

Reaching Communities examples

Example 1



BIG Healthy Living Centre

This project will provide a Healthy Living Centre that delivers on-site health treatment and support to homeless people. This includes short-term medical advice, awareness raising campaigns, specialist care for mental health and substance abuse, as well as basic services such as showers, laundry, food and clothing.

The need for the project

The local Primary Care Trust has become increasingly concerned about the extent of ill health amongst homeless people in the area, following an increase in the numbers of cases coming through the health service. It has recently undertaken an extensive consultation and survey to identify the health needs and health provision for homeless peoples in the area. The results of these showed that there was a significant reduction in the health and well being of homeless people, and that they were becoming increasingly isolated. They also showed that the current health provision was inadequate in meeting the specific needs of homeless people.

The overall aim

The aim of the project is to improve the health of homeless people in the identified community, reduce the number of cases of self-harm reported and reduce the isolation suffered by homeless people.

Set Outcomes

- ▶ An increase in the health and well being of homeless people.
- ▶ Homeless people will be less isolated
- ▶ Homeless people will be more aware of personal health issues.

Making outcomes SMART

- ▶ 800 homeless people will report improved health and well-being by the end of year 3
- ▶ 1,000 homeless people will report feeling less isolated by the end of the 4th year of the project
- ▶ 1,000 homeless people will be more aware of personal health and healthy lifestyle issues by the end of the project

Setting Milestones for the first year

The milestones shown are for the early stages of the project. You will be expected to show milestones for the whole life of your project.

Milestone	Date
Recruitment of staff to deliver project	April 2007
Publication of materials used to deliver project	June 2007
15 meetings to raise awareness of issues with homeless groups	August 2007
250 homeless people have improved health	End of year 1
500 homeless people to be more aware of personal health issues	End of year 1

Measuring progress

Records will be maintained which will record the details of those homeless people attending the Centre and the frequency of their attendance in order to be able to track progress and usage of the services.

Regular meetings with individual homeless people will provide information on their awareness of health issues and how they are making improvements in their health.

Records will monitor the type of health advice being requested and regular meetings with health practitioners in the Centre will be held to determine the effectiveness of the advice and support being offered and taken up. This will be used to ensure that provision better meets the needs of homeless people.

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Example 2

Improving the lives of BME older people

This project will tackle the isolation faced by older people from minority ethnic communities whose first language is not English, reducing the isolation felt by them whilst maintaining their independence. It will do this by increasing the number of volunteers from across the community and specifically from BME communities to offer a wider range of services and support that better meet their needs. As well as offering advice and support, volunteers will also offer a befriending service and outreach support to BME older people. The project will also offer structured training and development to volunteers to develop the skills of volunteers and increase their involvement in the community.

The need for the project

Recent reports by Age Concern have highlighted the increased isolation felt by older people from minority ethnic communities whose first language is not English. There are high levels of deprivation amongst BME communities and insufficient services and facilities to support them. One of the key issues the authority wishes to tackle is the need to encourage more BME young people to get involved in their communities.

The overall aim

The aim of this project is to improve the social integration of BME older people by reducing isolation and maintaining their independence.

Set outcomes

- ▶ Reduce isolation of people in the identified community.
- ▶ Improved psychological and physical well-being of minority ethnic elders in the identified community.
- ▶ Increased employability and self awareness of project volunteers.

SMART outcomes

- ▶ 80 older BME people will feel less isolated by the end of the second year.
- ▶ 100 older BME people will have improved community relationships by the end of the project.
- ▶ 50 older BME people will have improved psychological and physical well-being by the end of the project.
- ▶ 10 volunteers will have improved employability and self-awareness by the end of the project

Setting milestones

The milestones shown are for the early stages of the project. You will be expected to show milestones for the whole life of your project.

Milestones	Date
Recruit project co-ordinator	March 2007
Recruit 10 volunteers to assist in delivery of the project	June 2007
Awareness raising meetings across the community held	July 2007
Four cross community groups formed to encourage learning across communities	September 2007
25 people report reduced isolation	End of Year 1 of project.

Measuring progress

Baseline information on the needs of BME older people will be collated and progress against these will be recorded regularly.

Monitoring the effectiveness of the recruitment process will identify whether BME volunteers are being recruited and if not help determine what other actions are needed.

Regular meetings will be held both with individuals and groups to monitor progress on their improvements and the effectiveness of the services being provided.