was going to go well beyond the 2 weeks suggested on its implementation young people (and youth workers) stopped trying to predict what was going to happen. Young people became much more focussed on the here and now as they could not reasonably imagine what life was going to be like beyond the pandemic.

Through our engagements however it became clear that those young people who did not have access to or with other barriers to taking part in online classes were falling behind their classmates. The gap which already existed between learners who did not regularly attend school and those that did grew and some young people who were coping with school normally became detached from their peers and will require additional support to catch up.

Although only a very small proportion of young people have expressed a need for support with their mental health, nearly all young people have spoken about their mental health being negatively affected by the pandemic. The college have been running activities which give young people the space to explore their feelings, and they are certain that more needs to be done in this area, particularly around grief.

There were, however, some practical recommendations from young people. They recommend that the outdoor learning practices used in youth work settings during the pandemic be brought into schools because young people we heard from reported that outdoor learning "builds resilience and tackles trauma", which young people think is important for mainstream education: "the results are there and Glasgow could really benefit".

Young people need opportunities to be opened back up for employment and training. Like adults we heard from, young people also anticipated that they may need support to socialize again and they cited the potential of groups, like youth agencies, to support this. We recommend that such considerations are resourced.

Young people have seen the increase in local physical activity, and they would like initiatives like bike loan schemes to be supported to continue.

Who did we talk to?

The data on age, disability, ethnicity and gender of the respondents is recorded below[5]. This information was not captured for younger people, therefore this data relates to 164 of the interviewees.

[5] These are the personal characteristics officially recorded by GCC and the Scottish Government. However it may be that future community engagement seeks to record a wider range of equalities data.

5. How old are you?				
			Response Percent	Response Total
1	Under 18		1.83%	3
2	18-24,		0.00%	0
3	25-34,		2.44%	4
4	35-44		5.49%	9
5	45-54,		12.20%	20
6	55-64		26.22%	43
7	65+		50.00%	82
8	Prefer not to say		1.83%	3

As expected for the shielded group, there are a high number of people aged 65 and over, however, there is a significant number of adults of working age, totalling 46% of the sample.

6 How would you describe your gender?				
			Response Percent	Response Total
1	Female		62.80%	103
2	Male		35.37%	58
3	I prefer not to say		1.22%	2
4	I self describe as:		0.61%	1

This figure highlights the disproportionate impact of the pandemic on women.

7. Do you have a physical or mental health condition or illness lasting or expected to last 12 months or more?				
			Response Percent	Response Total
1	Yes		88.41%	145
2	No		10.37%	17
3	I prefer not to say		1.22%	2

DRAFT

8. If 'yes', does your condition or illness reduce your ability to carry-out day-to-day activities?			Response Percent	Response Total
1	Yes - a lot		69.39%	102
2	Yes - a little		24.49%	36
3	Not at all		4.76%	7
4	Prefer not to say		1.36%	2

Given the nature of the shielding programme, this data is not surprising. However, it is worth noting that of the shielders, a significant 10% did not have a permanent condition, and almost 30% are impacted only a little, or not at all by their condition.

9. How would you describe your ethnicity?			Response Percent	Response Total
1	White		90.24%	148
2	Mixed or multiple ethnic group		0.61%	1
3	Asian, Asian Scottish or Asian British		3.66%	6
4	African		1.22%	2
5	Caribbean or Black		0.00%	0
6	Prefer not to say		4.27%	7
7	Other (please specify):		0.00%	0

Without a recent census, we can't be sure of the current BME population of Glasgow, but a fair estimate would be between 15-20%. This would be far lower in the 65 and over age group, so the high figure of 90% White is reflective of that demographic.

General comment

As stated at the start of the report, there was no intention to duplicate work carried out by other equalities organisations, some of which are highlighted in the appendix to the report. In addition, there has not been the capacity within the group to analyse the equalities information in relation to the coded data. This may be something to consider in future with adequate resourcing.

However, many of the respondents were disabled people, and it is worth reminding ourselves of the disproportionate impact of the pandemic on this group, who despite having various conditions, did not live their lives in lockdown before the pandemic.

'My daily life has been totally disrupted. Lockdown with a mobility disability is unbearable. Being locked up makes disability more difficult to live with, all I concentrate on is my lack of ability rather than the ability I have to do things. Not getting to see anyone is hard, I used to go out every day to socialise. The first lock down flew past as no one knew what it was or expected it, the 2nd and 3rd have dragged in and its completely demoralising.'

5. What this data tells us

Mental Health and Loneliness

The general themes from the responses were that isolation is starting to influence shielded people's mental health and mood. There is increased anxiety about COVID 19 and either catching it, or someone vulnerable in their household/support bubble catching it and the potential consequences this could have for those with underlying health conditions.

As you would expect, people are missing social interaction with family and friends. In the North West, a number of people indicated that pre-existing mental health conditions had been exacerbated by lockdown. Many shielders are heavily reliant on family and friends for support and to get them their daily needs. Whilst there is some evidence that this has brought a new-found appreciation for support that family provide and a strengthening of relationships, mention was made by others that being locked up together for so long was adding strain to their relationship.

Loneliness came through as a factor that people were struggling with and many people thanked callers and were keen for us to contact them again so they had someone to talk to. In addition, many people reported anxiety about how they would manage in the future,

Appointments

There were a couple of references that indicated there is growing frustration at appointments being cancelled or changed to an alternative venue that were not necessarily easy to get to. There was worry about health issues being exacerbated as many services were paused, with increased symptoms and longer term health impacts.

Food Parcels

Food parcels that had been getting delivered during the first lockdown have since stopped but these appear to have been well received and would be welcome again for any further lockdowns. For some it gave access to regular food deliveries that they might otherwise have struggled to afford.

Finance

Some of the comments made suggest that financial concerns around paying for utilities were praying on their mind and support here would be welcomed. There were instances of people in receipt of food parcels but without power cards etc they were unable to cook. While officers tried as far as they could to join this up in the first lockdown, there were difficulties e.g. many smaller housing associations had staff on furlough leaving a gap in local support services.

Digital Support

People mentioned that they had been in receipt of digital devices which was overall welcomed as an initiative as it helped them to connect online with friends and family as well as accessing information and support. However, some respondents said that they were given devices but did not know how to use them so felt that without training this was of little help.

Negative and Positive impacts of Lockdown

Overall there was more negative than positive points about lockdown. Even those who had kept working and had no financial worries, struggled with anxiety and home schooling and fear for the future. Some people did note an increased empathy for others, having now experienced low mood and isolation for themselves.

Future Support

In terms of future support, food parcels/prescription collections and support for utilities or financial support/guidance would be welcome. Having a choice in the food parcel contents

e.g. no meat products for vegetarians or people with religious dietary requirements was also mentioned as a potential improvement for any future food parcel support.

As highlighted above, the key areas for support are:

- Befriending services (by phone or in personal) to tackle isolation, especially if they could include the befriender assisting with shopping
- The reintroduction of health appointments/treatments, especially mental health support services
- Delayed work on house improvements, including aids & adaptations, could be undertaken as soon as safety rules allowed
- The provision of activities to tackle social isolation
- Help with paying utility bills/benefit advice

While some respondents were unable to articulate the kind of support they needed, there was a high number who wanted to be involved in future discussions about that. We asked the question: would you like to be involved in this work going forward? In response, 67 people responded that they would like to be involved. However, there were only 15 questionnaires with a recorded No to this question, so it is unclear how many interviewees were asked it at the end of the interview. In some instances, the question doesn't appear to have been in the questionnaire that was used, so the number indicating interest could have been higher. Either way, at least 34% of respondents wanted to be involved in developing solutions to the problems intensified by or created by the pandemic.

One final point is that we should be wary of assuming that, as restrictions slowly ease, a number of these problems will go away. Some may, but there will be a fearfulness and anxiety about returning to 'normal' life for many.

6. What was good and bad about the project

A number of the staff who made the calls provided feedback at the end on how they felt the process worked for them. Some of the general points from the feedback forms are outlined here:

- On the whole staff found the engagement experience positive but felt limited in terms of being able to offer more than a 'listening ear' particularly for those with complex and compound support needs. Staff also felt unprepared to handle some of the more distressing calls including suicidal intentions and bereavement. Given many of the respondents reported adverse impact of the pandemic and lockdown on their mental health, it is important to ensure that future engagement approaches prepare staff accordingly and include signposting and other support measures. Follow up contact should be considered to check in with respondents and staff need to be better prepared to deal with complex issues particularly mental health and financial distress.

- Those who were contacted appreciated the 'human contact' and the opportunity to chat and be listened to. This was preferred to surveys and questionnaires being sent via post and email. Also as the respondents had been asked previously if they wanted to be contacted, this meant that neither participants nor staff were subjected to cold calling. Most people who were contacted felt as though they had been left with no contact from any services for nearly a year and as a result they were not confident that any feedback they gave would be acted upon. It is therefore crucial that the lived experiences of these people is not only heard, but responded to and acted on.

There is plenty of learning to be had from this experience. Due to the nature of the shielded group, we could have prepared the callers better for this experience. While the good outweighed the bad, we need better support and debriefing systems in place before doing any further work of this kind with vulnerable client groups. The point about locally based support routes is useful, however the challenge was being able to provide that level of information for every postcode in the city. *Glasgow Helps* was useful up to a point but less so for the more specific issues raised by some of the people interviewed.

It was also a challenge for the project team themselves who were at various times struggling from the same issues as everyone else: social isolation, loneliness, managing care responsibilities (including home schooling) and poor mental health. As everyone was carrying out this work on top of other demanding workloads, the project delivery time was longer than originally anticipated. But despite these difficulties, there was a general feeling of enjoyment from the collaborative partnership working and a sense of doing something positive for Glasgow citizens.

7. Recommendations

With the findings indicating a strong requirement to plan and action social recovery with communities, and with the SRT committed basing its decisions on communities' experiences, this report recommends that the taskforce develops its strategic direction to set out how this will be done. This report proposes a framework that could usefully structure and optimise workstreams' engagement with communities.

While a number of issues encountered in our key findings may be mitigated as and when lockdown restrictions open back up to allow people to interact again, especially with family, we recommend taking a longer-term approach to tackle problems that we can anticipate enduring for some time, including: depression, anxiety (including coping with social situations) and further health issues due to delays in treatment caused by the pandemic.

In terms of pragmatic future support, our findings indicate that food parcels/prescription collections and support for utilities or financial support/guidance would be welcome and we

recommend considering how services across the city can best meet such needs. Having a choice in the food parcel contents e.g. no meat products for vegetarians or people with religious dietary requirements was also mentioned as a potential improvement for any future food parcel support, again illustrating that many people wish to have a say in how support is planned and delivered.

The SRT has already identified a need to base its planning on the experiences of communities' experiencing some of the worst impacts of the pandemic; this involves engaging with people who may be in distress or who may be disclosing distressing information. For staff engaging with communities as part of the SRT and workstream activities, we recommend developing support and debriefing systems so that staff are engaging appropriately and signposting to appropriate support services in ways that also support staff wellbeing. *Glasgow Helps* was useful up to a point, but less so for the more specific issues raised by some of the people interviewed, such as bereavement, so we recommend that gaps in support and signposting are identified and resolved.

8. What we want you to do

As stated at the beginning, the purpose of this report is to set out the issues for communities, propose recommendations about what to do about them and to seek agreement from the Social Recovery Taskforce on a *framework* to guide their decisions making processes and their actions as a result of engaging with communities. The working group have been clear from the start that the intention was to continue an ongoing dialogue with communities, not to 'consult and go'.

By framework, we mean a clear plan, so that taskforce members agree how they will reach decisions and so that community engagement staff are able to communicate clearly to communities how their ideas will influence the taskforces decisions and action.

This proposed framework is underpinned by the National Standards for Community Engagement that were revised and re-published in September 2020 to support recovery and renewal[6]. The purpose of these standards is to support good community engagement practice during and after the pandemic, taking into account specific issues reported by communities including: increasing unemployment, economic recession, digital exclusion, mental illness, social isolation, homelessness and loneliness. All of these are issues reported by the participants in the interviews.

Framework

[6] National Standards for Community Engagement – Recovery and Renewal: http://www.voicescotland.org.uk/support-materials/

This working group proposes that we use the intelligence it has gathered as a basis for co-producing recommendations with communities about the type of support and action they think will be necessary. The reasons for proposing co-production is that the COVID-19 pandemic has emphasised the democratic need for decisions to be made *by* people about what affects them[7].

With this approach in mind, we propose a framework that guides the co-production of recommendations *with* communities, and guides the decision-making processes taken by the taskforce in response. We know that different workstreams are at different stages of progress. Some may have already begun the development of workplans, some are in the early stages of discussion. Some are already building their workstream on a foundation of community engagement. Either way or in between, the workstreams can benefit from this approach. If workplans have already developed, these can be tested out and revised using a co-produced approach.

The framework below is based on models of designing engagements[8] and supporting dialogue and deliberation to making effective decisions and taking the right actions[9]:

Co-producing recommendations with communities	Dialogue: • Explore the key themes and findings with communities to learn the extent that they reflect diverse experiences of the impacts of the pandemic and the range of support required to support social recovery. • Build understanding and relationships. • Co-produce a shared meaning of the range of lived pandemic experiences and a shared set of support requirements needed for social recovery.
	Deliberation: • Exchange, listen to and understand communities' reasons for the types of support required for social recovery. • Weigh up alternative ideas about support and recommendations. • Decide on recommendations to make to the SRTF.
Taskforce decisions and actions	• Accept recommendations, commit actions and allocate resources.

[7] Co-production: Building Back Better something different or more of the same?: http://coproductionscotland.org.uk/events-and-news/news/co-production-building-back-better-something-different-or-more-of-the-same/

[8] How to design and plan public engagement processes: a handbook: https://policyscotland.gla.ac.uk/public-engagement-**processes**-handbook

8 Public Dialogue and Deliberation: A communication perspective for public engagement practitioners : https://oliversdialogue.wordpress.com/public-dialogue-and-deliberation/

	• Actions may include allocating resources for processes in which communities have the power to make decisions that matter most to them (including Participatory Budgeting) as well as actions for taskforce members.

The key message in this framework is that we are asking providers to really listen to communities and start from there. That we agree to a degree of honesty about what works and what the resource challenges are. That we commit to being open to doing things in a different way if that is required. The lived experience and participation of communities, combined with the knowledge and resources of professionals, is the cornerstone of the community development approach that can facilitate genuine empowerment.

Current workstreams and leads

Mental Health (workstream lead: Fiona Moss, Public Health Oversight Board - https://www.glasgowcpp.org.uk/index.aspx?articleid=25628)

Technology and Digital (workstream lead: Colin Birchenall Digital Glasgow Board – these terms of refs indicate which members are on the board) https://glasgow.gov.uk/councillorsandcommittees/viewSelectedDocument.asp?c=P62AFQDN2U0GDNUT0G

Third Sector (workstream lead: Ian Bruce, GCVS - https://www.gcvs.org.uk/)

Black and Minority Ethnic Communities (Lead: Jatin Haria, GCC BME Taskforce Group)

Disabled Communities (Lead: Tressa Burke, Glasgow Disability Alliance)

Food Provision (Lead: Louise Mackenzie, Glasgow Food Policy Partnership/Glasgow Community Food Network)

Violence Against Women (Lead: Kirsti Hay, Violence Against Women Partnership)

Volunteering (Lead: Jill Miller, Glasgow Life - Volunteering Strategy Governance Group)

Child Poverty (Lead: Fiona Moss (see above), Child Poverty Governance Board)

Young People/Transitions (Lead: Mike McNally, Glasgow City Council Glasgow Partnership for Economic Growth)

Property (Lead: Ian Robertson, Making Best Use of Our Assets: Property Group)

Our proposal is that that we ask each workstream to identify the key themes of their workplan and show: how communities have influenced the development of it so far, what some of the challenges are in doing so and what kind of practical support they would need to meet those challenges. We need to understand the scale of the resources needed to support partners and communities on a co-production journey. While the Community Engagement Working Group want to continue facilitating this process, we will need to

widen the support and engagement. Training and development must also be part of the picture at all levels of staff: not just those involved in frontline delivery.

Given the potential for resource and capacity issues, it might be that the SRT decides to take the approach of *a number of pilots to take this work forward,* where the workstreams are not already co-produced.

In planning our work, we reference such concepts as *empowerment* and *co-production* time and time again, without ever really living up to what they mean. The Community Empowerment Act has so much potential to change our top-down way of working but is underused by communities. Many citizens will have no idea of the rights they have to participate in civic life, but we don't need to wait until they find out. With so much recent upheaval in our way of working, this is the right time to change our practice and shift power towards citizens, where it should be.

Actions for implementing recommendations:

It has been agreed that the SRT will conclude in December 2021 and that all outstanding workstreams will merge into the Community Plan for Glasgow, which is due to be updated in the autumn.

- **Identify resources to take recommendations forward**.
  This process will be initiated by the working group at the August SRT meeting, where we will facilitate a group discussion, leading to agreed actions, including scoping of necessary resources to adopt a deliberative dialogue process on some of the workstreams. While the SRT may not exist after December, the need for services will continue.
- **Decide how the SRT will include the 'lived experience and voices of communities'**
  Although the SRT may not exist after 2021, the key partners around the table will continue to report from most of the structures into the Community Planning Partnership Strategic Group. We recommend that the CPP partners are best placed to discuss and agree how lived experience influences service planning and design.
- **Youth work settings and schools**
  Explore the extent that learning from youth work settings during the pandemic, such as outdoor learning, can be taken up by schools by working with youth groups, education services and schools
- **Mobilising support for young people**
  Understand how support can best be mobilised for young people to access employment and training opportunities across the city by mapping current provision and identifying how new opportunities can be created and how existing services may be enhanced.

- **Commit to ongoing engagement with citizens and communities, which should be evidenced in the workplans**
  As an outcome of discussion at the SRT in August, it is recommended that concrete actions are agreed relating to:

  - Evidencing community influence on the workstreams
  - Identification of community engagement resources across partners and gaps
  - Leadership and sphere of influence of the work
  - Future links to the CPP and Community Plan.

DRAFT

Appendix one: Some other community engagement reports relating to the pandemic

General

Scottish Government: Covid impact report:

https://nationalperformance.gov.scot/scotlands-wellbeing-impact-covid-19

Scottish Government Social Renewal Board:

https://www.gov.scot/publications/not-now-social-renewal-advisory-board-report-january-2021/

/together national conversation:

https://together.org.uk/talk-together/ summary https://together.org.uk/Executive-Summary.TalkTogether.pdf

GCPH/Policy Scotland Micro briefings

https://policyscotland.gla.ac.uk/covid-19-project/covid-19-microbriefings/

Disabled people –

Glasgow Disability Alliance:

https://gda.scot/wp-content/uploads/2020/09/GDA%E2%80%93Supercharged-Covid-19Report.pdf

Inclusion Scotland:

https://inclusionscotland.org/covid-19-evidence-survey/

LGBT people

https://www.lgbtyouth.org.uk/news/2020/how-covid-19-is-affecting-lgbtqiaplus-young-people-living-in-scotland/

https://pinksaltire.com/wp-content/uploads/2020/11/Easyread-Report.pdf

BME people

A number of useful documents from the National Expert Group on Covid 19 & Ethnicity:

https://www.gov.scot/groups/expert-reference-group-on-covid-19-and-ethnicity/

CRER have information about the needs during the first lockdown and a survey of BME community providers. Contact carol@crer.org.uk for more information.

BEMIS

https://bemis.org.uk/wp/wp-content/uploads/2020/08/BEMIS-EMNRN-ERG-Recommendations-August-2020.pdf

Equalities generally:

https://www.gov.scot/binaries/content/documents/govscot/publications/research-and-analysis/2020/09/the-impacts-of-covid-19-on-equality-in-scotland/documents/full-report/full-report/govscot%3Adocument/Covid%2Band%2BInequalities%2BFinal%2BReport%2BFor%2BPublication%2B-%2BPDF.pdf

Young People

Young Minds have been doing surveys with young people every month:

https://youngminds.org.uk/about-us/reports/coronavirus-impact-on-young-people-with-mental-health-needs/

Scottish Government:

https://www.gov.scot/publications/covid-19-children-young-people-families-december-2020-evidence-summary/pages/8/

Youthlink Scotland:

https://www.youthlinkscotland.org/covid-19-guidance/

The Health Foundation:

https://www.health.org.uk/publications/long-reads/generation-covid-19

DRAFT

Appendix two – acknowledgements

Thank you to…

The planning group:

- Judith Hunter & Jonny Pickering, Community Empowerment Services, GCC
- Alex Byers and Coleen Willoughby, Communities and Adult Learning, Glasgow Life
- Cat Tabbner, Community Engagement, GCPH
- Maggie Murphy, Youth and Community work, Glasgow Kelvin College
- Callum Lynch, Community Engagement, Glasgow HSCP

Report writing team:

Judith Hunter, Cat Tabbner, Maggie Murphy and Coleen Willoughby.

Data Collection and coding:

Stephen McGill, Community Empowerment Services, GCC

Tony Begley, Glasgow Life

Call handlers:

Annemarie Gorman, Joyce Lau, Martin Hawkins, Mark Ellis, Steven Dowling, Lawrence O'Neill – Community Empowerment Services

Cat Tabbner – Glasgow Centre for Population Health

Ola Pawluk, Yvonne Reilly, Donna McGill, Ruth Plummer – Community Connectors/Thriving Places

Callum Lynch, May Simpson – Health & Social Care Partnership

Jamie Lumsden & Martin McKerry – Glasgow Kelvin College

Jonny Howes, Gordon Mackie, Lesley Crawford, Susan Docherty, Peter Hunter, Emma O'Donnell, Stephen McDermott, Janet Bain, Mary Rocks, Clare Robertson, Natalie McNair, Corinne Allan, Nicola Byfield, Graeme Crichton, Amanda Clark, Barry Hutchison, Charlie Mooney – Glasgow Life

And finally, to all the people we interviewed, Urban Fox youth project, and all the young people who gave their time to share their experiences and their hopes for the future

DRAFT

SRT - Agenda Item 4

Purpose of report: to consider whether the Academic Advisory Group set up to support the Social Recovery Taskforce should be continued once the Taskforce has competed its work, reporting through the Community Planning Partnership Strategic Board

Background: In September 2020, colleagues from Policy Scotland at the University of Glasgow and Glasgow Centre for Population Health proposed setting up an Academic Advisory Group to provide Taskforce members and senior officials with access to research on the ways in which the pandemic was impacting on vulnerable groups within the city (and in particular on protected groups). The AAG has been Chaired by Des McNulty, Assistant Vice-Principal at the University of Glasgow. It co-ordinated a number of helpful presentations at taskforce meetings on relevant topics and (in conjunction with voluntary sector partners) produced a series of 'microbriefings' that provide information on the impact of the pandemic in accessible written form. The work of the Taskforce has been greatly assisted by the development by AAG colleagues of ten questions to be addressed by each of the working groups. The questions have helped all those involved in the taskforce by focusing their attention on learning from what has happened and identifying solutions within a common framework. Des McNulty has been invited to explain the work of the AAG at the three sector partnership meetings in August

Proposal: The AAG has significantly enhanced the working of the SRT. The AAG should continue beyond the life of the Taskforce, as it has the potential to add value to the work of the Community Planning Partnership Strategic Board. We have reached out to colleagues from Glasgow Caledonian University and the University of Strathclyde as well as to those from the University of Glasgow so that relevant research and insights from all three Universities in the city (and their wider networks) can be fed into partners in ways that are not only succinct and intelligible but also useful for those grappling with complex and difficult issues. From the researcher's point of view, the benefit lies in the opportunity to convey their findings to policy leads, senior practitioners and elected members, thereby informing policy discussion. This is particularly rewarding when some of their ideas are taken up. GCPH and Policy Scotland have a great deal of experience of working at the research/policy interface and can assist less experienced colleagues to put forward their work effectively.

Recommendation: Appropriate arrangements should be made to continue the work of the AAG with the Taskforce and to continue that involvement through the Community Planning Partnership Strategic Board. This might require some minor amendments to the membership and remit of the Strategic Board and to the composition of the Academic Advisory Group itself, consistent with what has been outlined above. It is important that there is a sustained relationship so that the AAG can effectively broker translation of research and expert advice in line with the priorities and requirements of the Taskforce and the Strategic Board. The advisory role of the Group should therefore be formally recognised and mechanisms for seeking advice developed that enable it to do its work effectively.

GCPP STRATEGIC PARTNERSHIP

SOCIAL RECOVERY TASK FORCE

EXECUTIVE SUMMARY | JULY 2021

GLASGOW COMMUNITY PLANNING PARTNERSHIP

EXECUTIVE SUMMARY | SOCIAL RECOVERY TASK FORCE

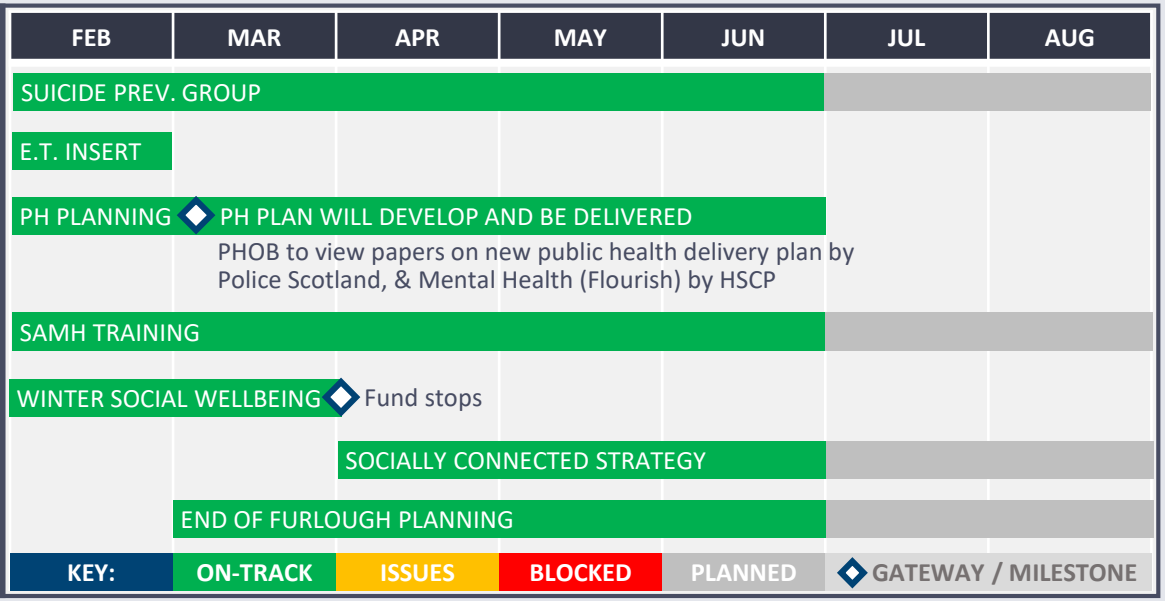
STATUS	TASK FORCE LEAD BERNADETTE MONAGHAN	WORKSTREAM OVERVIEW	REPORT AUTHOR	WORKSTREAM | KEY MESSAGE				
						TEN Q		
⏩	Mental Health	Provide support to those in the city struggling with the impact of COVID-19	Fiona Moss	Presentations at NHS services by people in acute distress rising. GP's reporting that they are seeing patients they have not seen in years who are now distressed by changes in circumstances. Concern for the next period.	0	10	0	0
⏩	Technology and Digital	Provide assistance relating to sudden digital demands of the COVID landscape	Colin Birchenall	Numerous initiatives implemented throughout the past year, delivering devices & training, allowing schools and workplaces to continue to function. Establishing a working group to align the cities approach to digital inclusion.	1	9	0	0
▶	Third Sector	Evaluate, review and modernise the 3rd sector's relationships with partners	Ian Bruce	The 3rd sector group has now met three times, most recent meetings on Community Empowerment and Funding. We await sponsorship/support to secure public partner input to reviewing these future topics.	0	10	0	0
⏩	Black & Minority Ethnic Comm.	Challenge racism and make sure BME communities have access to necessary support	Jatin Haria	Socioeconomic status and other factors mean BME communities have been disproportionately affected by COVID. Now working with BME groups to develop new streams of work, with £250,000 in funding recently secured.	0	10	0	0
▶	Disabled Communities	Improve lives and reduce inequalities supercharged by the pandemic	Tressa Burke	Agreed priority themes for the workstream are around Access to Services and embedding Lived Experience in codesign. Areas will include: Participation, Anti Poverty, Health & Social Care, Social Isolation and Mental Health.	0	10	0	0
▶	Food Provision	Assist in the launch of the GCFP and help improve referral pathways for food	Louise MacKenzie	GCFP team reviewing response from online consultation prior to launch. Food pantries being opened across city, but currently constrained by availability. Working to improve referral pathways but increased partnership would help.	0	10	0	0
▶	Violence Against Women	Continue to reach out to at risk individuals, especially those isolated due to COVID	Kirsti Hay	Progressing a range of partnership initiatives. Planning for the potential increase in referrals when restrictions ease. Working to improve connections and pathways to services for those experiencing VAW.	0	10	0	0
▶	Volunteering	Review our shared Strategy for recovery/renewal in light of COVID-19	Jill Miller	An independent review of volunteering activity has been completed, and is now being discussed alongside partners. Aim to use the review to develop a whole system approach to policies, programmes, services in the city.	0	10	0	0
▶	Child Poverty	Minimise the impact of COVID-19 on efforts to combat child poverty	Fiona Moss	Early planning for furlough ending financial advice provision	0	10	0	0
▶	Young People / Transitions	Co-design and management of the SG funded Young Person's Guarantee (YPG).	Mike McNally	GCC are co-ordinating the development and delivery of the Scottish Government's Young Person's Guarantee (YPG). A steering group from our Local Employability Partnership is guiding its development.	0	10	0	0
▶	Property	Delivery of PAL strategy will enable the provision of better quality services.	Ian Robertson	The People Make Glasgow Communities programme will encourage the people who know, use and are passionate about their local resources to make them more relevant and accessible to everyone in the local community.	0	10	0	0

KEY	SYMBOL					▲	⏮	⏸	▶	⏩	ANSWERED	IN PROGRESS	NOT ANSWERED	N/A	KEY
	MEANING	ON-TRACK	ISSUES	BLOCKED	PLANNED	CLOSED	PENDING	PAUSED	STARTED	FAST					

FLASH REPORT | MENTAL HEALTH

GREEN

SIX MONTH VIEW



STATUS – KEY MESSAGE

LEAD: Fiona Moss

KEY MESSAGE

Presentations at NHS services by people in acute distress rising. GP's reporting that they are seeing patients they have not seen in years who are now distressed by changes in circumstances. Concern for the next period.

PLAN	BUDGET	RESOURCE
GREEN	GREEN	GREEN

4-WEEK VIEW

PAST 4-WEEKS

- GCVS/HSCP hosted very successful event with over 70 vol orgs on Suicide Prevention Contagion
- IJB (5th May) awarded funds to extend Compassionate Distress Response Service (CDRS) for 16-25 year olds. Anticipate Aug/Sept delivery.
- Continued training delivery with additional provision now scheduled for 2021/22
- Report on the 68 Organisations delivering activities to reduce winter isolation being prepared by Impact Funding Partners

NEXT 4-WEEKS

- Flourish Glasgow Partnership first meeting scheduled for 4th June
- GVCS mental well-being programme for the 3rd Sector being progressed with recruitment of an additional worker
- Socially Connected Glasgow Strategy development partner being secured
- Preliminary review of international evidence of programmes that support family members after a death by suicide continuing and reports June .

THE 10 QUESTIONS

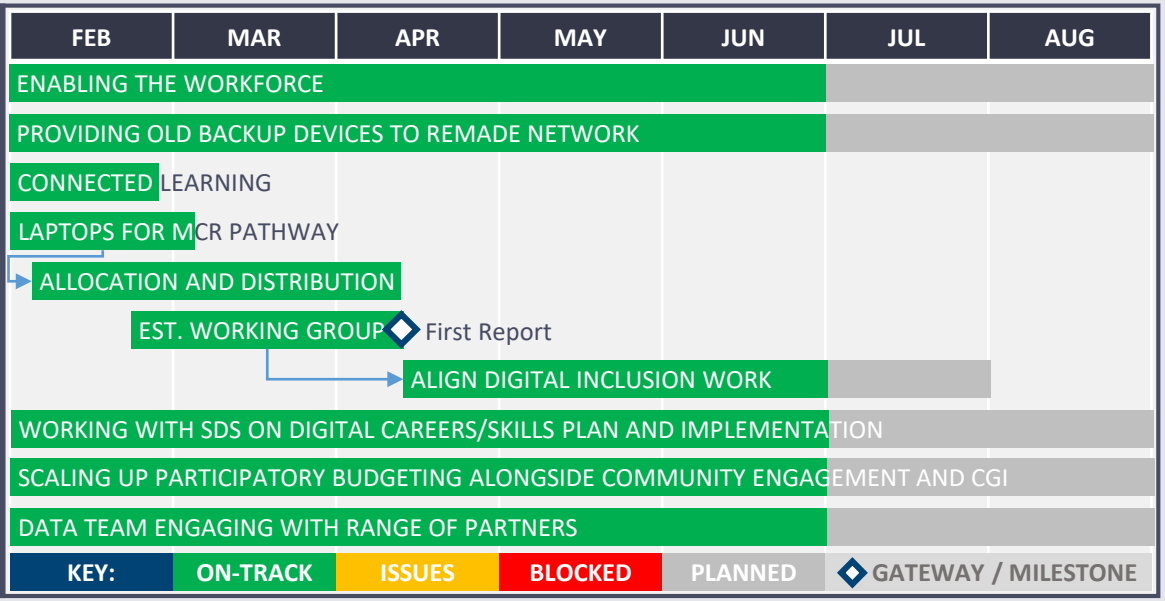
1. Local Knowledge			**2.** Glasgow's Needs
3. Other Partnerships			**4.** Lockdown Experience
5. Best First Moves			**6.** Why Those Moves
7. Measuring Success			**8.** City Priorities
9. Improve Collaboration			**10.** Required Sys. Changes

0	10	0	0
ANSWERED	IN PROGRESS	NOT ANS.	N/A

FLASH REPORT | TECHNOLOGY & DIGITAL

GREEN

SIX MONTH VIEW



STATUS – KEY MESSAGE

LEAD: Colin Birchenall

KEY MESSAGE

A number of initiatives have been implemented throughout the past year, delivering devices and training, allowing schools and workplaces to continue to function. Now moving to establish a working group intended to align the approach to digital inclusion taken by partners in the city.

PLAN	BUDGET	RESOURCE
GREEN	GREEN	GREEN

4-WEEK VIEW

PAST 4-WEEKS

- Digital Inclusion working group established with representation from elected members and partners across public, third, and academic sector.
- All participants recognised the need and value of a more coordinated approach to target digital inclusion support to those in most need in the city

NEXT 4-WEEKS

- Engagement with participants of the Digital Inclusion working group to prioritise activities for closer collaboration.
- Further work required to scope the reporting for digital into SRTF will be required
- Kimberley Hose and the Data team continuing to assist key partners.

THE 10 QUESTIONS

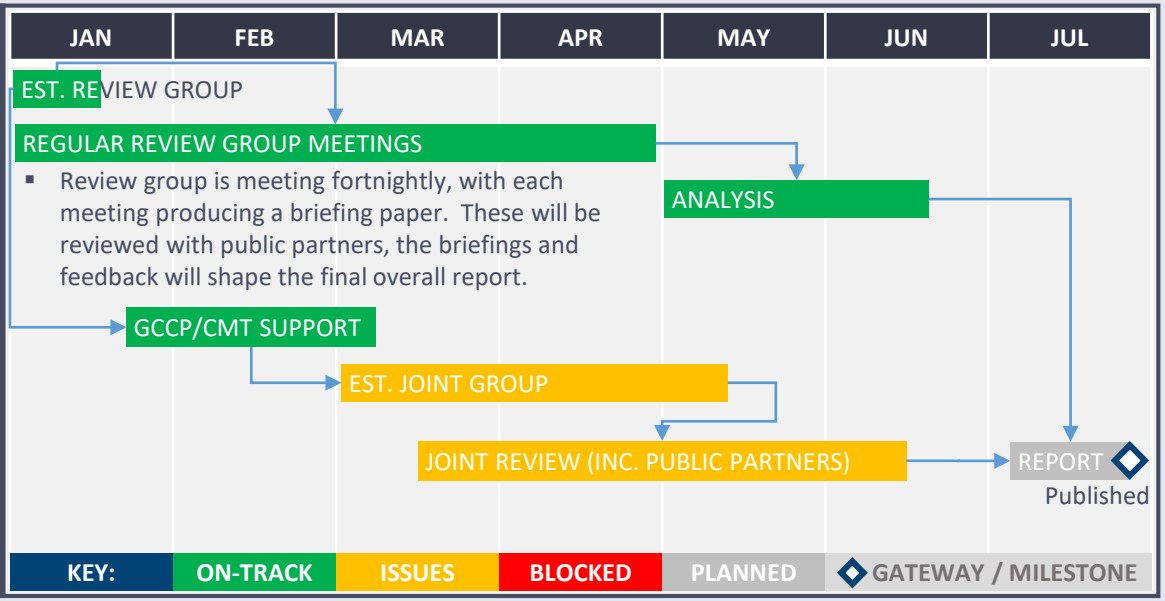
1. Local Knowledge			**2.** Glasgow's Needs
3. Other Partnerships			**4.** Lockdown Experience
5. Best First Moves			**6.** Why Those Moves
7. Measuring Success			**8.** City Priorities
9. Improve Collaboration			**10.** Required Sys. Changes

1	9	0	0
ANSWERED	IN PROGRESS	NOT ANS.	N/A

FLASH REPORT | THIRD SECTOR

GREEN

SIX MONTH VIEW



STATUS – KEY MESSAGE

LEAD: Ian Bruce

KEY MESSAGE

Evaluating the 3rd sector relationships with partners, to shape discussion and review the Concordat, report due this summer. Review group is 3rd sector members, and resource is awaited for public sector partners to review the groups briefings, to shape the final report.

PLAN	BUDGET	RESOURCE
GREEN	GREEN	GREEN

4-WEEK VIEW

PAST 4-WEEKS

- All third sector only groups have now completed. Final report on this being produced for circulation, with a set of recommendations for implementation.
- Glasgow City Council has begun its internal process to look at priorities.

NEXT 4-WEEKS

- Intend to confirm sponsorship and support for public sector managers joining the review process (Establish Joint Group).
- Anticipate third and public sector colleagues coming together from June onwards

THE 10 QUESTIONS

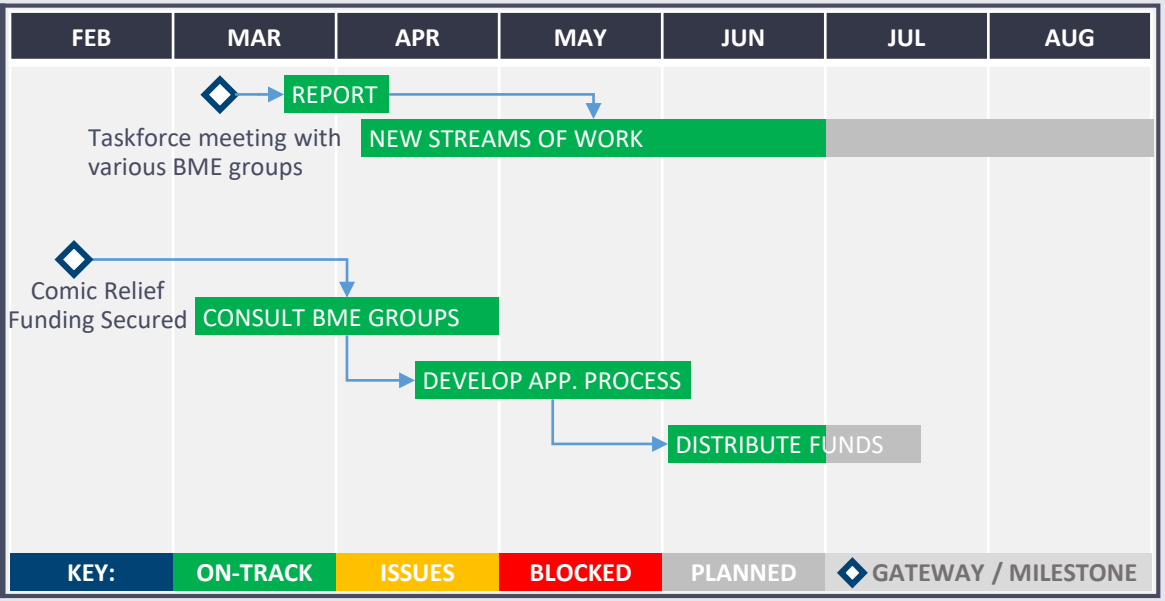
1. Local Knowledge			**2.** Glasgow's Needs
3. Other Partnerships			**4.** Lockdown Experience
5. Best First Moves			**6.** Why Those Moves
7. Measuring Success			**8.** City Priorities
9. Improve Collaboration			**10.** Required Sys. Changes

0	10	0	0
ANSWERED	IN PROGRESS	NOT ANS.	N/A

FLASH REPORT | BME COMMUNITIES

GREEN

SIX MONTH VIEW



STATUS – KEY MESSAGE

LEAD: Bailie A. Christie

KEY MESSAGE

Socioeconomic status and other factors mean BME communities have been disproportionately affected by COVID. Now working with BME groups to develop new streams of work, with £250,000 in funding recently secured. Would be valuable to discuss how other workstreams are embedding racial equality issues in their work.

PLAN	BUDGET	RESOURCE
GREEN	GREEN	GREEN

4-WEEK VIEW

PAST 4-WEEKS

- £250,000 awarded to CRER by Comic Relief to fund BME groups on COVID recovery issues - £150,000 of which will be spent in the Greater Glasgow area.
- Consulted with BME groups in the city regarding allocation of Comic Relief funds.
- Reviewed the detailed information given by the 15+ BME groups who took part in the March 2nd meeting to identify issues and priorities.

NEXT 4-WEEKS

- 80+ responses received for CRER's Comic Relief funding survey - will add information from this to input gathered at last meeting to get a better picture of activity, needs and priorities in the City.
- CRER Comic Relief funding application process being finalized, with the applications due to go live mid-May
- Next meeting of BME Task Force 1st June 2021 - intending to look in detail at BME Children/YP Mental Health Issues, and also at Child Poverty in the city.

THE 10 QUESTIONS

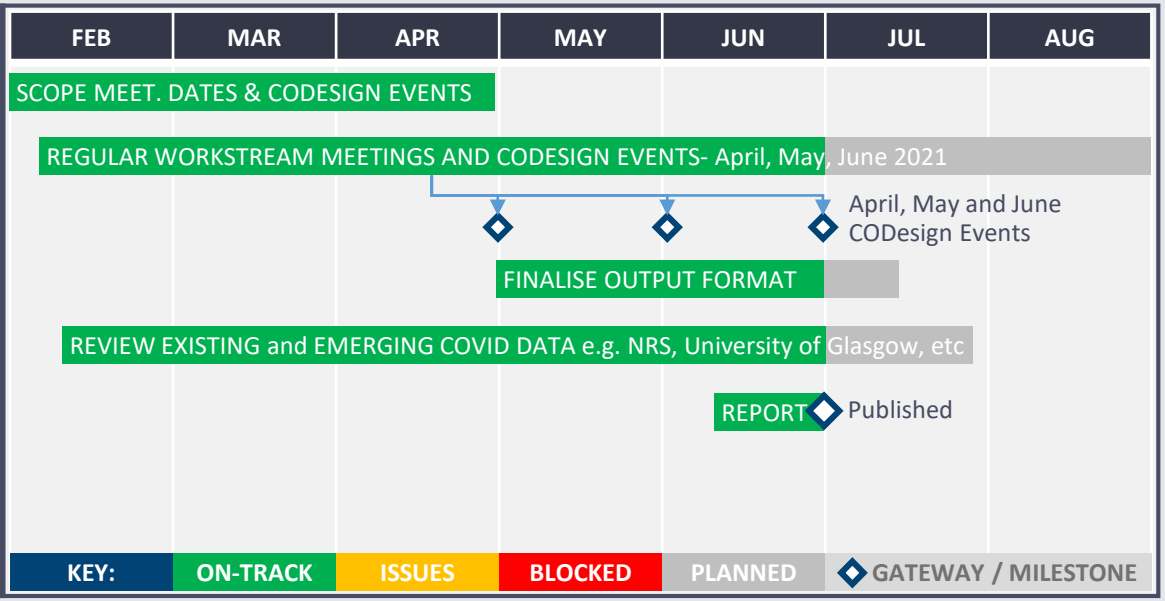
1. Local Knowledge			**2.** Glasgow's Needs
3. Other Partnerships			**4.** Lockdown Experience
5. Best First Moves			**6.** Why Those Moves
7. Measuring Success			**8.** City Priorities
9. Improve Collaboration			**10.** Required Sys. Changes

0	10	0	0
ANSWERED	IN PROGRESS	NOT ANS.	N/A

FLASH REPORT | DISABLED COMMUNITIES

GREEN

SIX MONTH VIEW



STATUS – KEY MESSAGE

LEAD: Tressa Burke

KEY MESSAGE

Jointly chaired by Tressa Burke and Councillor Layden. Agreed priority themes are around Access to Services and embedding Lived Experience in codesign. Areas will include: Participation, Anti Poverty, Health & Social Care, Social Isolation & Mental Health. Outputs Reports will review evidence, appraise what has worked and will set targets for improvement.

PLAN	BUDGET	RESOURCE
GREEN	AMBER	AMBER

4-WEEK VIEW

PAST 4-WEEKS

- Planning meetings with GCC Officers/ Secretariat.
- Planning discussions /meetings with DPOs and others- related to theme.
- CoDesign Event #2: Poverty and Work held Wednesday 26th May - attended by 60+ invited officers, disabled people led orgs, their members and elected members, chaired by Jim. McCormick, CEO The Robertson Trust
- Analysis of contributions and recommendations underway.

NEXT 4-WEEKS

- Workstream meeting to take stock: review progress, consider new evidence and evaluate findings so far- 22nd June.
- Conversations with key officers to CoDesign Event
- Planning meetings for lead in e.g. agree invites with secretariat and DPO Network to CoDesign Event #3 – Health & Social Care exploring 'What Works' within Health & Social Care for disabled people and codesigning recommendations, targets and actions which are practical and measureable.

THE 10 QUESTIONS

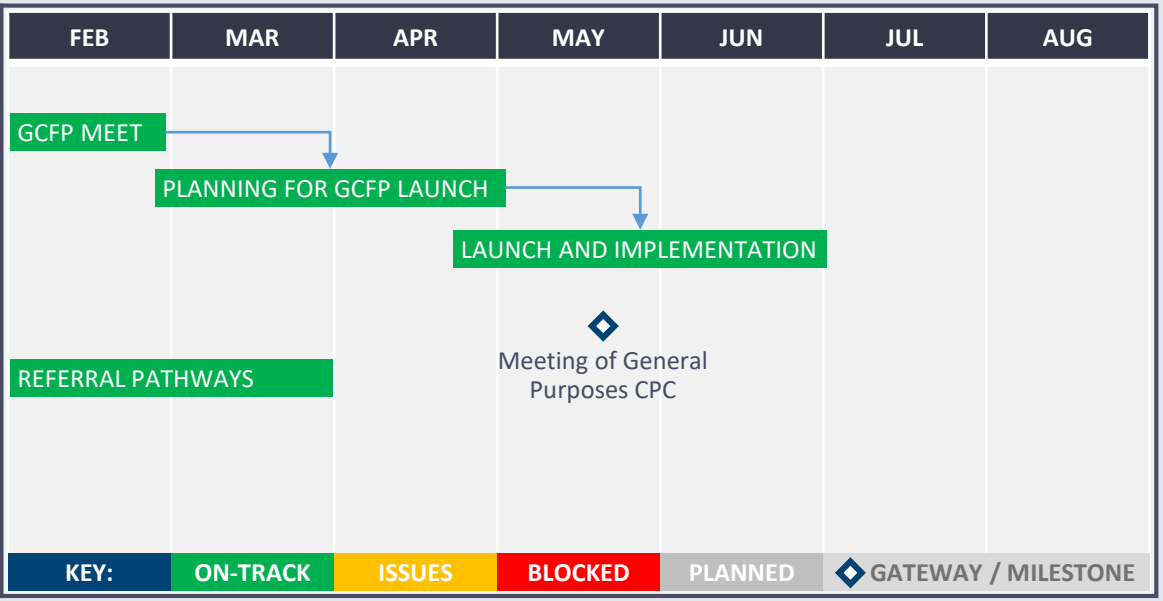
1. Local Knowledge			**2.** Glasgow's Needs
3. Other Partnerships			**4.** Lockdown Experience
5. Best First Moves			**6.** Why Those Moves
7. Measuring Success			**8.** City Priorities
9. Improve Collaboration			**10.** Required Sys. Changes

0	10	0	0
ANSWERED	IN PROGRESS	NOT ANS.	N/A

FLASH REPORT | FOOD PROVISION

GREEN

SIX MONTH VIEW



STATUS – KEY MESSAGE

LEAD: Louise MacKenzie

KEY MESSAGE

The GCFP team is now reviewing the response from online consultation in preparation for launch. Additional food pantries are being opened across the city, but are currently being constrained by food availability. Working with GCVS to improve referral pathways but would benefit from increased partnership in this area.

PLAN	BUDGET	RESOURCE
GREEN	GREEN	AMBER

4-WEEK VIEW

PAST 4-WEEKS

- Meeting of the Glasgow City Food Plan team to discuss the findings of the online consultation and to prepare for the launch of the initiative in Spring.
- Continuing to work alongside GCVS on improving support offered to those experiencing food poverty, and increasing accessibility via more effective referral pathways

NEXT 4-WEEKS

- Glasgow City Food Plan approved 11/5. Planning underway for launch and promotion.
- Glasgow Food Policy Partnership development session planned.
- Update on food pantries and further development of food growing to be discussed by General Purposes CPC in May.

THE 10 QUESTIONS

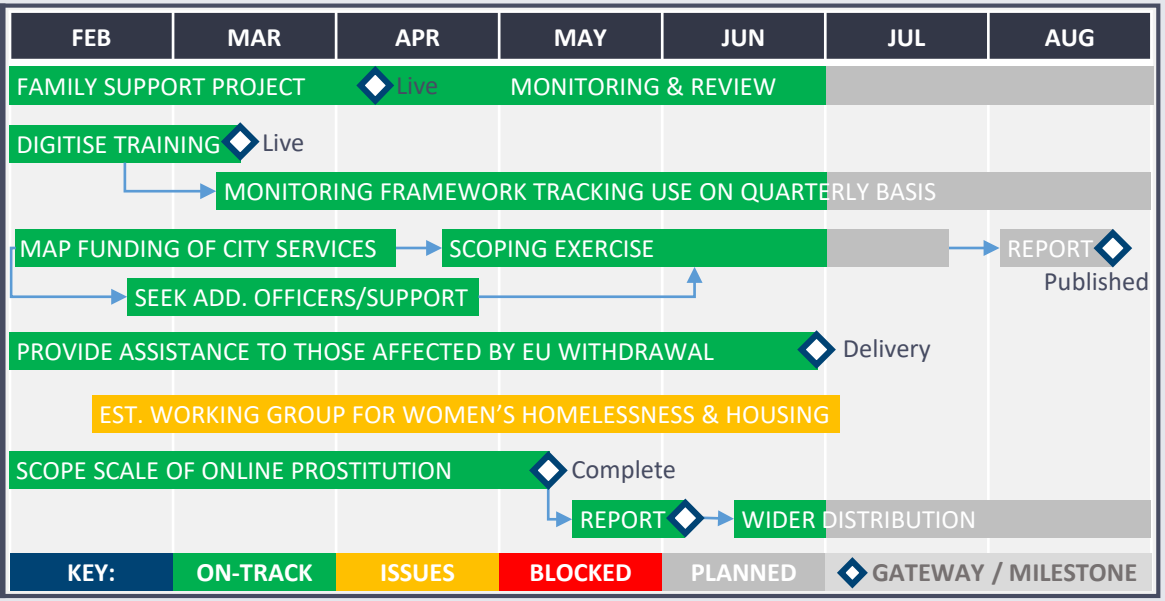
1. Local Knowledge			**2.** Glasgow's Needs
3. Other Partnerships			**4.** Lockdown Experience
5. Best First Moves			**6.** Why Those Moves
7. Measuring Success			**8.** City Priorities
9. Improve Collaboration			**10.** Required Sys. Changes

0	10	0	0
ANSWERED	IN PROGRESS	NOT ANS.	N/A

FLASH REPORT | VIOLENCE AGAINST WOMEN

GREEN

SIX MONTH VIEW



STATUS – KEY MESSAGE

LEAD: Kirsti Hay

KEY MESSAGE

Progressing a range of partnership initiatives. Planning for the potential increase in referrals when restrictions ease. Working to improve connections and pathways to services for those experiencing VAW.

PLAN	BUDGET	RESOURCE
GREEN	AMBER	AMBER

4-WEEK VIEW

PAST 4-WEEKS

- Delivery of online workshop on Pre & Settled status for EU women & VAW
- Translated information developed for women from EU communities with JRS & SWRC
- Family Support Project: MAHAH distributing funds
- Report to GVAWP on scoping exercise on scale on online prostitution. Report approved by GVAWP
- SRTF 10 questions responses discussed by GVAWP & working groups

NEXT 4-WEEKS

- Finalise GVAWP response to 10 questions
- Highlight closure of application scheme for EU citizens
- Finalise report on Online Scoping plan delivery of input to key groups
- Finalise action plan for WAIR Group including data collection & performance management plan

THE 10 QUESTIONS

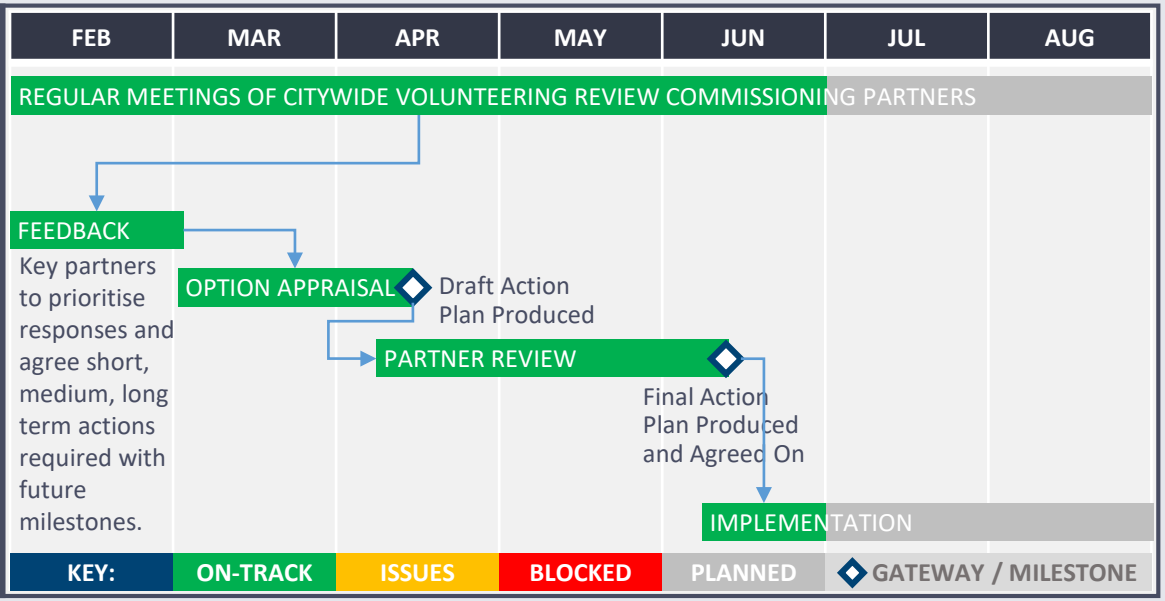
1. Local Knowledge			**2.** Glasgow's Needs
3. Other Partnerships			**4.** Lockdown Experience
5. Best First Moves			**6.** Why Those Moves
7. Measuring Success			**8.** City Priorities
9. Improve Collaboration			**10.** Required Sys. Changes

0	10	0	0
ANSWERED	IN PROGRESS	NOT ANS.	N/A

FLASH REPORT | VOLUNTEERING

GREEN

SIX MONTH VIEW



STATUS – KEY MESSAGE

LEAD: Jill Miller

KEY MESSAGE
An independent review of volunteering has been completed, along with a governance and structural options appraisal. Aim to use the review to develop a whole system approach to policies, programmes, services in the city.

PLAN	BUDGET	RESOURCE
GREEN	GREEN	GREEN

4-WEEK VIEW

PAST 4-WEEKS

- Three lead organisations independently discussing preferred options of proposed models and characteristics with boards.
- Further development of preferred options.

NEXT 4-WEEKS

- Lead Partners Senior Officers, Chairs and Board members meeting in various combinations to further discuss and progress delivery models.
- Lead partner officers review meeting 7/6/21
- Wider Stakeholder Officers meeting to progress the action plan , responsibilities and timescales 18/6/21

THE 10 QUESTIONS

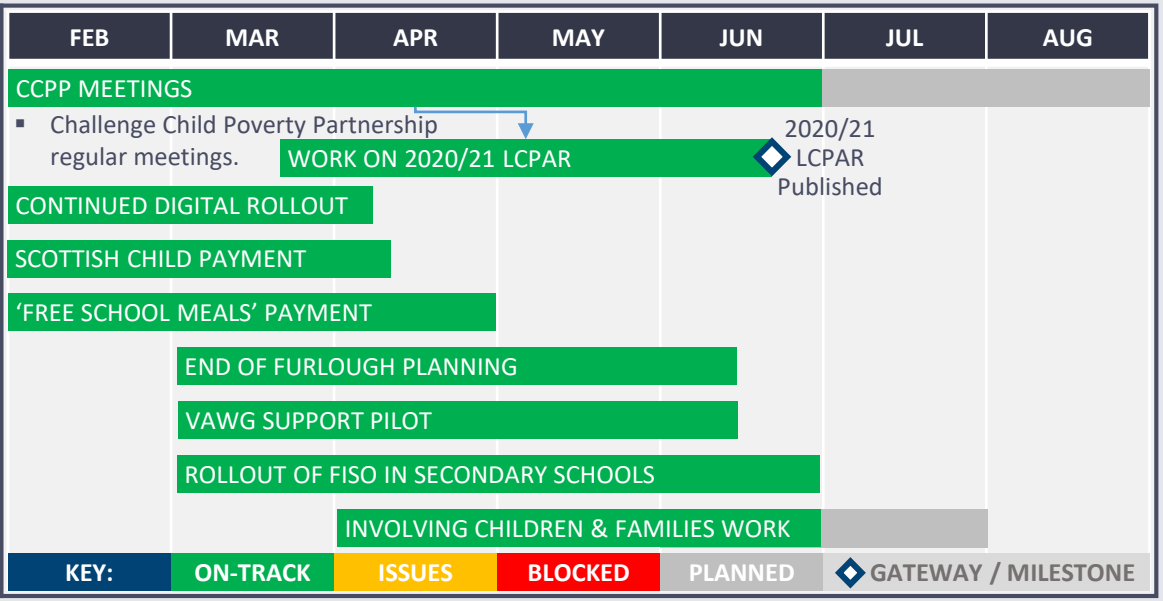
1. Local Knowledge			**2.** Glasgow's Needs
3. Other Partnerships			**4.** Lockdown Experience
5. Best First Moves			**6.** Why Those Moves
7. Measuring Success			**8.** City Priorities
9. Improve Collaboration			**10.** Required Sys. Changes

0	10	0	0
ANSWERED	IN PROGRESS	NOT ANS.	N/A

FLASH REPORT | CHILD POVERTY

GREEN

SIX MONTH VIEW



STATUS – KEY MESSAGE

LEAD: Fiona Moss

KEY MESSAGE

Early planning for furlough ending financial advice provision

PLAN	BUDGET	RESOURCE
GREEN	GREEN	GREEN

4-WEEK VIEW

PAST 4-WEEKS

- Prep ongoing for 2020/21 LCPAR due for publication this year – aiming for summer
- Digital rollout has continued for children & families, and SCVO allocations.
- Follow-up planning session of Challenge Child Poverty Group held and key programmes for development – pathways for financial advice and peer support Glasgow Food Plan finalised with support from CCPP - food security and well-being families pilot commencing in 3 neighbourhoods

NEXT 4-WEEKS

- Commencing roll-out of Financial Advice in further secondary schools
- Involving families project with Get Heard Scotland and Children's Neighbourhood Scotland – data collection commenced with parents from priority families
- Work to link strategies and plans related to children & families including C&S, CLD, Com. Pl & CMH&WB
- Launch of the Worrying About Money leaflet aimed at ensuring accurate information & advice on supports available when experiencing financial difficulty

THE 10 QUESTIONS

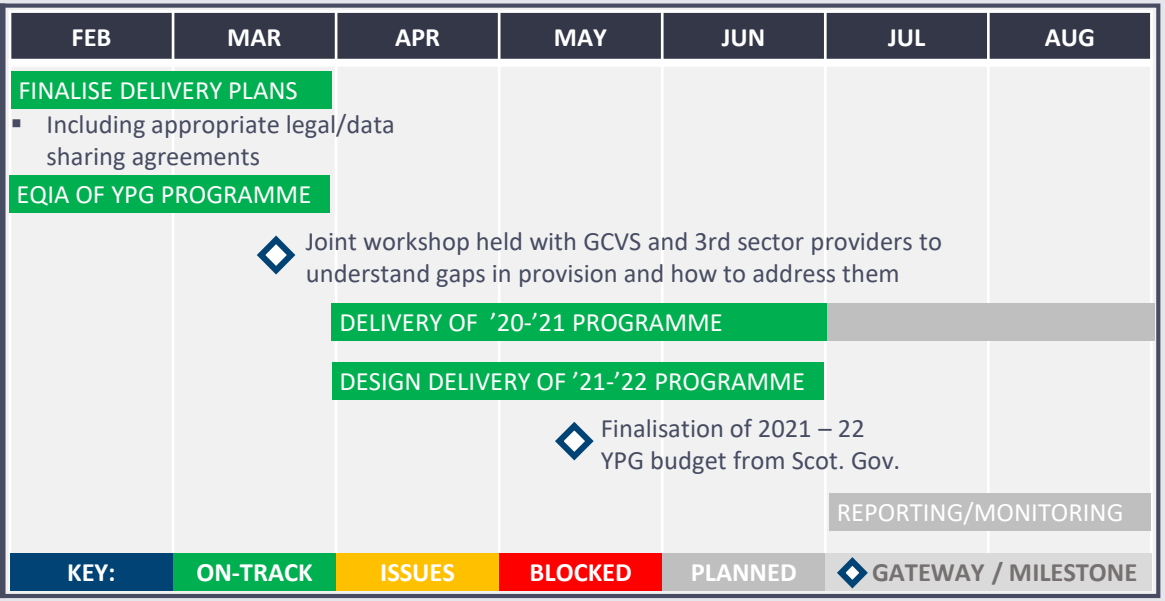
1. Local Knowledge			**2.** Glasgow's Needs
3. Other Partnerships			**4.** Lockdown Experience
5. Best First Moves			**6.** Why Those Moves
7. Measuring Success			**8.** City Priorities
9. Improve Collaboration			**10.** Required Sys. Changes

0	10	0	0
ANSWERED	IN PROGRESS	NOT ANS.	N/A

FLASH REPORT | YOUNG PEOPLE / TRANSITIONS

GREEN

SIX MONTH VIEW



STATUS – KEY MESSAGE

LEAD: Mike McNally

KEY MESSAGE

GCC are co-ordinating the development and delivery of the Scot Gov Young Person's Guarantee (YPG). A steering group from our Local Employability Partnership is guiding its development.

The YPG will offer all young people (16-24) the opportunity to continue in education, training, access volunteering or a job.

PLAN	BUDGET	RESOURCE
GREEN	GREEN	AMBER

4-WEEK VIEW

PAST 4-WEEKS

- YPG Steering Group met with college Vice-Principles re. curriculum development post-pandemic

NEXT 4-WEEKS

- Meeting of the of the Local Employability Partnership (LEP) to consider ongoing governance and project development for budget 22/23
- Session planned w/c 28 June with Employability Providers from across the city to update on development planning

THE 10 QUESTIONS

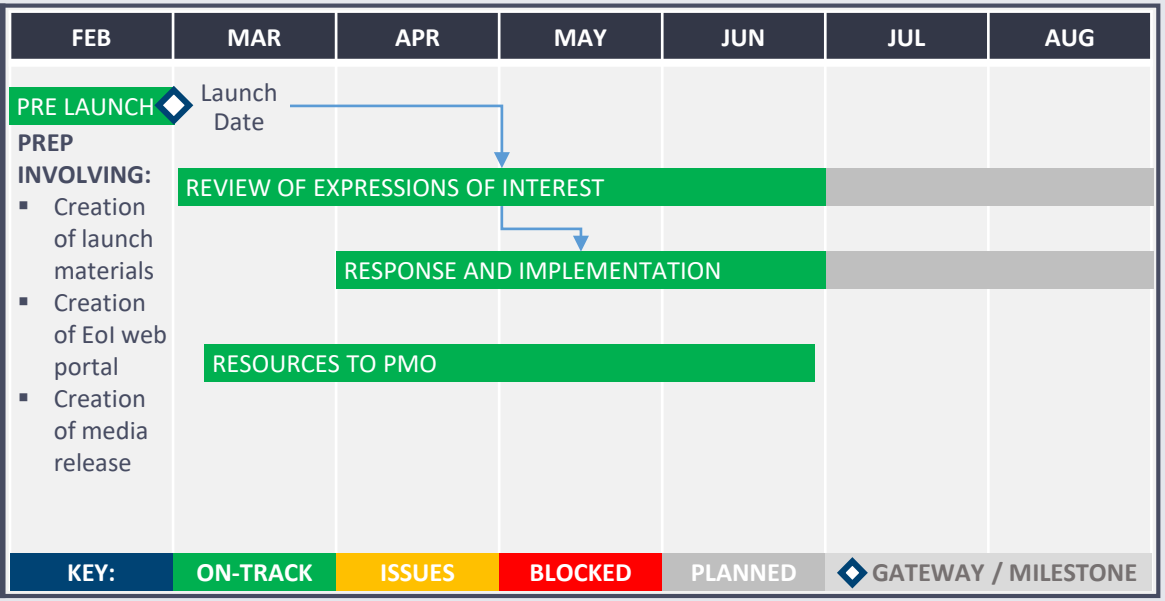
1. Local Knowledge			**2.** Glasgow's Needs
3. Other Partnerships			**4.** Lockdown Experience
5. Best First Moves			**6.** Why Those Moves
7. Measuring Success			**8.** City Priorities
9. Improve Collaboration			**10.** Required Sys. Changes

0	10	0	0
ANSWERED	IN PROGRESS	NOT ANS.	N/A

FLASH REPORT | PROPERTY (PMGC)

GREEN

SIX MONTH VIEW



STATUS – KEY MESSAGE

LEAD: Ian Robertson

KEY MESSAGE

The People Make Glasgow Communities programme will encourage the people who know, use and are passionate about their local resources to make them more relevant and accessible, removing the previous binary choice of having a fully transferred asset or a council owned asset.

PLAN	BUDGET	RESOURCE
GREEN	GREEN	GREEN

4-WEEK VIEW

PAST 4-WEEKS

- Identify and allocate resources (people). This has not gone as quickly as desired, however progress was made
- Over 250 (EoIs) have been received via the online portal by interested individuals or organisations
- Initial responses to EoI's have been issued.
- Engagement with Glasgow Life and other parts of GCC over EoI's.
- Initial analysis of EoI's ongoing

NEXT 4-WEEKS

- The focus for the next 4-weeks needs to be on the allocation of resources to the PMO who will manage the programme.
- Continue to respond to EoI's
- Continue the analysis of each proposal including engagement with those who currently manage or deliver services from the assets.
- Development of processes and governance arrangements
- Engagement with interested parties

THE 10 QUESTIONS

1. Local Knowledge			**2.** Glasgow's Needs
3. Other Partnerships			**4.** Lockdown Experience
5. Best First Moves			**6.** Why Those Moves
7. Measuring Success			**8.** City Priorities
9. Improve Collaboration			**10.** Required Sys. Changes

0	10	0	0
ANSWERED	IN PROGRESS	NOT ANS.	N/A

TEN QUESTIONS | SOCIAL RECOVERY TASK FORCE

1. **LOCAL KNOWLEDGE:** How can local knowledge and experience be communicated to policy makers at national level in ways that genuinely inform and improve decision making?
2. **GLASGOW'S NEEDS:** How can the Council and its partners better evidence the complex, multiple nature of needs that services in the city of Glasgow are responding to, and more effectively make the case for increased resources and/or support to the city from the Scottish and UK governments that takes account of the higher level of need?
3. **OTHER PARTNERSHIPS:** What robust (i.e. non-anecdotal) evidence do we have about local partnerships that have worked well, enabling voluntary sector, Council and other partners to respond quickly and effectively to the challenges posed by the pandemic? Conversely, what evidence do we have about things that have not worked so well? Evidence in this context might take the form of short case studies, especially if they highlight the complexity of need, challenges and opportunities within partnership working and show what can be done when the right conditions are created or illustrate some of the barriers to effectiveness.
4. **LOCKDOWN EXPERIENCE:** What worked well during the lockdown period and its aftermath in identifying and addressing need? Are the mechanisms involved in the initial emergency response e.g. methods of funding or ways of collaborative working, being adopted or modified in the light of experience? How are partner organisations and the Council learning from experience?
5. **BEST FIRST MOVES:** Given that we face a combined health and jobs crisis, what are the (small number) of best first moves that the partners (not just the Council) should be taking?
6. **WHY THOSE MOVES:** Given limited resource and competing priorities, why are these (the recommended best first moves) the most appropriate steps to take now?
7. **MEASURING SUCCESS:** How would your work stream define and measure success? What evidence is there (or will there be by next July) that the steps recommended and taken will be (or have been) the most impactful and that other options would have (had) less impact?
8. **CITY PRIORITIES:** How would success measures relate to the city's priorities? What evidence is there (or will there be by next July) that steps being taken now or proposed by the social recovery partners will contribute towards key shared objectives including addressing poverty, making progress on equalities, tackling climate change and delivering inclusive growth?
9. **IMPROVE COLLABORATION:** Are there other actions proposed or that should be considered that would help improve collaboration between the social recovery partners and/or lead to enhanced future community engagement?
10. **REQUIRED SYSTEM CHANGES:** Are system changes required in the relationship between the Council and voluntary sector partners to reduce duplication and lead to greater transparency in determining how resources should be distributed between place, interest and identity priorities? The working groups are asked to consider a range of options including the possibility of moving to a commissioning system for service delivery rather than the bidding and scoring system used for the Communities.

REPORTING SCHEDULE | SOCIAL RECOVERY TASK FORCE

January

Mo	Tu	We	Th	Fr	Sa	Su
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

February

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March

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29	30	31				

April

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May

Mo	Tu	We	Th	Fr	Sa	Su
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31						

June

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28	29	30				

July

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August

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September

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October

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November

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22	23	24	25	26	27	28
29	30					

December

Mo	Tu	We	Th	Fr	Sa	Su
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20	21	22	23	24	25	26
27	28	29	30	31		

SRTF	REPORT DUE	PRE-AGENDA PAPERS DUE	SP	EG	PAPERS DUE
SRTF	PAPERS ISSUED	PRE-AGENDA MEETING	SP	EG	PAPERS ISSUED
SRTF	MEETING	GCPP SP MEET	SP	EG	GCPP EG MEET