



Ministry of Housing,  
Communities &  
Local Government

## Community Champions

The 'Community Champions' scheme, administered by the Ministry of Housing, Communities & Local Government, provides up to £25m funding to support people shown to be most at risk from Coronavirus (Covid19) including those from an ethnic minority background, disabled people and others to follow safer behaviours and reduce the impact of the virus on themselves and those around them.

Funding is available for selected local authority areas, to support: activity and interventions to reduce the disproportionate impact of the virus on certain communities; engagement strategies and outreach work in the most at-risk places, with the most at risk groups; new and existing networks of grassroots advocates or 'champions' from impacted communities; and voluntary and community groups and other national or local actors who specialise in working with communities shown to be most at risk from Covid19.



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If you have any enquiries regarding this document/publication, complete the form at <http://forms.communities.gov.uk/> or write to us at:

Ministry of Housing, Communities and Local Government  
Fry Building  
2 Marsham Street  
London  
SW1P 4DF  
Telephone: 030 3444 0000

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# Introduction

Since Public Health England released their review of disparities in risks and outcomes in June 2020<sup>1</sup>, the Government has been focused on taking action to improve the support and protection for those communities and groups who have been shown to be most at risk from Covid-19.

The review highlighted that some communities are disproportionately impacted by Covid-19, both in transmission rates and in mortality - most notably Pakistani and other South Asian communities, wider Black, Asian and Minority Ethnic (BAME) communities and people with disabilities. Death rates from the virus are higher for Black and Asian ethnic groups when compared to White ethnic groups<sup>2</sup>.

While disproportionate transmission, morbidity and mortality rates will relate to wider social and economic factors - including occupation/employment; multigenerational households; residential overcrowding; deprivation – evidence shows (see Annex A) that working through trusted community stakeholders and other local actors can help to identify and overcome barriers which prevent people from following public health guidance.

Government is keen to work with local authorities and their partners, who know their areas best, to support the communities at risk in those places and learn what works (and what doesn't work), and apply these lessons to future central and local government efforts to tackle the virus elsewhere.

## **Community Champions – tackling the disproportionate impact of Covid-19.**

On 22 October 2020, the Minister for Equalities announced that the Ministry of Housing Communities and Local Government (MHCLG) would provide up to £25m of funding to support those communities who have been shown to suffer disproportionately from Covid 19<sup>3</sup>, through a new scheme called 'Community Champions'.

The Community Champions scheme will provide targeted help to those areas and communities facing the greatest challenges. Recognising that local authorities, their partners and local people are best placed to decide the right approach for their communities, it is intended to be designed locally, to respond to the needs of a specific place. Participating areas will be able to increase resources for both existing and new activities.

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<sup>1</sup> 'COVID-19: Review of disparities in risks and outcomes', Public Health England, June 2020

<sup>2</sup> Disparities in the risks and outcomes of Covid-19, Public Health England August 2020.

<sup>3</sup> Quarterly Report on progress to address Covid-19 health inequalities, Cabinet Office Race Disparity Unit, October 2020.

## Section 1

### What we are looking for

Government is keen to fund practical solutions that will make a real difference. Local areas will be able to build upon, increase or improve existing activities to work with residents who are most at risk of Covid-19 - helping to build trust and empower at-risk groups to protect themselves and their families. The broader aim is to reduce the impact of the virus on all communities, beyond just the target areas that we will work with through this scheme.

We are therefore looking to fund a wide range of local authorities where there is a need for:

- **Increasing available outreach and engagement through one-to-one/focused contact to raise awareness of local support and promote public health guidance and programmes for residents disproportionately impacted by Covid-19, particularly those with disabilities and/or from BAME communities.**
- **Development and delivery of practical solutions, including but not limited to the recruitment and appointment of community champions networks, to increase uptake and community ownership of COVID-19 guidance, particularly amongst disabled people and/or people from BAME communities.**

### Working with local people and places

We are keen to work in partnership with local authorities and their partners in those areas facing the greatest challenges. We have identified a number of areas which we are now inviting to take part in the scheme.

Within the selected areas, we are keen to work with local authorities alone or partnerships of local authorities and other appropriate local groups, organisations and individuals. Where a partnership approach is adopted, the local authority will act as the 'lead partner' and main point of contact for MHCLG and other government departments working with us on this scheme.

As we want to share the learning and knowledge generated by the scheme, all participating local authorities and their partners will be expected to participate in regular forums and webinars during delivery of the programme, to aid the dissemination of knowledge, case studies and practical resources to other areas (including those outside of the Community Champions scheme) facing similar challenges.

## **What funding is available**

Funding of up to £25 million is available in 2020/21 to support good quality proposals which meet the scheme's objectives. Funding is currently only available for the 2020/21 financial year.

Funding will be allocated relative to the size and scale of each local authority area and the level of ambition shown in their Expressions of Interest (see below). Due to the need for the funding to be committed in 2020/21, we would expect very few awards to exceed £500,000 per individual area. We will not accept any funding requests for more than £750,000 per individual area.

**Applications must be received no later than 23:45 on 06 January 2021**

## **Section 2**

### **Aims**

The areas that we are inviting to take part in the scheme are all lower tier and unitary local authorities. Participating local authorities will be expected to work collaboratively with all neighbouring councils or other critical local authority partners in their vicinity (especially where we are funding a lower tier authority as the lead partner) – and, in particular and where relevant, Directors of Public Health and other appropriate local health partners – to support disproportionately impacted communities to:

- **Have an increased sense of personal ability to follow safe behaviours.**
- **Have increased trust in public health messaging.**
- **Have an improved awareness of who or where to go to for help or advice.**
- **Have an improved awareness of pathways and services to effect positive change and alleviate hardship.**
- **Have an improved awareness of who their local Community Champions are and have opportunities to take part in the activities that the Champions offer or facilitate.**
- **Have an increased feeling that they are being understood and that insights are fed into local and national response.**

This may be achieved by recruiting dedicated individuals or teams to undertake the role of 'Community Champions' to connect with residents and support them to follow safer behaviours and navigate people towards available support and services. There is scope for the expansion of existing projects, or the development of new initiatives if feasible within the timeframes outlined in this prospectus.

## What do we mean by ‘Community Champions?’ <sup>4</sup>

- **There is no ‘one-size-fits-all’ model for Community Champions.** Different communities and local contexts will require different approaches. Recognising local authorities are best placed to decide the right approach for their communities, we want local authorities and their partners to create their own strategies - either building upon and improving what they are already doing to support at risk groups and reduce the disproportionate impact of the virus, or undertaking new activity. This may also involve developing broader communications campaigns co-produced with communities to support direct engagement.
- **Community Champions should encourage wider social connection and integration of different groups of people, whilst seeking to improve the health and wellbeing of residents, particularly disabled people and/or people from BAME communities.** They will motivate and empower people to get involved in available services, conduct health promoting activities, create groups to meet local needs, and navigate people to relevant support and services.

*The Community Ambassador scheme is delivered as part of the ‘Our Community, Our Future’ social integration programme, which aims to empower local people to take a lead on projects and help build a stronger community. The 12-week programme is delivered in partnership with voluntary sector organisations and explores the multicultural make-up of the borough, develops an understanding of community development and builds leadership and project management skills to help residents set up their own social action projects. Community Ambassadors have been active during the pandemic, one Community Ambassador who works as a catering manager in a local school, persuaded managers to support them in providing nutritious meals for vulnerable residents across the borough. Through the networks they had developed in the programme, and the support of their school, they became part of a co-ordinated response providing hot food to residents most in need.*

-Blackburn with Darwen Borough Council (Integration Area Programme 2019/2020)

- **Community Champions reflect their local communities** and vary by socio-demographic factors including age, ethnicity, gender, health status and education. They will improve the local authority’s understanding of disabled and BAME residents and may be present on local social media groups providing a trusted voice, countering misinformation and raising awareness of local support.

*The Health Project at Friends, Families and Travellers has been running since 2003, funded by various bodies. The project paved the way for health trainers, by using peer education and support as its focus. The scope consists of small projects, which address different health issues in different settings. For example, we are currently working on a suicide awareness project with Traveller men, which is funded by the ‘better together’ funding from Brighton and Hove CCG. The project has contributed towards health improvement in the East Sussex Gypsy/Traveller population, including improved knowledge and skills/confidence on around healthy lifestyles and increased confidence in accessing services and discussing health improvement with peers.*

*The most important factor for the success of our work is that we are a trusted organisation with the support of the community it serves.*

-Friends, Families and Travellers Health Project (PHE practice examples May 2018)

- **Community Champions may contribute in different ways** from relatively passive involvement, such as sharing information, to more active involvement including designing practical tools and having shared decision-making power in the planning, design, implementation and evaluation of their LA response and communication strategies.

*Health and Wellbeing is improving overall in Redcar and Cleveland and people are living healthier and longer lives. Unfortunately, not everyone is enjoying these benefits and some communities have an average life expectancy of 13 years less than others. We know that greater ill health in our poorest communities is linked to inequalities in life chances, wealth and income. We also know that people in our poorest communities are our greatest asset for improving health and wellbeing.*

*We want to ultimately shift culture in relation to health by utilising champions' circles of influence (self, family and friends, clients, customers and the wider community) as a strategy to improve health and well-being. Our ambition is to build the borough's capacity to empower communities to improve their own health and well-being and make 'every contact a health improvement contact'...Health Champions are allocated a named contact from the Health Improvement team who is responsible for keeping them up to date with information such as local campaigns, collecting monitoring information, being on hand to answer queries and support any further development of their role.*

*Promotional materials were developed, and key stakeholders promoted this through their networks... Providing an infrastructure which enables and supports people to make public health activities happen in their communities is a sound investment. Overall, we have started to build capacity to address health issues within local communities. We have seen the early benefits and we want to build on this model.*

-Redcar and Cleveland Council, (PHE practice examples August 2016)

- **Participating local authorities will be actively encouraged to share learning and practical solutions**, such as communication tools devised, with all local authorities so those areas not being directly funded will positively benefit from Community Champions funding.

*The Migrant Access project in Wakefield was a partnership project between Wakefield Council and Touchstone, a Leeds based third sector organisation. The aim of the project is to facilitate better access to council services by migrant groups across Wakefield. This was done by recruiting 20 volunteers from 14 different countries to train as Migrant Community Networkers (MCN) giving them the knowledge and skills to become community leaders and to act as a bridge between the council and their communities. During lockdown MCNs have provided an effective bridge between the Council and local migrant communities by translating and sharing key messages. Some MCNs are currently working with Public Health as Covid-19 Community Champions and continue to deliver key messages to previously hard to reach sections of the community.*

-Wakefield Council

## Outputs



Defined outputs will be designed in collaboration with each local authority, positively building upon current community engagement and outreach schemes. The following outputs are intended as examples of what could be considered in local proposals:

- **A community connection, outreach and engagement strategy, with a steering group**, which involves bringing together local community leaders, public health providers, voluntary groups, and other relevant organisations. This could be an existing or new governance arrangement.
- **Community Champions**, ideally from within the disproportionately impacted BAME and disabled groups or local hard to reach communities, to undertake engagement, drive safer behaviours and counter misinformation.
- **Engagement activities** with residents from disproportionately impacted groups in greatest need of support across the programme.
- **Creation and delivery of practical sustainable tools** to increase outreach, communication and engagement which are tailored, appealing, visual and multi-language messages to reach diverse populations, who may be digitally excluded, and mobilise local communities.

## Outcomes

The key aims and outcomes of this programme are both immediate and longer term:

### Immediate

- **Build stronger relationships** and engagement between communities, groups and local authorities where there may be tensions, mistrust or negative connotations exacerbated by the pandemic.
- **Increase capability to interact and communicate** information and guidance from Government and local authorities to diverse at-risk communities, facilitating community ownership and the following of safer behaviours and making of informed choices.
- **Build open, transparent dialogue** over any local testing or vaccine deployment programmes within communities to address any misconceptions about efficacy and safety, counter misinformation, fill real knowledge voids and provide clarity on vaccination roll-out to build support and promote take up.

### Longer term

- **Increased coordination and dialogue with public health providers (ideally working through Directors of Public Health)** by local authorities to create more cohesive and trusted messaging.
- **Increased access to guidance, vaccination programmes and public health services**, through outreach and practical tools to improve health and wellbeing of residents, especially those from disproportionately impacted groups, and their families.
- **Increased access to guidance and awareness of Council and local support services** through outreach and practical tools to improve access to

economic support and alleviate hardship to support longer term positive economic impacts.

- **Increased access to guidance and awareness of Government support mechanisms, for example Universal Credit**, to increase access to employment, education and/or volunteering opportunities.
- **Increased understanding by both central government and local authorities of local populations' needs and provision of practical tools** to aid accessibility to improve social connection, digital inclusion, civic engagement and integration with wider local area.
- **Increased visibility of Community Champions, volunteers and community groups** to encourage more mutual aid and volunteer provision able to support local authority delivery.
- **Build strong links** between Government and places where Covid -19 has impacted most significantly to develop resiliencies and improve and increase mechanisms for outreach, communication, engagement within the area.
- **Informing Government through feedback from Community Champions** on what the issues and concerns of local communities are and how to address them, which will help to shape and inform future relevant policy/communications work.

## **Monitoring and Evaluation**

Participating local authorities will be expected to provide short (1-2 pages) monthly progress reports over the course of the programme. To ensure the burden placed upon local authorities is as minimal as possible, MHCLG will provide templates for these reports which will be simple and easy to complete. As we are keen to understand local contexts there will be free text options should any local authorities choose to add additional comments, feedback and/or examples of best practice.

We will work with a smaller number of areas to gather additional best practice examples and case studies which we will share more widely across central and local Government. This will involve attending meetings and other feedback sessions – most likely all virtual/online at this stage – to discuss and share what we are learning through the scheme, to apply this to future work.

Participating local authorities will be encouraged to share knowledge, resources and practical solutions with non-funded local authorities to ensure other areas and their local communities benefit indirectly from the Fund.

## **Section 3**

### **The role of MHCLG and other government departments**

MHCLG, alongside our colleagues from other government departments working on Covid-19 and public health, will work with successful local authorities to support and learn from the delivery of their proposals on the ground.

We will provide regular forums and webinars to share good practice for community engagement and community centred approaches to support and promote public health messaging, for example from National institute for Health and Care Excellence (NICE)<sup>5</sup>, NHS England and Public Health England<sup>6</sup>.

We will also use these opportunities to enable local authorities and their partners to record best practice from their activities and learn from others in overcoming challenges and obstacles – and then share this with other participating areas and beyond, to maximise the reach of the Community Champions scheme.

Access to central government teams leading on public health messaging will be available across Government - including access to communications materials and core messages/scripts that can be tailored locally.

## **Payment**

Successful local authorities will be required to enter into a Memorandum of Understanding (MOU) with the Department which will set out the expectations of both the recipient and the Department with regards to milestones, monitoring and evaluation and the funding amount to be awarded. Funding will be paid directly to the local authority (the de facto lead partner in any local consortium or partnership) using powers under section 31 of the Local Government Act 2003.

## **Governance arrangements**

Governance arrangements of the scheme will sit with the successful local authorities and their partners. MHCLG will seek light-touch assurance that appropriate arrangements will be in place. The Department's primary relationship will be with the local authority to which funding is being awarded, which is also the local authority that the Department will hold responsible for the correct use of the funding, successful implementation of the project and achievement of outcomes.

The Department will also hold the local authority responsible for ensuring their own propriety and making sure that they do not bring the scheme or Department into any form of disrepute. Local authorities will be responsible for ensuring due consideration is given to any state aid or procurement compliance implications when implementing the undertakings outlined in their proposal.

## **General Data Protection Regulations**

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<sup>5</sup> Community engagement: Improving health and wellbeing and reducing health inequalities, NICE guidelines NG44, 04 March 2016.

<sup>6</sup> A guide to community-centred approaches for health and wellbeing, Public Health England, 15 February 2015.

Participating local authorities will be responsible for ensuring all data pertaining to residents engaged with through the scheme is collected, controlled and retained in compliance with data protection regulations.

## Section 4

### Application process

Invited eligible local authorities must submit an Expression of Interest (EoI) within the application window using the supplied short form attached to this prospectus outlining their current outreach, communication and engagement activities, additional activities they wish to undertake to help to reduce the disproportionate impact of the virus on at-risk groups, or similar and all associated costs.

This is a not a competitive bid process and all applying eligible local authorities will be supported by MHCLG officials to receive some support. Officials will assess the applications, using knowledge and evidence of similar schemes delivered through current and previous departmental programmes, against two criteria:

- **Deliverability of proposal** – How the proposal will increase support of residents disproportionately impacted by Covid-19 and meet the desired aims, outputs and outcomes of the Community Champions Fund as above.
- **Financial viability of proposal**- Whether the costings provide sufficient detail, offer value for money and are deemed reasonable and appropriate to meet the proposal's delivery requirements within the timescales outlined above.

Where any weaknesses or risks are identified, officials will collaborate with the eligible local authority to revise proposals where appropriate, and ensure plans are robust and costings are appropriate, to deliver the programme aims in the timescale required.

### Funding levels

Applicants are invited to state the total amount of funding they are requesting in 2020/21 to implement their projects at pace. The funding period runs from December 2020 – March 2021. We are therefore eager to see initial activities - such as network building or community mapping, for example - begin within December 2020.

Funding will be allocated relative to the size and scale of each local authority area and the level of ambition shown in their Expressions of Interest (see below). Due to the need for the funding to be committed in 2020/21, we would expect very few awards to exceed £500,000 per area. We will not accept any funding requests for more than £750,000 per area.

## Integration Area Programme

Any area in receipt of funding through MHCLG's Integration Area Programme in 2020/21 which is also invited to participate in the Community Champions scheme will have their proposal and costings assessed in conjunction with the Integration Area Programme to avoid any duplication of Departmental funding.

### Key Dates

<b>Expression of Interest period closes</b>	<b>06 January 2021</b>
Applying local authorities will be contacted to discuss next steps by	11 January 2021
Funding agreed	January 2021
Delivery commences	January 2021

### Completed Expression of Interest applications must:

- Be sent via email to [Community.Champions@communities.gov.uk](mailto:Community.Champions@communities.gov.uk)
- Include the subject line "Community Champions Fund" and the name of your local authority.
- **Be received no later than 23.45 on 06 January 2021**

**Please note it is the responsibility of each local authority to make sure that Expression of Interest forms have been received by the Department in time.**

## **Annex A List of resources on community champions schemes and community engagement**

### **SPI-B/SAGE advice papers**

The Scientific Advisory Group for Emergencies (SAGE) is responsible for ensuring that timely and coordinated scientific advice is made available to decision makers to support UK cross-government decisions. The Scientific Pandemic Insights Group on Behaviours (SPI-B) and Ethnicity Subgroup are sub-groups of SAGE. SPI-B provides behavioural science advice aimed at anticipating and helping people adhere to interventions that are recommended by medical or epidemiological experts. The Ethnicity Subgroup advises, in the broadest sense, on the risks to and impacts from Covid-19 upon minority ethnic groups.

The following paper was prepared by SPI-B and endorsed by SAGE on the role of Community Champions networks in increasing engagement in the context of COVID-19. This was put together by independent SPI-B academics with expertise in this area.

<https://www.gov.uk/government/publications/role-of-community-champions-networks-to-increase-engagement-in-context-of-covid-19-evidence-and-best-practice-22-october-2020>

### **Additional papers include:**

SPI-B: Consensus on BAME communication

<https://www.gov.uk/government/publications/spi-b-consensus-on-bame-communication-22-july-2020>

SPI-B: Consensus statement on local interventions

<https://www.gov.uk/government/publications/spi-b-consensus-statement-on-local-interventions-29-july-2020>

Ethnicity Subgroup: Evidence summary of impacts to date of public health communications to minority ethnic groups and related challenges

<https://www.gov.uk/government/publications/evidence-summary-of-impacts-to-date-of-public-health-communications-to-minority-ethnic-groups-and-related-challenges-23-september-2020>

### **Public Health England resources**

A guide to community-centred approaches for health and wellbeing

<https://www.gov.uk/government/publications/health-and-wellbeing-a-guide-to-community-centred-approaches>

Practice examples on community champions and community-centred approaches

<https://phelibrary.koha-ptfs.co.uk/practice-examples/caba/>