ACKNOWLEDGEMENTS

We are grateful to all the people who were willing to provide information or be interviewed for this study. In particular, we thank Barbara Jordan, Community Development Officer with the Community Development Team in Oxfordshire County Council, for detailed information and permission to use the Oxfordshire Community and Voluntary Action (OCVA) *Good Practice Guidelines and Toolkit: Running a Good Neighbour Scheme in Oxfordshire* (OCVA 2009). We are also grateful for permission to use extracts from the evaluation of Oxfordshire’s Good Neighbour Schemes by Alison Leverett-Morris of Alm Associates Arts Consultancy. Thanks also to everyone at OCVA for their welcome, warm support, access to materials and freedom of the library.

Kate Coxon and Teresa Smith
Oxford Social Research Ltd.
1 Warnborough Road, Oxford OX2 6HZ

March 2011

COPYRIGHT

This report has been written by Kate Coxon and Teresa Smith (Oxford Social Research Ltd), and commissioned by Professor Mukuno (Oita University, Japan). It is not to be copied or quoted without permission, in the first place from the authors, Kate Coxon and Teresa Smith.
### CONTENTS

**ACKNOWLEDGEMENTS AND COPYRIGHT** 2

**CONTENTS** 3

**INTRODUCTION** 4

**CHAPTER 1** 6

1.1 Background and policy context 6
1.2 The voluntary sector and volunteering 12
1.3 Community and social capital 14
1.4 Older people, neighbouring and neighbourliness 19
1.5 Partnerships for Older People Projects (POPPS) 28

**CHAPTER 2** 31

2.1 What is a Good Neighbour Scheme? 32
2.2 The Oxfordshire case study 38
   The Good Neighbour Schemes Pilot 39
   Organisational structures 43
   Case studies 49
   What can we learn? – dimensions and themes 65

**CHAPTER 3** 69

Conclusion: the future and the ‘big society’

**BIBLIOGRAPHY** 71

**APPENDICES**

A Suffolk ACRE and RCAN 75
B Examples of other types of support 77
C The Oxfordshire Good Practice Guidelines and Toolkit 79
INTRODUCTION

The Good Neighbour Scheme is ‘an organizational Cheshire Cat’; it comes into being in order to put itself out of existence. Success for such a scheme would have to be measured in terms of the degree to which the scheme...was no longer needed’ (Abrams et al 1979, in Bulmer 1986 p11).

So wrote the sociologist Philip Abrams, in an illuminating comment which nicely illustrates the local neighbourhood community development and support function of such initiatives, as well as their service function, which is the more usual focus. They have at their heart a type of ‘generalized reciprocity’: they may be seen as attempts to enhance neighbourliness and realize care both by and in the community. The voluntary sector is traditionally a strong source of such networks, although increasingly it is recognized that a structure of support from and partnership with local government bodies, and other statutory agencies such as the police and health, is essential for community-based and voluntary initiatives to function at their best.

The work of Abrams remains the earliest and most significant contribution to the study of Good Neighbour Schemes in the UK. However, since the studies by Abrams, and over the past decade in particular, there has been a ‘diversification’ in the types of support provided in and by communities, including the types of support offered by the Good Neighbour Schemes described by Abrams. Informal or semi-formal neighbourhood support networks may or may not describe themselves as Good Neighbour Schemes – and it would be therefore misleading to focus only on schemes with this name. Contributing factors to diversification are likely to include the rise of the voluntary sector, as well as changes in the way health and social care services are commissioned and delivered. Population ‘churn’

changes in patterns of employment, migration and mobility are relevant; so too is the closure of facilities such as local shops and post offices, particularly in rural areas. An increased dependence on cars and supermarkets and a decline in activities such as church-going are markers of significant changes in lifestyle. Mulgan et al (2008) talk of a mythical ‘lost golden age, where local people regularly came together and offered support to one another’. This rallying would often be around established local institutions like the church, trade unions, welfare clubs, rugby clubs or community centres. Many of these

1 The Cheshire Cat is a character in Lewis Carroll’s story for children, Alice in Wonderland. When the cat disappears, his grin remains.
2 That is, population movement in and out of areas.
3 See the Oxfordshire case studies in Chapter 2 for examples.
institutions are in decline and in many areas have disappeared, along with the social function they provided (Mulgan et al 2008 p56). The development of new forms of technology may have also altered the ways in which we support or expect to be supported by our neighbours. Over the past decade in particular, policy changes at the national and local level have had an impact on communities and neighbourhoods. While neighbourliness does exist, it has diversified.

This study outlines the diverse range and scope of Good Neighbour Schemes in the UK. In Chapter 1, starting with the policy context post-1997 with the election of the Labour government down to the election in 2010 of the Coalition government, we examine the role of the voluntary sector and explore concepts of community and social capital. A review of the recent literature on older people, neighbouring and neighbourliness forms the background to Chapter 2 of our study, which sets out the different dimensions of Good Neighbour Schemes in the UK. We then focus on Oxfordshire for a detailed case study. We finish by questioning the future, and the role of the ‘big society’.
1.1. BACKGROUND AND POLICY CONTEXT

The arrival of a new Labour government in 1997 initiated a series of policy changes that had a significant impact in a range of spheres. Notable policy shifts included

- the increased importance of community-based approaches to tackle poverty and social disadvantage (for example, area-based initiatives/programmes such as Employment Zones, Action Zones, the New Deal for Communities, Sure Start);
- moves to devolve power and strengthen the role of regions by the creation of regional development agencies4;
- the creation of the national Social Exclusion Unit (SEU) with responsibility to review and target areas of disadvantage and disadvantaged groups5;
- the emphasis on ‘community’ across a range of policies (for example, crime and disorder) and services (including significant changes to the way health and social care services were commissioned and delivered);
- a programme of democratic renewal6.

All of these developments had implications for the way the relationship between the statutory and voluntary sectors was seen, and the development of Good Neighbour Schemes.

The Local Government Act 2000 represented a significant milestone for local authorities in Labour’s reforms of local government. Separating executive and non-executive political functions, it required councils to produce ‘community plans’ detailing the future direction of local services, and granted them the power to promote economic and social well-being in their areas. The Act encouraged the co-option of representatives from voluntary organizations on to local authority committees: empowering local people and requiring service providers to consult them were considered key methods for increasing service effectiveness. Monitoring strategies by

4 Such as the South-East Economic Development Agency – see Smith, T (2011) Arts and regeneration in England’s South-East Coastal Towns. Oxford: Oxford Social Research Ltd. Regional development agencies are to be closed by the coalition government as part of cuts in public spending.
6 Dacombe (2007 p137) describes the ‘democratic renewal agenda’ of New Labour as ‘constituted by two discrete, but interrelated themes: the reform of political structures and practices; and varying attempts to connect local communities with the policy process – often centred on partnership working’.
central government included the ‘Best value’ requirement and Comprehensive Performance Assessment, including measurement against Public Service Agreements\(^7\) (PSAs) which covered a wide range of targets at local level related to government priorities.

Community involvement and neighbourhood management of public services were emphasized in the National Strategy for Neighbourhood Renewal (2001). Councils receiving Neighbourhood Renewal Funding established Local Strategic Partnerships (LSPs) bringing together the public, voluntary, community and private sectors. The Neighbourhood Management Pathfinder Programme (2001) aimed to enable communities and local services to improve local outcomes by improving and joining up local services and making them more responsive to local needs. The development of the Indices of Multiple Deprivation\(^8\) enabled central government to target funds on programmes serving the needs of particularly disadvantaged neighbourhoods and groups. Here we consider briefly policy developments in relation to three areas: crime and disorder; health; and older people.

First, crime and disorder. The Crime and Disorder Act 1998 established Crime and Disorder Reduction Partnerships (CDRPs) – partnerships charged with engaging a wide range of different bodies in determining approaches to tackling community issues locally by producing a Crime and Disorder Strategy. The Police Reform Act of 2002 amended the Crime and Disorder Act 1998 to specifically include Police, Fire Authorities and Primary Care Trusts (PCTs – the local health bodies) as Statutory Representatives on CDRPs, as well as recommending the involvement of local voluntary organizations. The Police and Justice Act 2006 aimed to further strengthen CDRPs by aligning them better with the operational structure of local Police and councils. The Act also included a proposal to give local communities the opportunity to request action on a community safety issue through a ‘community call for action’ (CCA). The activities of CDRPs were brought within the remit of local council overview and scrutiny bodies.

---

\(^7\) Public Service Agreements were introduced by the Labour government in the 1998 Comprehensive Spending Review to indicate government priorities as performance targets that local government was required to meet. They are formal written agreements between central government and local agencies.

Where the notion of ‘strong community’ is employed by government, this is sometimes linked to perceived ‘ills’ that call for a strong collective response, for example in relation to crime and anti-social behaviour, immigration, the benefits system, race relations and so on. With its focus on community, Labour’s crime agenda also included a strengthened emphasis on tackling anti-social behaviour. From 2003, Anti-Social Behaviour Orders and fixed penalty notices could be issued. Following a pilot in 2003, a Neighbourhood Policing Programme launched was launched in 2005, with the goal of providing a ‘dedicated’ policing team in every neighbourhood in England and Wales by 2008. A Neighbourhood Warden programme was introduced in 2000, with full-time, identifiable local ‘wardens’ to take preventive action against crime and disorder and provide general assistance to residents. The Police Reform Act in 2002 also introduced Police Community Support Officers (PCSOs) who work within ‘Safer Neighbourhood Teams’ or ‘Neighbourhood Policing Teams’. The shift towards neighbourhood or community policing is particularly relevant for Good Neighbour Schemes. Concern with low-level social disorder and crime is a major concern of residents in many poorer areas.

High-profile events also had major impact on policy, for example the murder of the black teenager Stephen Lawrence in South-East London, and the MacPherson Report of the inquiry, published in 1999. The report defined ‘institutional racism’; and its conclusion that the Metropolitan Police did not take Stephen’s death seriously because he was ‘different’, led directly to the amendment in 2000 of the Race Relations Act 1976, placing a new duty on public authorities to promote equality of opportunity, eliminate racial discrimination and promote good race relations. The 9/11 bombing in New York, and the riots in Oldham in the north of England, both in 2001, influenced the civic renewal and community cohesion agenda that was to develop over the next ten years.

In health, the 1999 White Paper: Saving lives, our healthier nation, proposed integrating service delivery through joint working to improve health and well-being. The NHS Plan (2000) established PALS (Patient Advocacy and Liaison Panels); proposals also included a drive towards more person-centred care and higher-quality services for older people. Other significant

---

9 See for example, the Local Government White Paper (2006): Communities and local government; strong and prosperous communities.
10 See the Oxfordshire case study of the police in Chapter 2.
developments in relation to the care of older people include a National Service Framework for older people (2001) and the 2005 Department of Work and Pensions (DWP) publication *Opportunity Age – Meeting the challenges of ageing in the 21st century*. Both documents promote the notion of ‘active ageing’, where older people have the opportunity to play a full and active role in society, and where services are aimed at promoting independence, choice and control. This notion of reciprocity is central to Good Neighbour Schemes\(^\text{11}\).

For older people, there was a new focus on the prevention of illness and crisis situations by providing services (health, social care, housing, family support, personal budgets) that promote health and well-being. The Health and Social Care Act 2001 required local councils to monitor local health services. The 2006 White Paper, *Our health, our care, our say, a new direction for community services*, proposed initiatives to improve the quality of life for older people. This more holistic approach marked a shift towards early intervention and prevention, requiring councils to redesign and shape their social care services in ways that would help people to maintain their independence, health and well-being. The Supporting People Programme was launched in 2003 to help provide housing-related services to maintain the independence of older people, as well as other vulnerable groups. The Local Government and Public Involvement in Health Act 2007 aimed to strengthen the involvement of local authorities in health care and required local government to establish Local Involvement Networks (LINks) – formally constituted participatory fora to engage stakeholders. The 2008 launch of a National Carers Strategy promised greater recognition and support for family and other carers, including provision of integrated and personalized services to help them continue in their role. Personal Social Care Budgets and Direct Payments were introduced in November 2010 to allow users to buy the services they preferred, thus extending choice and autonomy.

A good example of a preventive programme is the *Partnerships for Older People Projects* (POPPS), funded 2006-09 by the Department of Health to develop services for older people. POPPS were individual projects offering local services to provide improved health and well-being for older people. Projects had to be person-centred and integrated, to promote health, well-being and independence, and to prevent or delay the need for higher-intensity or institutional

\(^{11}\) See Oxfordshire case studies in Chapter 2.
care. Partnerships were to be forged with local providers of health care as well as local voluntary and community organizations (VCOs). Greater involvement of older people themselves was also an aim.

The rise of the voluntary sector is especially relevant. The 1996 Deakin Report, commissioned by the National Council of Voluntary Organisations (NCVO)\(^\text{12}\), made a number of recommendations about the relationship between the voluntary sector and the state and had a strong influence on the Labour government’s policy. It included proposals for a reform of charity law and the adoption of a ‘compact’, or ‘concordat’, between the government and the voluntary sector. The ‘compact’ came to fruition in 1999, and the Charities Act 2006 redefined the definition of charity and introduced new regulations\(^\text{13}\).

The Strategy Unit’s 2001 Review *Private Action, Public Benefit* covered a range of issues relating to voluntary action, including the legal and regulatory framework. It proposed good governance within the voluntary sector, introducing the notion of corporate social responsibility, and observing that the state should aim to help the voluntary sector ‘play a bigger role in revitalizing communities and empowering citizens’. The 2004 Treasury Review *Working together better together* aimed to build on significant steps taken by government to ‘promote, enable and grow the third sector’. It emphasized the virtues of the voluntary sector working in partnership with the state, particularly at the local level, and outlined plans to promote the voluntary sector’s role in local partnerships. This included funding of up to £90 million to promote the voluntary sector’s role in policy-making partnerships in a number of areas, including health and social care for older people.

This section has set the scene for our study of Good Neighbour Schemes – the reforms of local government, as well as in health and social care; the emphasis on area-based initiatives; notions of civic renewal, community cohesion and social capital; the changes in the statutory-voluntary

\(^{12}\) NCVO is the largest membership organisation for the voluntary and community sector in England, with over 7000 members. See [http://www.civilsociety.co.uk/directory/company/12/national_council_of_voluntary_organisations_ncvo](http://www.civilsociety.co.uk/directory/company/12/national_council_of_voluntary_organisations_ncvo)

\(^{13}\) It is important to note that a new type of company, the Community Interest Company, was introduced in 2005 in the UK under the Companies (Audit, Investigation and Community Enterprise) Act 2004, intended to allow social enterprises to use assets and profits for ‘the public good’. The importance of this for the voluntary sector is that charities can own CICs, and therefore benefit from their assets and profits which can be passed to the charity. See section 1.2 of this chapter for more detailed discussion of the ‘compact’ and the voluntary sector.
framework, and in the governance of the voluntary/ statutory/ private sectors; the emphasis on partnership. At national level, government schemes such as the Neighbourhood Renewal Fund have involved funding on a very large scale. In particular, the reforms go some way to explaining the diversity of the Good Neighbour Schemes set out in Chapter 2, in terms of the range and types of service, the ways in they are delivered, and by whom, as well as their relationship to other agencies.
1.2. THE VOLUNTARY SECTOR AND VOLUNTEERING

The increased importance of the voluntary sector is part of the background to the development of Good Neighbour Schemes. The Labour Party’s pre-election consultative document, ‘Building the future together’, which outlined the place of voluntary action within Labour policy, emphasized the importance of independent voluntary action to public service provision in the UK, but also suggested that the voluntary sector was ‘fundamental to a democratic, socially inclusive society’. Dacombe (2007) notes that this

‘…represented a clear acceptance within the political sphere of the idea that independent voluntary action might have a wider value than simply an alternative to state or market-based approaches to service provision… it is essential to our understanding of the meaning of voluntarism in the UK that we imagine voluntary action as being of public benefit, however broadly conceived’ (p48).

It is difficult to find an exact definition of the voluntary sector: however, we will follow ‘the most commonly used definition within the academic world – the structural/operational definition’ (Salamon and Anheier, cited in Dacombe 2007 p40). This defines the voluntary sector as made up of organizations that are:

- Formally organized
- Non-profit distributing
- Constitutionally independent from the state
- Self-governing
- Benefiting from some form of voluntarism

Increased attention to the voluntary sector has been accompanied by a rapid expansion in its size and importance in the UK and indeed globally. Voluntary organizations now account for a significant proportion of the UK economy. Dacombe estimates that at least 569,000 paid employees work in the voluntary sector in the UK, whose contribution to GDP is estimated at over £7.2 billion.

Another important aspect identified by Dacombe was the reframing of citizenship to include voluntary activity. In 1996, Alun Michael referred to volunteering as ‘the essential act of citizenship’.14 Civil society approaches suggest that the voluntary organizations can be of wider

---

14 Note that some of the then government’s flagship social programmes (e.g. the New Deal for Young People, and the New Deal for Lone Parents) also promoted voluntary work.
benefit through the promotion of trust, civic virtue and ‘social capital’ through participation in community and public life (Dacombe 2007 p51).

Two Public Service Agreements (PSAs) adopted by the Home Office are also relevant. PSA 6 aimed to increase participation in voluntary and community activities, particularly among those at risk of social exclusion, while PSA 8 confirmed the Government’s specific commitment to increase voluntary and community sector activity by 5% between 2001-2006, so that ‘citizens, communities and the voluntary sector are more fully engaged in tackling social problems’. In 2004, the Year of the Volunteer highlighted the opportunities of volunteering for building ‘skills’ that would be useful in securing future employment. The launch of the Home Office Citizenship Survey in 2001 was also significant. Since 2001, every two years there has been a citizenship survey researching a range of areas including ‘feelings about community, volunteering and participation’.

**The Compact (Home Office 1998)**

The Compact was defined as ‘a broad statement of principles that will underpin the way every department and agency of government will work with voluntary organizations’ (Home Office, 1998). Key points include:

- Statutory sector to recognize and support the independence of the voluntary sector
- Statutory sector has an obligation to consult the voluntary sector on matters that concern it and promote mutually advantageous working relations
- Voluntary sector must adhere to high standards of accountability (towards the state as well as to its members and stakeholders)
- Recognition on the part of the state that an independent and diverse voluntary sector is essential to a healthy society, and that both the public and the voluntary sectors have distinct but complementary roles to play in the development of public services, and that there is an added value to working in partnership
- Government encouraged local councils to replicate the Compact at a local level
1.3. COMMUNITY AND SOCIAL CAPITAL

Does community still exist, or is it a myth belonging to the golden age? The central notion of community (Willmott 1986 p83) is that ‘people have something in common’ – territory or locality (‘place community’), shared interests (‘interest community’), or the rather more elusive notion ‘sense of community’ or ‘spirit of community’ (social relationships and perceptions – ‘how many people feel a sense of identity with the place and of solidarity with the other people’). This is the ‘caring community’ appealed to so often by politicians and policy makers in which families, friends and neighbours look after the old and needy, or the village-like communities of an earlier century where children walked safely on their own to school and people left their front doors unlocked. A community also carries a history, of the people who have lived or worked there.

Abrams was careful to define different notions of ‘community care’, which are still relevant for today. In his important article on ‘community care’ (Abrams 197815), he distinguished between services ‘located in the community’ (as in ‘outreach’ or ‘domiciliary’ services provided by professionals placed ‘in the community’), services ‘provided by the community’ (as in meals-on-wheels provided by local people), and small-scale residential centres provided in a small, local, friendly and informal format (the deliberately constructed ‘caring community’).

For the purposes of studying Good Neighbour Schemes, rather than defining the more general notion of community, it is perhaps more relevant to focus on the question of what makes a strong community. Walker and Coulthard (2004) describe a strong community as one that people feel part of, and where they feel they have influence over decisions that affect them. Such a community is able to identify strengths and vulnerabilities and to use its capacity to maintain and enhance outcomes, to withstand shocks, and support community members. There are a plethora of concepts that are used instead of a ‘strong’ community – terms like community capacity16 and social capital are current policy buzz-words. These more often attract formal definitions than

15 See also Bulmer (1986) and (1987).
16 Community capacity is defined as the capacity of the people in communities to participate in actions based on community interests, both as individuals and through groups, organizations and networks (IDeA, 2008). Sobel (2002) defines social capital as ‘circumstances in which individuals can use membership in groups and networks to secure benefits’.
‘strong community’. Some features characteristic of a ‘strong community’ include (IPC 2010 p4):

- Citizenship, participation and engagement
- Empowerment
- Supporting networks and neighbourliness
- Volunteering and altruism
- Reciprocity
- Collective norms and values
- Belonging
- Trust
- Safety
- Good information flows

A central theme is that these various characteristics generate positive effects on life chances. Hence different networks will lead, say, to different health effect pathways, or access to different forms of social capital and coping resources. Social exclusion may reduce capacity to access capital, and vice versa. Improving community capital and reducing social isolation was identified as a priority objective in the Marmot Review ‘Fair Society, Healthy Lives’ (Marmot Review 2010).

The notion of ‘social capital’ has been seen as more useful than ‘community’ because it focuses on social relations and social networks, and the purposes for which people engage in social networks – to improve education, to get a job; that is, the ‘networks, norms and social trust that facilitate co-ordination and collaboration for mutual benefit’. Putnam (2000, 2002) first elaborated empirical measures of social capital, and his important study in the US showed how communal activities were declining in favour of more individual activities such as watching television. Critics have queried whether his findings can be generalized: is social capital

---


18 For example, Blaug et al (2006: 7) note that: ‘there is a clear danger that in promoting ‘participation’, one is promoting the civic activities of the wealthy and the white – such as voting, becoming a councilor or school governor, or participating in formal voluntary work’.
declining in England, for example, or in Japan? Social capital is parallel to, but distinct from, economic capital on the one hand and human capital on the other. For some, it is an individual attribute (people’s individual contacts help them get jobs); for others, social capital belongs to groups or communities (the density of formal and informal groups, for example). High levels of social capital have been found to be correlated with good health, lower crime rates, higher educational achievement, strong economic performance and so on: social capital is thus both the context for such desirable outcomes and also the focus for intervention in order to achieve such outcomes.

Blaug et al (2006) observe that in policy-making, social capital has become shorthand for community strength, even though it is more about associations and density, which are hard to measure. Attempts have been made to construct measurements of social capital and of well-being (see Tables 1 and 2). In the UK Social Capital Measurement Framework, the government has attempted to ensure consistency by describing five key dimensions each with specific indicators: social participation; civic participation; social networks and support; reciprocity and trust; and the views of people in the local area. Social capital can be further broken down into three distinct types: bonding, bridging and linking:

- **Bonding Social Capital** describes closer connections between people and is characterized by strong bonds, e.g. among family members or close friends – it is good for ‘getting by’ in life. This is particularly important in the promotion of good health.

- **Bridging Social Capital** describes more distant connections between people and is characterized by weaker but more cross-cutting ties, e.g. with business associates, acquaintances, friends of friends. It is good for ‘getting ahead’ in life.

- **Linking Social Capital** describes connections with people in positions of power and is characterized by relations between those in a hierarchy where there are differing levels of power- it is good for accessing support from formal institutions.
Table 1: UK Social Capital Measurement Framework

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Examples of indicators</th>
</tr>
</thead>
</table>
| Social participation             | • Number of cultural, leisure, social groups belonged to, and frequency and intensity of involvement  
|                                  | • Volunteering frequency and intensity of involvement                                    
|                                  | • Religious activity                                                                    |
| Civic participation              | • Perceptions of ability to influence events                                              |
|                                  | • How well informed about local/national affairs                                         
|                                  | • Contact with public officials or political representatives                             
|                                  | • Involvement with local action groups                                                   
|                                  | • Propensity to vote                                                                      |
| Social networks and social support| • Frequency of seeing/speaking to relatives/friends/neighbours                            |
|                                  | • Extent of virtual networks and frequency of contact                                    |
|                                  | • Number of close friends/relatives who live nearby                                      |
|                                  | • Exchange of help                                                                       |
|                                  | • Perceived control of and satisfaction with life                                        |
| Reciprocity and trust            | • Trust in other people who are like you                                                 |
|                                  | • Trust in other people who are not like you                                              |
|                                  | • Confidence in institutions at different levels                                          |
|                                  | • Doing favours and vice versa                                                          |
|                                  | • Perception of shared values                                                            |
| Views of the local area          | • Views on physical environment                                                         |
|                                  | • Facilities in the area                                                                  |
|                                  | • Enjoyment of living in the area                                                         |
|                                  | • Fear of crime                                                                           |

Table 2: WARM: The Wellbeing And Resilience Measure

WARM: developed by IDeA (Local Government Improvement and Development)

Local wellbeing projects

WARM: wellbeing and resilience measure framework to measure wellbeing and resilience at a local level. WARM: ‘shifts attention from mapping an area’s vulnerability to understanding the capacity and capability of communities to help themselves’.

Used to: measure life satisfaction; map local assets and vulnerabilities and inform local decision-making

5 stages of the WARM process to measure wellbeing


2. Measure resilience: creates a map of assets and vulnerabilities in the community

3. Benchmarking- look at national and local data for trends; uses British Household Panel survey

4. Plan

5. Action


A central idea running through the debate about community strength (or communities that are rich in social capital) is that these various characteristics of a ‘strong community’ generate positive effects on life chances. Different networks lead to different health effect pathways or access to different forms of social capital and coping resources. This is especially relevant for Good Neighbour Schemes.
1.4. OLDER PEOPLE, NEIGHBOURING AND NEIGHBOURLINESS

What are the experiences of older people in the UK? What does neighbouring, neighbourliness, community and social capital mean for them? Here are some key facts about older people:

- As people reach older age, the number and quality of relationships with other people can deteriorate, leading to unmet needs for companionship and social support. Half of all people aged 75 and over live alone (since 2000, this figure has reached 50% for the first time) (ONS 2008)
- Nearly half of all older people (about 4.6 million) consider the TV their main form of company (Help the Aged 2006)
- Over 500,000 older people spent Christmas day alone in 2006 (Help the Aged 2007)
- Just over one million older people in England (11% of the elderly population) always, or often, feel lonely (Age Concern and Help the Aged 2009)
- 17% of older people have less than weekly contact with family, friends and neighbours (Victor et al 2003)
- The most severely isolated and lonely are people over 75, particularly older women, those who are widowed and those living alone (Norman and Ali 2010)
- More than 15% of Londoners (almost 1.17 million people) are aged 60 or over and almost a quarter of a million are over 80 (Norman and Ali 2010)

Gold Age Pensioners, a report commissioned by the WRVS and carried out by the independent economists SQW, published in March 2011, produced the following summary:

- The over 65s made a net contribution to the UK of £40bn. in 2010
- By 2030 the positive net contribution of the over 65s is expected to rise to £77bn.
- Hidden value of older people’s volunteering reaches £10bn. per year
- Charity and family donations total a contribution of £10bn. per year
- The value of provision of social care by older people is £34bn. growing to £52bn. by 2030
- Many of the WRVS ‘army’ of volunteers of 45,000 are over 65 and ‘a testament to the power of acts of neighbourliness and community spirit’
- 65% of older people regularly help out elderly neighbours; and they are the most likely of all adult age groups to do so (ICM research, February 2011, commissioned by WRVS)
- Older people spend more time than any other age group in leadership roles, spending an average of 5 hours per month (ICM research, February 2011, commissioned by WRVS)
- Almost half (49%) of older people who informally volunteer look after younger children/grandchildren and a further 30% help younger (under 65) neighbours (ICM research, February 2011, commissioned by WRVS)

---

19 Age Concern England’s 2006 study of ageism found that respondents thought old age started at 70 years. For a summary of definitions by the World Health Organization see www.who.int/healthinfo/survey/ageingdefnolder/en/index.html
20 See www.wrvs.org.uk
The report suggests that older people are often the *social glue* of community life, making active contributions based on values of community spirit and neighbourliness. This ranges from leadership or high levels of membership of local clubs and societies to informal support looking out for vulnerable neighbours and helping them stay independent for longer.

A recent study of older people by the Young Foundation (Mulgan *et al.*, 2009 p157) highlighted the fear and isolation experienced by older people in society: the fragmentation or disappearance of traditional sources of support and social networks were common experiences. Although free public transport was available, older people felt adversely affected by the increase in cars and traffic. Fear of crime was widespread, and many of those interviewed described their experiences of being victims of crime\(^1\). The report noted that ‘the reduction of independence can lessen opportunities for leisure, physical activity, engagement with the community – thereby limiting the chance to maintain vital social networks’ (p158). Changes in older people’s social networks and the local environment were often felt to be beyond people’s control. This included relationships with families, friends and neighbours and changes in the community. The report’s authors observed that (p158) ‘one of the consequences of an increasingly transient population is that traditional sources of support – family, community and social networks – have been eroded’.

Another recent study by the Young Foundation (Norman and Ali 2010) focused on the experiences of a number of disadvantaged groups, including older people, in London, a city described as ‘densely populated but not densely connected’. Some of the most disadvantaged in London – the largest metropolitan area in the UK and the largest urban area in Europe – were older people. Mobility and a transient population were noted as especially problematic for older Londoners\(^2\). The report notes that ‘high levels of population churn and international migration have left many older people living in communities that have changed dramatically. Their social networks have shrunk as families and friends have moved away or died, leaving many isolated, lonely and unhappy’ (p27). It is a vicious circle: loneliness can result in fear and mistrust of

\(^1\) Mulgan *et al* (2009) *Sinking and swimming: Britain’s unmet needs* notes that in the UK, services for older people have gone hand in hand with anti-crime initiatives. ‘Lack of intergenerational contact can often manifest itself among older generations as a fear of young people and of crime’ (p158).

\(^2\) For example: in one of the London boroughs in the study (Newham), officials reported a 30% turnover of pupils in schools during a single year (Norman and Ali, 2010).
others and lead some older people to retreat further from the communities around them. They can then end up feeling even more cut-off and isolated.

If isolated older people feel lonely and unhappy, it is not surprising that dependable, supportive interaction with neighbours is a profoundly significant factor in older people’s quality of life (Gabriel and Bowling 2004). However, Harris (2008) observes that older people’s reflections on neighbourliness tend to be characterized by ‘narratives of decline’: that is, in many areas, neighbouring is ‘less overt’ than it was in the past, is less readily available as a resource, and is not reflected in a visible ecology of support:

‘If connections between neighbours are less visible (because of design, changed attitudes towards privacy, less presence outdoors, and use of cars, lack of local shops or for other reasons) then the practice of ‘looking out for’ a neighbour probably has to be more purposeful, more deliberate, more strategic. This means that neighbouring cannot be taken for granted’ (pp1-2)

For older people, social connectedness can be a matter of life and death, as demonstrated by Eric Klinenberg (2002) in his study of the 1995 Chicago heat wave23. A key conclusion of his study was that:

‘Anything that facilitated social contact, even membership in a social club or owning a pet, was associated with a decreased risk of death; living alone was associated with a doubling of the risk of death; and those who did not leave home each day were even more likely to die’ (p46)

In his review of neighbouring and older people, Harris (2008) distinguishes neighbouring and neighbourliness as follows:

‘The term neighbouring refers to the actions and behaviour of neighbours in each other’s interest, which contribute both to positive relations between them and to a sense of belonging. Neighbourliness involves non-obligatory willingness to share some social and practical responsibility for others who live in the same locality. The term refers to the attributes of the behaviour that guides neighbouring – usually comprising friendliness, helpfulness and respect for privacy. Its use as a term tends to be more attitudinal than ‘neighbouring’ and suggests a qualitative judgement about the attitudes and behaviour that comprise neighbouring’ (p4)

The notion of reciprocity is also evident here. In an earlier study, also by Harris, older people in a focus group in Manchester suggested that offering to help and being prepared to ask for help, were both key aspects of neighbourliness (Harris and Gale 2004 p37).

23 In 1995, during a week of intense heat in Chicago, 739 more Chicago residents died in a typical week than for that month.
24 See also the report by the Environment Agency (McGregor et al, 2007) about the social impact of heat waves in the UK.
In his review of literature and practice, Philip Abrams suggested that neighbourliness typically comprises friendliness, helpfulness and respect for privacy (Bulmer 1986). Harris describes the mundane nature of neighbouring as ‘low-level and relatively trivial’. Research by Perren and colleagues (2004) suggests that there may be some hierarchy of acts of neighbouring and note that although economic disadvantage does not hinder sociability with neighbours, it is associated with less likelihood of both giving and receiving. In a detailed analysis of Canadian data, Wellman and Wortley (1990) define a number of categories of ‘personal social networks’. However, this typology does not help us describe the crucial, more passive, or rather, less obtrusive behaviours of ‘looking out for each other’. These behaviours (such as taking in a rubbish bin or collecting post for a neighbour) are of particular significance for older people (Harris 2008). In a focus group for his study, a 90 year old woman gave the following example of non-intrusive neighbourly support:

‘I check to see if John’s blinds are up. The blinds go up at eight o’ clock. If he’s not up I tell another neighbour’ (Harris 2008 p8).

This apparently trivial interaction is loaded with implications for the sense of well-being of both of those involved. In a study of neighbours’ support for older people, Shaw (2005) argues that simply anticipating access to this type of support from neighbours might in itself be protective against functional decline. If someone feels that assistance is available if needed and that opportunities for social engagement exist, this results in a sense of security.

Harris (2006 and 2008) sums up the general benefits of neighbouring for older people

- A sense of safety and security
- Aid, support and the flow of information (interaction which establishes the grounds for reciprocity)
- For many older people the neighbourhood is the primary environment for sociability and civil engagement
- Establishing and defending norms of behaviour (Harris notes that older people may depend perhaps more than most on recognizable signals of behaviour)
- Priming local residents for their own defence and development (for example, interaction between residents make it possible to mobilize effective community action)
- A sense of attachment
- Health and well-being

Phillipson (2007 p236) stresses ‘the extent to which community attachment or belonging has now emerged as an independent variable that influences the quality of life in old age’. 
Shaw (2005) has suggested that older people have higher levels than other age groups of anticipation of neighbour support, largely because they tend to experience higher levels of neighbour contact and greater residential stability. This perception of an available support network can have a beneficial effect on well-being. However, Harris warns that:

“It follows that if levels of neighbourly contact and residential stability are eroded generally across society, it would be likely to have negative effects on older people’s health” (Harris 2008 p11).

Focus groups conducted by Harris (2008) suggested that older people’s attitudes to neighbouring differ significantly according to

- Temperament and confidence
- Demonstrable need- physical and emotional
- Strength and extent of family and friendship networks
- Their local built and green environment

Research by Godfrey et al (2004) showed that even the ‘very’ old (in their tenth decade) felt that sociability and engagement were central to their conception of well-being. As older people reflected on what they valued in life, they spoke frequently about the importance of having a ‘good’ family, a ‘good’ friend or ‘good’ neighbour. Grundy et al (2007) have since suggested that

‘Improving social interaction among the oldest old is potentially a far less costly challenge than providing health services for improving physical QOL (quality of life)’ (Grundy et al 2007 p6).

While some researchers have noted the ‘narratives of decline’ mourning a lost ‘golden age’ of neighbourliness, others suggest that there may be a silver lining. Arneil (2006) observes that the decline in neighbourliness has been accompanied by a greater acceptance of ‘alternative’ lifestyles and incorporation of previously excluded groups (for example, one-parent families).

Reciprocity remains a key feature in debates about neighbouring and neighbourliness and lies at the heart of any Good Neighbour Scheme. Research conducted into neighbourly support among older people in the Netherlands showed that the exchange of support between neighbours might be described as an ‘individualized’ activity (since it relied on two neighbours rather than a wider community) which led people to rely on ‘direct reciprocity’ (Thomése et al 2003). However, while Thomése and Van Tilburg (2000) found no indication that dependence on neighbouring relationships increases with age, or that older people have smaller neighbouring networks, Harris
(2008) observes that older people’s needs often increase at a time when there is a decline in their ability to reciprocate. In addition, these ‘everyday’ needs may be best met at the local level:

‘Non-specialised, low-level acts of caring which are often called for at short notice but don’t take up much time, effort or specialist knowledge, may best be provided by local family or neighbours, rather than by remote family, remote friends or professional services’ (Harris 2008 p23).

In their study, Nocon and Pearson (2000) found that many older people preferred help from someone they knew who ‘just pops in’. ‘Popping in’ was perceived very differently from having to have help from an agency. Typically, this form of neighbouring includes simple chores or tasks such as shopping.

Nocon and Pearson highlighted the ‘complexity’ of the relationship between neighbouring, friendship, duty and care:

‘care provided by neighbours is often not negotiated; does not depend on direct reciprocity, duty or obligation; and is usually based on a sense of humanity or good citizenship’ (Nocon and Pearson 2000 pp364-365).

Wanting to receive help, yet not wanting to be a ‘burden’ is noted by Godfrey et al (2004). Harris (2008) notes a tension between a lost sense of ‘enfolding community’ in which unspecified known neighbours could be relied on to help, and the fear of becoming a burden. Harris notes that this is accentuated by the decline of older people’s social roles. When they are no longer breadwinners or home-makers, older people are also excluded from other potential roles, which erodes the grounds for interdependence.

However, where older people are able to return favours, perceptions of dependency may be modified (Perren et al 2004). More recently, this has been been recognized by policy-makers and providers of health and social care, with the notion of ‘active ageing’, the recognition of the importance of older people’s contribution in areas such as volunteering, and the increasing importance of intergenerational projects.

While it is acknowledged there are difference in the experience of rural and urban experiences, Wenger, in her 2001 paper on the ‘myths and realities’ of ageing in rural Britain, explodes the myth of the rural community, pointing out that the commonly-held belief that older people in rural areas of the UK have stronger networks than those living in urban areas is unfounded. She

---

26 These are tasks covered by a Good Neighbour Scheme: see case studies in Chapter 2.
27 Again see discussion in Chapter 2.
concedes, however that older people may be more integrated into neighbour and community networks in rural than urban areas. Since key resources and facilities such as hospitals tend to be less accessible to rural residents, there could be more opportunities for willing neighbours to offer help, particularly transport.

Transport is an issue both for the discussion around neighbouring and for the delivery and coordination of Good Neighbour Schemes. Godfrey et al (2004) observe that many older people say their lives are mapped out entirely by a bus route: this may not be the same for others in the neighbourhood. Harris observes that access to transport affects older people in three ways. First, residents with easy access to private transport often use it to travel away from their neighbourhood for long periods, leaving behind those who lead more ‘locality-based’ lives, such as young unemployed, the disabled and the elderly. Second, as more people use cars, and traffic dominates the streets, social contacts between neighbours decrease. Third, evidence from his focus groups with older people showed that for many older people, social encounters on buses and at bus stops were important. Thus public transport is often essential to give people access to supportive social networks. For some older people public transport tends to function as a mobile ‘third place’\textsuperscript{28}. However, private transport may also have positive effects: Perren et al (2004) found a strong association between having access to a car and helping a neighbour.

While neighbourliness is essentially an informal relationship, in which norms and procedures are not formally agreed, Harris’s review found that there was enormous value in informal neighbourhood companionship groups, such as that set up by Caring Together, a neighbourhood network in Leeds. One of the groups researched by Godfrey and colleagues was composed primarily of ‘younger old’ people, who spoke about their surprise at the importance of the group in their lives. Various examples of ‘informal social occasions’ that had evolved ‘naturally’ from the ‘companionship group’ were described during the research. These included a chat group in a pub, where by force of regularity and consistent visibility, the members had gelled into a ‘chat

\textsuperscript{28} Ray Oldenburg (1989) coined the term ‘third place’ to describe ‘neutral’ public places and spaces, neither home nor workplace, that are routinely used as social gathering places. Local shops, post offices and the local or mobile library service may fulfil this function: many more of these are under threat due to cuts in public funding. Harris observes that many ‘third places’ offer ‘low-commitment drop-in occasions’ for older people which are likely to be enormously significant for older people: for example, libraries offering reading groups; leisure centres offering age-group keep-fit sessions.
group’. Such groups may be invisible to formal services (Harris 2008). Harris points out that such networks offer a real opportunity in terms of meshing informal and formal support. He suggests that where these types of networks do not exist, community development effort needs to go into ‘creating the conditions from which they will emerge’. There are numerous examples, through Age UK, of ‘care-support’ schemes which pair neighbours and near-neighbours. A well-documented example of a semi-formal scheme is the Brighton and Hove Neighbourhood Care Scheme²⁹ which uses volunteer effort and mutual support to offer befriending and buddyng, and trips out³⁰.

However, Northmore and colleagues (2006) caution that the voluntary sector has to be careful to avoid disrupting or cutting across the informal support networks:

‘organized voluntary activity could become a regulated substitute for neighbourliness in a society that is increasingly concerned to manage risk and liability: a Criminal Record Bureau-checked, ID-carrying handyperson might be seen as less of a risk in a vulnerable person’s home than a person from down the street’ (Northmore et al 2006 p59).

Harris also notes that semi-formal community-based schemes such as befriending schemes enable informal relationships to flourish, with volunteers and staff able to adopt friendly and flexible role, while formal systems are more likely to stifle informal relationships. Some schemes employ a paid worker to coordinate the work of volunteers.

In Harris’s focus groups (Harris 2008), some older people observed that they would prefer to buy their ‘low-level’ services than have to depend upon someone else or consider themselves to be a burden. The extension of individual budgets and direct payments could play an important role in this. One consideration here is the extent to which low-level need can more readily be identified through informal contact when no help has been sought (Powell et al 2006). This may also present something of a paradox in that some tasks may not be seen as skilled by the person doing them (for example, in the case of housework) but to the older person it may be regarded as highly-valued, very important and skilled work:

“The high value placed by older people on help with small daily tasks and their impact on quality of life means that a new way of labelling such services is required, if we are to accurately reflect older people’s preferences” (Godfrey et al 2004 p208).

²⁹ www.ncs.bhei.org
³⁰ See also Appendix B for another example of ‘pairing’.
This section has ended with a discussion of the subtle and nuanced distinctions between formal, informal and semi-formal groupings and relationships. This is precisely the territory explored in the case studies and the analysis of different organizational arrangements in Oxfordshire set out in Chapter 2.
1.5. PARTNERSHIPS FOR OLDER PEOPLE PROJECTS

Between May 2006 and March 2009 Partnerships for Older People Projects (POPPS) were funded by the Department of Health to develop services for older people. POPPS were a series of individual projects providing local services to provide improved health and well-being for older people.

Background to POPPS

As well as the shift towards (joint) practice-based commissioning, as part of the NHS Improvement Plan (2004) and creating a patient-led NHS (2005), the ‘transforming social care’ agenda was also important. The Department of Health’s 2005 Green Paper Independence, wellbeing and choice, and the 2006 White Paper Our health, our care, our say, developed the notion of an increasingly personalized approach to the delivery of adult social care, representing a further strategic shift towards early intervention and prevention. This required councils to redesign and reshape their social care services in ways that assist people to maintain their independence, health and wellbeing.

The POPP initiative acknowledged that the boundaries between health and social care were problematic for older people who require community-based support. POPP was designed to achieve three aims for older people:

- the provision of person-centred and integrated services;
- the encouragement of investment in approaches that promote their health, well-being and independence;
- and the prevention or delay of the need for higher-intensity or institutional care.

To achieve this,

‘there needed to be strong and effective partnerships in place between key stakeholders. Indeed, in order to produce a real shift towards preventive community care, partnerships needed to extend beyond health and social care agencies to include other statutory organizations as well as both national and very local voluntary organizations. It was acknowledged that because the third sector would be providing more services it might lead to “more sustainable communities” and “greater engagement by service users and their carers”’ (PSSRU 2010 p264).
POPPS: the projects
The Department of Health designated 29 pilot sites; with each site in a local authority area. The 29 sites set up 146 core local projects, two-thirds of which were primarily directed at reducing social isolation and exclusion or promoting healthy living among older people (these were described as being ‘community facing’). The remaining third focused primarily on avoiding hospital admission or facilitating early discharge from acute or institutional care (‘hospital facing’). In addition to these core projects, a further 530 small ‘upstream’ projects were commissioned from the third sector. In more detail, these were divided into:

Level 1: primary prevention/ or health and well-being services. These were described as ‘upstream’ community-orientated interventions, designed to support older people in maintaining independent lives within their own homes and to improve their general well-being. These services were universal in the sense that they were aimed at all older people and their carers within the programme sites. Examples of services included gardening/ handyperson/ befriending schemes, crime prevention and awareness services, internet facilities, learning, leisure, libraries, teleclubs, teleshopping, housing and welfare benefits advice and signposting services. These projects are closely related to Good Neighbour Schemes.

Level 2: secondary prevention projects. These involved higher-level services to older people who were ‘at risk’ of admission to hospital or social care. Such services included social contact/ hospital aftercare, carers’ support, holistic assessments, medicine management, proactive case coordination, falls prevention etc.

Level 3: tertiary level projects offering higher-level support around issues such as hospital discharge and complex care.

The National Evaluation of the POPP programme addressed questions focused on outcomes – the extent to which projects improved the quality of life of older people or were cost-effective; as well as process – the opportunities and challenges experienced in the course of evaluating the programme.
POPPS: the evaluation findings

Altogether, 522 organisations were involved in projects across the POPP programme, including health bodies, such as Primary Care Trusts (PCTs), secondary care trusts and ambulance trusts, as well as other bodies such as the fire service, police and housing associations; national and local voluntary organizations and private sector organizations. Volunteers, including many older people themselves, also made an important contribution, becoming increasingly significant over the period of the project. While POPP projects providing services to individuals with complex needs had a small impact, it is interesting that low-level services had a large impact. A standardized questionnaire, administered before and after the POPP implementation, measured the health-related quality of life (HRQoL) of a sample of 1,529 older people: a sample drawn from the British Household Panel Survey (BHPS) was used as a comparison. The following findings from the evaluation are especially relevant to Good Neighbour Schemes:

- Older people who received practical help (assistance, e.g. gardening, befriending, simple household repairs) reported a notable improvement in well-being (12% increase)
- An equivalent increase was reported in interventions providing exercise (presumably due to increased strength, flexibility and improved mood)
- Smaller improvements were found in those projects supporting level 2 and 3 support

Although these findings should be treated with caution, they are nonetheless significant in terms of HRQoL. In terms of cost-effectiveness, it is interesting to note the following:

‘One operational example concerns those projects focused on improving well-being through the provision of practical help, small housing repairs, gardening, limited assistive technology or shopping. For an extra spend of £5,000 per person – £96.15 per week – there is a 98% probability that such projects are cost-effective compared with ‘usual care’. Commissioners putting in place such projects could be reasonably confident that only around 0.2 projects in ten would not be cost-effective’ (PSSRU 2010 p7).

In terms of the sustainability of such projects, key factors in bringing about continued enthusiasm and funding were the involvement of older people and councillors as representatives. The POPP project concluded that prevention and early intervention can ‘work’ for older people:

‘Moreover, it has shown that small services providing practical help and emotional support to older people can significantly affect their health and well-being, alongside more sizeable services expressly directed to avoiding their need for hospital’ (p10)
CHAPTER 2

GOOD NEIGHBOUR SCHEMES

(photograph from The Good Neighbour Toolkit: Guidelines for setting up a Good Neighbour Scheme’ OCVA/ OCC)
2.1. WHAT IS A GOOD NEIGHBOUR SCHEME?

‘When you are hale and hearty you don’t tend to know much about the work of the Good Neighbour Scheme. But when people begin to need our services they are often staggered by what we do and say— I didn’t know this service existed!’ (Coordinator, Kennington Good Neighbour Scheme, Oxfordshire)

With Chapter 1 as background, we can now ask – what are Good Neighbour Schemes?

Abrams et al (1981 p9) define a Good Neighbour Scheme as ‘any organized attempt to mobilize local residents to increase the range of help and care they give to one another’. Good Neighbour Schemes thus represent an important framework of informal support services across the UK. Support offered by Good Neighbour Schemes tends to focus on support for daily routine and community activities to promote individual well-being (Pride 2009):

- providing transport for appointments, hospital visits or to Day Centres
- errands, shopping or collecting prescriptions
- household tasks, minor repairs or gardening
- looking after or walking pets
- visiting or befriending
- letter-writing or simple form-filling
- reading to partially sighted or blind people
- signposting to services

Some schemes also provide other community activities such as coffee mornings, lunch clubs, trips out and other social events. Other schemes may assist with tasks such as applying to grants for individuals in hardship. Normally, however, services which are subject to legislative regulation (registration, standards, insurance etc) – examples include provision of care or childcare – are excluded.

It is worth noting that the nature of Good Neighbour Schemes has changed over the years. In the past, schemes might have offered services such as cooking or preparing food. However, with changes in Health and Safety legislation, many schemes no longer provide this. As one coordinator rather ruefully said,

‘We used to do cooking or prepare light meals for older people. However, we now leave that to Meals on Wheels. These days, in order to prepare food you need to have certificates in food handling and hygiene. Occasionally a volunteer will ring up, and say they’ve visited an older
person who doesn’t have any food in at all - what do we advise? The only thing we will suggest is buying them pre-cooked frozen food from a supermarket and making sure it’s cooked through. It’s not ideal, but then, you have to be so careful. You have to think - what if someone gets ill after eating something a volunteer has prepared?’

Evidence shows that older people in particular really value practical support that enables them to live well in their own homes – such as help with cleaning, DIY, gardening, care of pets, transport, befriending and opportunities for social participation. Good Neighbour Schemes may be able to deliver some of this practical support.

The benefits of Good Neighbour Schemes include:
• enabling older and vulnerable people to retain choice and control in their lives; improving life expectancy, quality of life and active participation
• promoting independence and wellbeing and preventing or delaying the need for more intensive interventions
• increasing vulnerable people’s sense of safety and security at home
• ‘filling the gap’ where statutory services cannot provide
• overcoming loneliness and isolation, through befriending and accessing other social support (facilitated by transport schemes)
• volunteers themselves may gain from helping others and feel more involved within their own community

Like the populations they serve, Good Neighbour Schemes come in all shapes and sizes. Schemes may vary in terms of what they offer, how it is offered, for whom, and by whom it is provided. Some schemes are funded and employ a paid coordinator: other, more low-key schemes may rely on goodwill alone. Many Good Neighbour Schemes target their services towards older people: however, other schemes may offer support to lone parents, young families or other vulnerable groups as well. People who may need the support of a Good Neighbour Schemes include older people, disabled people, single or young parents as well as those in need through temporary illness, or those experiencing isolation in their community.

In studying even a small number of Good Neighbour Schemes (see, for example, the ‘thick case study’ of Oxfordshire later in this chapter), it is clear that even within a single county, these schemes are very diverse, although some may share certain characteristics. In examining Good Neighbour Schemes across the UK, we would suggest ‘dimensions’ of different Good Neighbour Schemes rather than typologies. These dimensions are not definitive or conclusive, but are

31 See Chapter 1 for a detailed review of the research literature (section 1.4).
dynamic. By their very nature, Good Neighbour Schemes are ‘grass roots’ organizations, specific both to the environment in which they operate and the personalities, skills and preferences of those who run them. Schemes can be seen as fluid and dynamic, constantly evolving within their own local political and community landscape.

Attempting to comprehensively ‘map’ the scope and the range of Good Neighbour Schemes across the country would be an impossible task. While larger, more formal schemes do exist, often working out of an established base such as a community centre, many other Good Neighbour Schemes remain informal, volunteer-led support networks, operating from a private home, or a single mobile phone. Such schemes may be difficult to track down. While some local authorities (for example, Hampshire) have made efforts to formalize the work of Good Neighbour Schemes within their region, employing paid coordinators, and combining funding from statutory bodies (in the case of Hampshire, funding from the local county council, NHS trusts and combined Dioceses\(^\text{32}\)) this model appears to be very much in the minority. Nationally, as well as within different regions, the picture is more a ‘patchwork’ of different types of Good Neighbour Schemes than a coherent single model of service delivery. However, in focusing on the case example of Oxfordshire it has been possible to identify a number of different types of Good Neighbour Schemes within the county. It seems possible that the models of schemes identified in Oxfordshire might be replicated elsewhere.

This chapter considers briefly some of the larger voluntary organisations which deliver Good Neighbour Schemes nationally. It then presents a case study of Oxfordshire, analyses some of the different types of scheme, and describes how these have evolved. In 2008-9, Oxfordshire ran a pilot scheme to promote Good Neighbour Schemes in the county. New groups were invited to bid for start-up funds whilst other schemes were able to take advantage of the good practice guidelines, advice and support offered by the Community Development Team (CDT) of Oxfordshire County Council (OCC). This pilot, with its evaluation, has informed our study. Some individual examples of Good Neighbour Schemes in Oxfordshire are also included to illustrate the diversity of schemes. Some information about other schemes (e.g. Suffolk) is included in appendices.

\(^{32}\) That is, combining funding from statutory, health and religious bodies.
National voluntary organizations involved in the delivery of Good Neighbour Schemes

Large-scale national-level voluntary organizations involved in the delivery of Good Neighbour Schemes include the WRVS (the Women’s Royal Voluntary Service) and the Salvation Army. Many Good Neighbour Schemes in the UK are run by churches or religious organizations; some are related to the FISH scheme below.

The Salvation Army: a Christian Church and registered charity
www.salvationarmy.org.uk

The Salvation Army is an evangelical Christian Church founded in 1865 in East London by William and Catherine Booth. It now does charitable work in over a hundred countries worldwide, as well as in the UK.

The work of the Salvation Army Older People’s Services in the UK includes 17 care homes and two day centres that offer support and companionship and provide a wide range of facilities to support old people’s independence. The Salvation Army also provides nutritious meals and company at lunch clubs, as well as visits to older people who are housebound, with the aim of making later-life a time of fulfillment and enrichment for the nation’s older generation.

The Salvation Army’s provision for older people includes some good neighbour-type services as part of a wider programme of support. Some of the other services provided (for example, chiropody) would not be provided by a Good Neighbour Scheme. In response to local need and in partnership with social services and other local agencies, the Salvation Army provides:

- Visits to people in their own homes to help them remain in their community
- Day care programmes and luncheon clubs often with transport provided
- Drop-in centres and cafes
- Activities such as reminiscence groups, quizzes and craft sessions
- Resources offered include: laundry, hairdressing, chiropody, help with assisted baths/showers
- Sheltered housing more the more frail
- Residential homes for those who can no longer manage in their own homes
WRVS: an ‘age positive’ charity with over 45,000 volunteers in the UK
www.wrvs.org

- Nationally, WRVS supports around 4,500 older people each month to live independently through Good Neighbour services
- WRVS runs approximately 54 Good Neighbour Schemes across the UK
- Volunteers help older people with everything, from collecting their pension to changing a light bulb
- WRVS also provides meals on wheels, runs community cafes, assists with trolley rounds in hospitals
- WRVS also runs community and lunch clubs and home library services as well as 60 social centres and nine community centres
- Between April 2008 and March 2009, over 90,245 visits to older people were made by 2,042 volunteers in the 54 Good Neighbour Schemes. 9,453 were befriending visits
- Between April 2008 and March 2009, 45 volunteer-run community transport services helped 7,172 people go shopping, visit friends or attend appointments

The FISH scheme

The FISH scheme was started in 1961 by the then vicar of St. Andrew’s Parish Church, in Headington, Oxford. Those who required assistance with ‘Good Neighbour type’ tasks (such as shopping, befriending) would display the Christian symbol of the fish in their window. In addition, an identified household in each street or area would have a larger plaque outside their house or on the gate with the sign of the fish on it. This household would take the lead in organizing services for twenty or so households who required help.

The tradition of the ‘Fish scheme’ has spread across the world and is used in many other countries as well as widely across the UK. Many existing schemes are derived from original ‘Fish’ schemes (see, for example, the Kennington scheme, below). Although many Fish schemes still exist, it is less usual now to display the symbol of the fish in a window as a sign that help is required. People are perhaps less likely to want to draw attention to the fact that they are vulnerable or need services.

Here, for comparison, is an example of a national statutory service – the Police – supporting the work of Good Neighbour Schemes and the voluntary sector. But note the difficulties of the statutory/ voluntary interface.
Interview with the Chief Inspector, Thames Valley Police

As police offices, there are two main strands of our work. The first – the one the public rightly know us for is concerned with ‘challenging the criminal’. The second, less well-known but equally important one, is about ‘supporting the vulnerable’. Our involvement with Good Neighbour Schemes falls into the latter category and is an invaluable part of our neighbourhood policing work. At Christmas we go to the major supermarkets and ask them to provide hampers for elderly people which our officers will then deliver.

Locally, we’re involved in different neighbourhood initiatives. For example, the police has a presence on local Neighbourhood Action Groups and Neighbourhood Action Teams where we’re working with local parish councils and other community organisations to reduce crime. We also have a long history of working with Neighbourhood Watch Groups in the county to reduce crime. Although the work of Good Neighbour Schemes and Neighbourhood Watch Schemes is different, I’ve noted that Neighbourhood Watch Schemes, which many people sign up to, can also lead people into ‘good neighbour-type’ actions. For example, people build up contacts through Neighbourhood Watch schemes and have a way of spreading information. People who know each other through Neighbourhood Watch will say, ‘Have you seen so and so recently?’ The Neighbourhood Watch can also be a good way of publicising information about Good Neighbour Schemes as there is often a local Neighbourhood Watch newsletter.

Two years ago, we had a period of very bad snow. During that time, we noticed nobody was committing crimes – it was too cold to go out! And as a consequence one day we found we had 50 police officers and PCSOs (police community support officers) with nothing to do. I rang Help the Aged, to ask if there was anything we could do for elderly people who were isolated. Due to Data Protection, they couldn’t give us the names or addresses of any vulnerable older people. So, when we do help an older person directly, it tends to be one that we know already – someone who has been a victim of crime and is therefore ‘on our system’. For us, Good Neighbour Schemes are an invaluable way of reaching some of these other older people who aren’t already known to us. We’ve tried via the health service, we’ve tried via social services, but due to Data Protection nobody will pass on information about vulnerable older people to us.

We’re always happy to go and do safety checks for older people – check smoke alarms and that all their bolts and locks are secure. In the past, we’ve helped with transport and collecting prescriptions for older people. We’re happy to promote the work of Good Neighbour Schemes – we’ll attend meetings if we can and offer our perspective on what’s happening in the area.

We’ve been involved with OCC and their Good Neighbour Schemes for the past two years – it’s a huge shame that due to funding cuts it looks as though OCC’s work in this area is running out of steam, but we’ll continue to support Good Neighbour Schemes wherever we can. I believe that Good Neighbour Schemes, like Neighbourhood Watch, can help to reduce crime locally, but our role in this is as much about supporting the vulnerable as it is about reducing crime.

Supporting vulnerable people is something the police have always been supposed to do: it goes back as far as Robert Peel and his original intentions for the police force. But it’s going to be harder for us to do this in future. With the planned budget cuts, many of my officers’ jobs are now under threat.
2.2. THE OXFORDSHIRE CASE STUDY
OXFORDSHIRE
THE GOOD NEIGHBOUR SCHEMES PILOT

Support from Oxfordshire County Council (OCC)
The strategic direction for Oxfordshire County Council (OCC)’s Social and Community Services is to support activities that enable people to stay in their communities and prevent the need for more expensive intervention. Good Neighbour Schemes reflect the principles of ‘Oxfordshire 2030’, which includes the strategic objective ‘Healthy and Thriving Communities’ – aiming to ensure that everyone in Oxfordshire is safe from harm, able to lead a healthy lifestyle, and is valued in the community in which they live, work, grow up and grow old; and that people have the opportunity participate and contribute to their communities.

In 2008/9, OCC’s Community Development Team funded Oxfordshire Community and Voluntary Action (OCVA) to:

- Research existing schemes providing a ‘good neighbour-type’ service in the county
- Produce good practice guidelines and a ‘start-up’ toolkit
- Promote OCC’s new start-up grant for GNS
- Provide advice and support to fledgling groups

New schemes were funded in nine different areas (see map). OCC supports groups on a one-to-one basis through

- The Good Neighbour Scheme toolkit and good practice guidelines (see Appendix)
- Start-up grants
- One-to-one support of schemes
- Networking lunches for coordinators and volunteers (including information stands and presentations from organizations such as Trading Standards)
- Production of a newsletter

The Good Practice Guidelines produced by OCVA is a comprehensive resource available to individuals, organizations and communities considering, or in the process of, setting up a Good Neighbour Scheme (see Appendix C). This includes templates of useful documents, and details of other relevant organizations. Guidance is issued on

- Volunteer recruitment and support
- Criminal Record Bureau (CRB) checks on volunteers
- Volunteer drivers
- Public liability insurance
- Health and safety
• Good practice policies
• Emergency planning
• Welcome packs for new residents
• Developing further Good Neighbour Scheme services

OCC offers a start-up grant to groups and organizations working towards running a Good Neighbour Scheme. Funding is widely promoted.

In addition to the Good Practice Guidelines and Toolkit, OCC also
• Provides personal support advice and guidance to those setting up schemes
• Offers opportunities for schemes to network and share good practice
• Disseminates news and information via a newsletter
• Brokers mentoring relationships between ‘established’ and ‘fledgling’ schemes

The different organisational structures of Good Neighbour Schemes in Oxfordshire

The evaluation of the Good Neighbour Schemes pilot by Alison Leverett-Morris (Alm Associates)\(^34\) identified the following three categories of scheme:

- **Community led**: schemes developed by an individual or community responding to the opportunity of OCC funding
- **Organization led**: schemes developed by an established organization responding to the opportunity of OCC funding
- **Established**: schemes that were already in operation prior to OCC’s funding and development intervention

Within these categories, the following organizational and operational structures were identified:

- **Entirely run by volunteers** (management committee made up of volunteers, volunteer coordinator is unpaid, all client services provided by volunteers). Such schemes are often run from the coordinators’ homes and tend to be in small villages
- **Run by volunteers, paid coordinator** (as above, but coordinator post is paid).

---

\(^{34}\) Leverett-Morris, A. (2010) *Oxfordshire County Council Good Neighbour Scheme*. Alm Associates Arts Consultancy. 58 Hayfield Road, Oxford OX2 6TU. [Alison@almaassociates.co.uk](mailto:Alison@almaassociates.co.uk).
### Setting up a Good Neighbour Scheme: information for Community Development Officers

- Find out if a Good Neighbour Scheme is needed in the community
- Identify community members who may be interested.
- Encourage them to call a Public Meeting
- Help them to organize maximum publicity to get as many people together as possible

### Setting up a Steering Group

- When you have enough interested people to start planning a GNS, then work towards developing a steering group
- The steering group will meet and decide on the way forward
- Be available in an advisory capacity
- Encourage the group to be realistic about time scales
- Stress that you are always available in an advisory capacity and make sure that they have read and understood the guidelines

### Duties of the Steering Group include the following:

- Develop a GNS
- Identify someone to write a constitution (Community Development Officer can assist with blank constitutions). If they apply for funding in the future or open a Bank Account for a group, they will need a constitution
- How will the scheme be managed?
- Identify a coordinator
- Delegation (to scheme coordinator): Volunteer recruitment/interview/support
- Delegation (to scheme coordinator): Volunteer induction/identify things you do and things you don’t do/useful telephone numbers/records/expenses
- Decide on geographical boundaries of scheme
- Decide on types of task offered
- Create an information leaflet
- Identify someone to manage the accounts
- Publicity
- Fundraising
- Identify who is responsible for the CRB process (Community Development Officer will need to work closely to advise on OCC procedure). NB: volunteers should only be CRB checked when group and volunteer are sure that they want to proceed
- Advise and support to apply for start-up funding

### Afterwards:

- Help steering group to organize an open information evening to involve the wider community and to encourage people to volunteer
- Be prepared to talk publicly about help and support groups can expect from CDOs and from the Scheme Coordinator
- Explain procedures for volunteering
- When the GNS has 5-8 volunteers in place, advise them to start operating on a small scale and build the scheme gradually. When the scheme has been operating for about 6-8 weeks advise them to hold a launch party, to get as much publicity as possible and be ready to welcome new members and volunteers!
• **Run by a voluntary sector organization**: the scheme operates from a voluntary sector organization (e.g. Information/ Advice Centre, Volunteer Bureau) and is delivered alongside other services provided by the organization. The volunteer coordinator might be a paid role (employed by the organization) or a voluntary role. All client services provided by volunteers.

• **Run by a public sector organization**: scheme operates from a public sector service (e.g. Resource Centre) and is delivered alongside other services provided by the organization. Volunteer coordinator either 1. a paid role (employed by Resource Centre or OCC); or 2. Unpaid role managed by Resource Centre or OCC. Resource Centre has management responsibility for scheme including finances (recorded separately to its other operations). All client services provided by volunteers.

• **‘Hosted’ by a public sector organization**: scheme based in/ hosted by a public sector service (e.g. Resource Centre). Scheme runs alongside other services provided by the organization but is not a resource centre service. Has its own telephone number. Scheme governed by an independent, voluntary management committee (with its own bank account, policies, procedures, etc). Volunteer coordinator is appointed by management committee; role is paid or unpaid depending on management committee’s chosen operating structure. All client services provided by volunteers.

The following pages give some examples of these organizational and operating structures with an analysis of the strengths and weaknesses of each.\(^{35}\)

Case studies of Oxfordshire Good Neighbour Schemes follow\(^ {36}\).

---

\(^{35}\) We are grateful to OCC and to Alm Associates Arts Consultancy for permission to use these diagrams. Leverett-Morris, A. (2010) *Oxfordshire County Council Good Neighbour Scheme*. Alm Associates Arts Consultancy. 58 Hayfield Road, Oxford OX2 6TU. [Alison@almaassociates.co.uk](mailto:Alison@almaassociates.co.uk).

\(^{36}\) The case studies are drawn from interviews carried out by Kate Coxon. All quotations are from interview transcripts.
3.3 Community led – unpaid Coordinator

Example of an organisational/operational structure

- **Scheme is local, informal, non-bureaucratic and voluntary**
  which is reflective of the core attributes of a GNS.

- **Administratively light.**
  Brings community together – everyone involved is local.

- **Flexibility.**
  Scheme is run via a mobile phone. Calls can be expensive for clients.

- **Autonomy.**
  Risk of committee members lacking necessary management skills and
  Coordinator being unaccountable. Safety issues for volunteers and
  service users. Need for robust systems in place.

**Strengths and Benefits of this structure**

Please note: shaded blue cells above also apply to
schemes operating under a similar structure but with a
paid Coordinator (see page below).

**Challenges, risks and obstacles of this structure**

- **Schemes often run via a mobile phone.**
  Calls can be expensive for clients.

- **If incorporated risk of**
  personal liability reduced – but are committee
  members able to cope with the administrative
  responsibilities?

- **If unincorporated**
  management committee members
  are at risk of personal liability.

**Organisational structure**

- **Schemes with this**
  structure are often
  set up by individuals
  who have a good
  knowledge of their
  local community and
  individuals’ needs.

- **As an entirely voluntary**
  scheme, often gain good
  will, support and funding
  from Parish Council and
  local businesses.

- **Maintaining personal boundaries is**
  challenging for the Coordinator. Risk
  of burn-out.

GNS is:
- Independently run (from Coordinator’s home).
- Entirely run by volunteers. **Volunteer Coordinator is unpaid**, management committee is
  made up of volunteers, all client services provided by volunteers.
- Coordinator contactable via a mobile phone or designated phone line in the Coordinator’s
  house (number diverted to another number when Coordinator on holiday).
- Some schemes share/rotate the Coordinator role between volunteers.
3.4 Community led - paid Coordinator

- Scheme is local, informal, non-bureaucratic and voluntary which is reflective of the core attributes of a GNS.
- A greater chance of sustainability. The role continues to exist when the individual moves on. Schemes can be less vulnerable than those heavily reliant on the commitment of a voluntary individual (who in many cases is also the scheme’s founder).
- A clearer distinction of personal & professional boundaries for the Coordinator, committee, users and volunteers.
- When the Coordinator role is paid (within this particular structure) there is potentially:
  - More accountability on the coordinator.
  - A clearer channel of line management (including dealing with potentially ‘uncomfortable’ HR issues).
  - A more manageable structure for information sharing (with one person in the coordinating role).
- An increased pool of people interested and/or in a position to take on the Coordinator role.

Risk of lack of skills to manage staff / knowledge of employment legislation
- If incorporated risk of personal liability reduced - but are committee members able to cope with the administrative responsibilities?
- If unincorporated management committee members are at risk of personal liability.
- Post is very part-time - small pool of locally based people in a position to take on role.
- Coordinator role is isolated: Pressure to ‘manage up’ (committee) and ‘manage down’ (volunteers and clients) - no colleagues for support.

Strengths and Benefits of this structure

- GNS is:
  - Independently run (from Coordinator’s home).
  - The Volunteer Coordinator paid, employed by the management committee (which is made up of volunteers) all client services provided by volunteers.
  - Coordinator contactable via a mobile phone or designated phone line in the Coordinator’s house (number diverted to another number when Coordinator on holiday).
  - Some schemes share/rotate the Coordinator role between volunteers.

Challenges, risks and obstacles of this structure
3.5 Voluntary sector run - unpaid Coordinator

- Scheme is local and 'voluntary sector' which is reflective of the core attributes of a GNS.
- A greater chance of sustainability. The scheme is 'bigger' than an individual; the hosting organisation and Coordinator role will continue to exist when individuals choose to move on.
- Flat structure – everyone involved in directly delivering the scheme is a volunteer.
- Expertise in the field of recruiting and managing volunteers and established procedures in place.
- Overcomes the potential isolation of the Coordinator role. Colleagues for moral support & sociability.
- Coordinator is accountable. Systems of governance and line management in place.
- Could be an advisory hub for smaller community led schemes.
- The Coordinator, and scheme as a whole, has the back-up of a professional voluntary sector organisation.

Challenges, risks and obstacles of this structure

- GNS can develop to become a key part of the host organisation's core service. Funding structure diversifies.
- Organisation brings knowledge and expertise of other services – increasing opportunities for partnership working and/or 'sign posting' clients to other agencies/services.
- Volunteer recruitment may prove challenging given that the organisation offers a range of volunteering options.
- Role is unpaid so may present future succession challenges.
- Scheme is potentially 'in competition' with other services provided by the organisation – eg. Recruiting GNS volunteers or fundraising for the GNS, will not necessarily be the priority for the organisation's committee and senior management.

Strengths and Benefits of this structure

- Cells shaded in blue (above) apply irrespective of whether the Coordinator role is paid or unpaid. See page below.

Organisational structure

- The scheme operates from a voluntary sector organisation (eg. Information/advice centre, volunteer bureau) and is delivered alongside other services provided by the organisation.
- The Volunteer Co-ordinator is a voluntary role (unpaid).
3.6 Voluntary sector run - paid Coordinator

**Strengths and Benefits of this structure**

- Scheme is local and voluntary sector reflective of the core attributes of a GNS.
- Potential risk of "over professionalizing" – which is not reflective of GNS core attributes.
- Difficulty evidencing preventative work and outcomes brings challenges securing funds.
- Volunteer recruitment may prove challenging given that the organisation offers a range of volunteering options.
- Greater accountability when Coordinator is a paid member of staff.
- Potential challenges securing funding if the organisation is a branch of a national organisation.
- Staff, admin, core costs. GNS would have to operate on a full cost recovery basis. Sustainability & funding challenges.
- Excellent voluntary sector expertise – could become an advisory hub for smaller community led schemes.
- Scheme is potentially "in competition" with other services provided by the organisation – e.g. Recruiting GNS volunteers or fundraising for the GNS, will not necessarily be the priority for the organisation’s committee and senior management.

**Organisational structure**

The scheme operates from a voluntary sector organisation (e.g. Information/advice centre, volunteer bureau) and is delivered alongside other services provided by the organisation.

The Volunteer Co-ordinator is a paid role (employed by the voluntary sector organisation).
3.7 Public sector run – Coordinator paid or unpaid

Has the backing and infrastructure of a large organisation (HR, legal, management and supervision etc).

‘Formal and professional’ context lends itself well to operating in urban areas, where risks can be greater - eg. volunteers at greater risk of entering a risky, unknown environment than in a small rural village where all clients tend to be known to the community.

Excellent and complementary services and resources at the Resource Centre.

Scheme is well placed for ease of signposting clients to other services.

Best practice guidelines, policies and protocols firmly established.

Potential to operate as an advisory hub for smaller community led schemes.

Challenging to manage the scheme’s ‘public sector brand’ (with possible connotations of a ‘home care service’). ‘Good Neighbour’ implies ‘grass roots’, ‘community based’ and ‘community led’ - if run by the public sector it becomes something different.

Risk of over professionalising and/or being too risk averse.

An uncomfortable ‘tension’ when a voluntary scheme is run by a public sector body. Do volunteers need to comply with public sector practices and policies – if not, who holds responsibility when / if something goes wrong?

Fewer funding opportunities open to public sector.

Volunteers might be perceived to be doing statutory tasks.

Less some of the qualities at the heart of a ‘good’ GNS (eg. Coordinator and volunteers less likely to be local and an ‘actual neighbour’ to clients, scheme at risk of becoming more like a service – and less of an informal ‘little bit of help from a neighbour’).

GNS linked to a statutory service may deter people from using the scheme (and also potentially some people from volunteering on the scheme). May only get clients from Centre client base.

Challenges managing expectations. Clients using Resource Centre and GNS may expect same level of ‘service’ from volunteers as they receive from professional staff. GNS may be perceived as a ‘service’ provided by the Resource Centre – rather than a voluntary scheme operating at the Resource Centre.

Strengths and Benefits of this structure

Challenges, risks and obstacles of this structure

Organisational structure

Run by a public sector organisation: The scheme operates from a public sector service eg. Resource Centre or Day Centre and is delivered alongside other services provided by the organisation. The Volunteer Co-ordinator is either (i) a paid role, employed by the Resource Centre/ County Council, or (ii) an unpaid role managed by the Resource Centre/CC. The Resource Centre has overall management responsibility for the scheme – including its finances (recorded in a separate cost centre as per any other of its projects or services). All client services are provided by volunteers.
3.8 Hosted by a public sector organisation – volunteer run

**Strengths and Benefits of this structure**

- Resource Centre benefits from being able to refer its clients to scheme and vice versa, scheme benefits from referrals.
- Scheme is well placed for ease of signposting clients to other services.
- Centre benefits from increased connection to its community.

**Challenges, risks and obstacles of this structure**

- Risk of unacceptable strain on Resource Centre Manager – who may feel or be perceived as being ‘responsible by association’ if things go wrong.
- A need for very clear guidelines on roles and responsibilities understood by all parties.
- If Centre Manager is on the GNS committee will this result in the scheme adopting public sector principles and becoming ‘over professionalized’? In turn, however, is it reasonable to expect the Centre Manager to share responsibility for governance if the scheme’s policies and practices are not (to their mind) sufficiently robust?
- If Resource Centre Manager is not on the GNS committee - the GNS is an independent group and the Resource Centre/County Council has no responsibility or control over the scheme’s working practices.
- GNS may benefit from experienced Centre Manager on committee. However, this then puts Centre in a position of responsibility for the scheme. Needs careful consideration.
- Potential strain on Resource Centre. Will clients call the Centre if a volunteer is late arriving or they wish to make a complaint?
- What will the press/public reaction be if there is a major incident?
- What if a Resource Centre client has a bad GNS experience?
- As the ‘visible’ and hosting organisation – the Resource Centre is at risk of being publicly perceived as accountable and/or incompetent. (Damaging for it’s other services and client confidence).

**Organisational structure**

- The scheme is based in/hosted by a public sector service eg. Resource Centre or Day Centre.
- The scheme runs alongside other services provided by the Resource Centre but is not a Resource Centre service. It has its own telephone number.
- The scheme is governed by an independent, voluntary, management committee (and has its own bank account, accounts, policies, procedures etc).
- The Volunteer Co-ordinator is appointed by the management committee (paid or unpaid depending on the committee’s chosen operating structure)
- All client services are provided by volunteers.
CASE STUDY 1: KENNINGTON Good Neighbour Scheme: an informal scheme that has been running for more than 40 years

History – many changes over the years

Kennington is a small village within the Oxford area with an estimated population of around 4,000 people. A Good Neighbour Scheme has been operating here since the late 1960s. The scheme originally derived from the FISH scheme (see above) which operated in Headington, another area of Oxford, at this time. Originally, the Kennington scheme was a partnership of three churches: the Anglican, Catholic and Methodist Churches of Kennington; however the coordinator who took it over in 1968 and ran it for 17 years was not herself a church member. At that time, Kennington was smaller and the way the scheme was organized was that one ‘good neighbour’ was elected for around 20 households and displayed a fish in their window; over time however, the ‘fish’ was no longer displayed. The present coordinator (A) became involved in the scheme in 1967. At that time, the scheme also ran summer holiday activities for local children and she had young children so became involved with helping to run these activities. Her husband then became unwell and was unable to drive. As A did not drive, the Good Neighbour Scheme offered to drive her husband to hospital appointments. Following her husband’s death in 1970, A was asked to join the committee and has been involved ever since. She took over as coordinator of the scheme in the late 1980s.

The work of the scheme has changed since these early days. In the past, the Good Neighbour Scheme also supported families with younger children, by offering summer holiday activities for example. In addition, the Good Neighbours would do things such as meeting children from school, or provide informal childcare while they were waiting for parents to return home. They would organize trips away and go on outings in the summer. The scheme also used to provide Meals on Wheels. Insurance and Criminal Record Bureau checks were not required in those days. Due to changes in requirements and legislative responsibilities, this type of service cannot be provided any longer.

Then and now

The committee now consists largely of ‘old’ older people: A feels that they would like to get more ‘younger people’ (i.e. in their fifties) involved. However, many people work full-time and many have young families. The trend these days is for women to have families later, and work beforehand.

In the past the scheme helped more of a range of people, for example, those with young families. These days, 100% of those helped by the scheme are older people living alone and without relatives in the area. Most of the volunteer drivers have been involved with the scheme for many years. A feels that there is a great deal of goodwill locally, with many drivers offering their services for free. Some service users do offer a contribution for hospital trips but this is no more than £5.

37 The Christian sign – this is widely recognised in schemes across the world.
Users
J, an older person in her sixties, began using the Good Neighbour Scheme two years ago when a progressive degenerative arthritic condition meant that she could no longer drive or use public transport. She now uses the scheme a minimum of once a week, when a driver picks her up and takes her to the shops. In addition, when she has appointments further afield (chiropodist; optician, hospital) she will also book a driver. “I usually offer £5, but very often I know that the driver will either donate this to charity or offer it back to the scheme. People are very generous with their time.”

J is very grateful for the service provided by the scheme, observing that: “I don’t know what I would do without it. Booking a taxi is very dear, I wouldn’t be able to afford to that on a regular basis. Just knowing that there’s help just a phone call away has made all the difference to me”.

Another user, B, is in her late nineties and relies upon the Good Neighbour Scheme to take her to the hairdressers once a week.

Services
The bulk of the work of the Kennington scheme now is transport: transporting older people to hospital and health centre appointments, to the hairdressers, for shopping.

The Good Neighbour Scheme also produces what is known as the ‘Village list’. This directory is produced every two years by the coordinator and committee and provides valuable local information about Kennington and services that are available locally. This currently costs in the region of £500 to produce and print: for this, the coordinator seeks funding in the form of sponsorship from local businesses. The scheme was also able to apply for a small grant from Oxfordshire County Council (£150) to assist with the costs of production and circulation. The work of the Scheme is mentioned in this directory so this is another source of awareness-raising.

Organisation
Kennington is one of the ‘less formal’ Good Neighbour Schemes in Oxford. It has a committee made up of six members and meets two to three times per year. It has no funding, nor does it have a formal constitution. It is, however, well used. People are referred to the scheme via the Health Centre and the district nurses but overwhelmingly referrals come by word of mouth.

As the coordinator says: ‘when you are hale and hearty you don’t tend to know much about the work of the Good Neighbour Scheme. But when people begin to need our services they are often staggered and say, I didn’t know this service existed!’
CASE STUDY 2: DIDCOT Good Neighbour Scheme: a newly established scheme, launched 1st February 2011

Setting up
Didcot, the largest town in South Oxfordshire, was one of six areas designated by OCC as suitable for expansion of Good Neighbour Schemes. With an increased population and planned housing development, Didcot was considered a suitable area. In June 2010, a group applied to OCC for a start up grant, and received £5,000 in funding to set up a scheme. Initially, the group advertised for a paid coordinator to work just a few hours per week, but was unable to attract candidates at the salary offered. The present coordinator (K) came on board in November 2010. Recently retired, K had a background in business management and wanted to undertake some work on a voluntary basis.

K reported that initially she put in a number of hours recruiting volunteers: this involved an interviewing process followed by Criminal Record Bureau checks. K observed that: “It is necessary to balance the need for attracting volunteers with the fact that we have a duty of care to our clients: we need to make sure that the volunteers we attract will be the appropriate people to carry out the tasks. Once volunteers have been recruited and CRB checked, we work hard to ‘match’ the volunteer who we feel will be most suited to the client and most able to meet their needs”.

The scheme also recruited a treasurer and Chair. Throughout this process, K was guided by OCC’s Community Development Lead on Good Neighbour Schemes, who was able to advise and support on key issues. For example, in recruiting, it was important to respect Equal Opportunities legislation and policy and reflect this in the process. The CDL lead also advised on insurance, advertising etc.

Some of the funds were used for designing and ordering posters and leaflets to advertise the scheme. Additional advertising took place in the local press and on Radio Oxford. Other ways that K publicized the scheme included going to local GP surgeries to present information about the scheme and what was available, and holding drop-in sessions at local libraries and community centres. A mobile phone used by the coordinator was another expense incurred.

Services
K found that in setting up the scheme it was important to decide within the committee what the GNS would offer, and equally, what services would not be provided. “We are not medically trained, nor are we designed to replace other statutory services, therefore we will not take on any ‘medical’ caring tasks. We do not offer any cooking or food preparation, as this has implications in terms of food handling, health and safety etc. We don’t do house cleaning, although we may offer a discretionary ‘one-off’ quick dust, hoover or clear up on an occasional basis. It’s important to remember that we’re not here to replace Social Services.”
While the Scheme does not want to replace the work of other agencies, it recognizes the need to link with other services.

“We’ve contacted local groups such as Age Concern/Age UK as well as specific services, such as the local Alzheimer’s organization as we want to make sure those service users know about our Good Neighbour Scheme and are able to access it.”

Volunteers and assessment of requests for help
To date K has recruited and CRB checked 14 volunteers.

“When we receive a call or a referral from a GP, we first of all arrange a home visit to the client. I carry out a Risk Assessment and then seek to match the client with a volunteer”.

Organisation and challenges
K explains that this scheme has been very lucky in terms of its premises.

“We have been extremely fortunate in obtaining an office within a day centre in Didcot, for which we are not charged any rent. This means we have a ‘free’ base from which we can operate, and importantly, many of the clients using the day centre are those same people who might benefit from our scheme, so it’s good for publicity and word-of-mouth recommendation too”.

In terms of the challenges in setting up the scheme, K feels that the greatest challenge is “just getting the word out, really. Just letting people know that we’re here and what we can do.”

Another challenge can be when volunteers may have other jobs, which can cause a conflict of interest. “One of our committee members is also employed within the Day Centre, which is convenient, but we’ve had to acknowledge there may be a potential conflict of interest and to make sure that her roles are handled differently.”

K is optimistic about the future of this and other schemes:

“After the initial outlay on publicity, insurance, CRBs and a mobile phone and so on, a Good Neighbour Scheme can, in theory run itself. We plan to meet around once a month.”
CASE STUDY 3: LETCOMBE REGIS Good Neighbour Scheme: a smaller scheme

Setting up
Letcombe Regis is a very small rural village two miles west of Wantage, on the edge of South Oxfordshire, with approximately 300 inhabitants. The Good Neighbour Scheme has been running for two and a half years (with the present coordinator all this time) and is regarded as reasonably successful.

“I’ve found that the most important thing as coordinator of a Good Neighbour Scheme is to be pro-active and not reactive. You have to let people know that you’re here: you can’t just expect to sit back and let the calls flood in!”

Volunteers
The scheme originally had 11 volunteers but this has now dropped to 8. “Every month we hold a coffee morning in someone’s home; it’s as much about supporting our volunteers, as letting people know where we are and what we do.” Although the coordinator is in his sixties, the majority of the volunteers are in their 30s and 40s.

Services
The Letcombe Regis scheme organizes litter-picking weekends, and runs a children’s party at Christmas. They will also do small DIY jobs. “We emphasise that these should be small. We’re happy to help put up a shelf or two, but we’ve been asked to re-fit an entire kitchen in the past, and that we won’t do!”

The scheme does not offer any driving, but this is because there is a successful transport scheme operating in Wantage, two miles away. This is a well-established scheme which operates out of an Independent Advice Centre in Wantage. “We might do the odd ‘informal’ trip into town, but if people need transporting to hospital appointments or to the GP, then we will refer them to the Wantage scheme.”

One of the areas of work that has developed recently is that older people have been requesting assistance with using home computers/IT. This has been done by offering one to one sessions with older people in their own homes, introducing them to the internet, showing them how to set up email accounts. This has proved very popular, and is an area that the coordinator would like to see develop.

Another programme the Letcombe Regis Good Neighbour Scheme has been involved with is the ‘Buy with confidence’ programme run by Trading Standards. This is where builders and tradesmen are ‘checked out’ by Trading Standards at OCC. Once vetted, the tradesmen are issued with a certificate so that prospective customers can ‘buy with confidence’.

“Older people are very vulnerable and are often targeted by unscrupulous criminals posing as tradesmen. We have had many cases locally of older people being ‘conned’ by tradesmen into having their roof ‘done’ or their drive re-tarmacked at an extortionate
rate by a ‘cowboy’ builder. The ‘Buy with Confidence’ scheme is proving very popular. We also pass on information that we receive locally. For example, if there are any ‘scams’ or ‘con-artists’ operating in the area, we pass on this information through our Good Neighbour Scheme.”

Challenges

Recruiting volunteers. “With a small population, we only have a small pool of volunteers to draw on. We’re finding it hard to attract volunteers.”

Fundraising: a constant challenge. “We received the start-up grant from OCC, but once that’s run out, you’re on your own. We have to fund-raise to cover costs such as insurance. It can be frustrating: I estimate that I spend around 30% of my time fund-raising. That’s time that could be spent helping people.”

Recruiting users. Another challenge can be offering services to people who might benefit from them but who are reluctant to be seen as ‘not coping’. “Letcombe Regis is a rural area and by definition, people who move here like to lead a peaceful, even quite isolated rural life, close to nature. They tend to be quite independent, and it can be very hard for them to accept that they may need help.”

More widely, the changing nature of the local community. In a climate where local community centres and other vital local services such as rural post offices are closing or under threat, reaching out to local residents is harder than ever.

“Our local pub closed recently and that has been a real loss to the community. As well as being a vital local resource, it was also a good place for us to advertise, fund-raise and pick up volunteers and potential service users. You hear a lot on the grape-vine in a local pub! We used to have pub quiz nights and hold raffles, and use those to raise funds for our scheme. So it’s been a loss to the area, but also to our scheme. We used to hold a community lunch there once a week for older folk: many people used to look forward to that. That’s gone now, as well.”

Insurance. “We pay around £700 a year for our phone and public liability insurance. Other schemes across Oxfordshire are also paying out a small fortune in insurance. Given that we’re doing this all for a good cause, surely it ought to be possible to come to some sort of deal – I don’t know, possibly find a cheaper, ‘collective’ insurance for the schemes that could be subsidized by the county council. Surely you could insure more than one scheme through a corporate body?”
A final comment about plans for The Big Society

The coordinator is sceptical about the present Government’s plans to build on voluntary schemes to create a ‘Big Society’:

“Quite frankly, I find it insulting. Our volunteers have already given so much time for free and now, with the Big Society, they’re making cuts to statutory services and asking Good Neighbour Schemes to pick up the pieces. It’s not acknowledging what’s gone before. It’s assuming that all these good-natured voluntary services are quite happy to take everything else on, for free!”

“The team responsible for Good Neighbour Schemes at Oxfordshire County Council – the Community Development Team – was really helpful when we applied for this grant, guiding us through the progress and supporting us all the way. They’ve been on hand to help and support us. Now it turns out that this team is being disbanded from the 1st April 2011 in the latest round of budget cuts. It’s not right and it’s not fair – and it’s not good news for Good Neighbour Schemes.”
CASE STUDY 4: WITNEY VOLUNTEER LINK UP: a Good Neighbour Scheme run by a Volunteer Link Up charity/company limited by guarantee with a paid coordinator

History – many changes over the years
Witney is the largest market town in Oxfordshire, with a population of some 25,000. The Good Neighbour Scheme has been running for over 27 years. It was originally set up by the wife of the local Methodist church minister who saw the need for a Good Neighbour Scheme. She organized a rota of volunteers who were happy to deliver these services. Over time, the scheme grew in size and when the minister and his wife moved on, the scheme remained. Like many schemes, the Witney scheme has become more formalized over the years. The Good Neighbour service is now run by Volunteer Link Up, a charity which matches volunteers with people needing help. The present coordinator has run the scheme since 2005.

Services, then and now
Help offered can range from befriending, to taking older people out for a drive, or taking them for a trip to the shops. Some people require assistance with gardening or minor decorating jobs.

“Health and Safety legislation, combined with the fact that we live in an increasingly litigious society, has had an impact on the kinds of services we can offer. We used to help older people move house: it’s very common to ‘downsize’ as you get older. These days we’re not allowed to lift anything, due to Health and Safety legislation. We can do a little bit of ‘light’ decorating, but nothing involving ladders.”

However, the coordinator stressed that each request is assessed according to individual need: if there’s a strong enough social need, they may be able to make exceptions.

“Many of the enquiries we receive relate to transport.” Very commonly older people ring up asking for someone to take them to the hairdresser or the optician. Hospital appointments are another frequent request. The scheme does offer help with transport, but this is only for people who are unable to use public transport, usually through disability or infirmity. With regard to cost, no charges are made; however, when it comes to transport, service users will contribute to petrol. “Our volunteers only charge a basic mileage rate, so a return trip to the John Radcliffe hospital in Oxford will cost around £12, whereas a taxi ride one-way for the same distance could be in the region of £35!”

Assessment and records
The coordinator describes the process, from initial enquiry to delivery of service: “When a request comes in, we first of all ask ourselves: do we have a volunteer? “We’re busy, but we still keep individual records for all our service users, detailing all the different tasks carried out, so that we can keep track of the good work we have done.”
**Users**

There are over 600 users currently. And contrary to popular belief, the scheme helps younger as well as older people. “We’re often asked about baby-sitting or childcare, but we’ll only do this if there’s a strong social need. For example, we helped one mother who had triplets and was really struggling to manage at certain times. So we found a volunteer who could go in at bath-time, and offer an extra pair of hands. Of course, as with requests for shopping for older people, much of what we do is what families used to do for each other, when they lived near each other. These days, families are more fragmented: relatives have moved away.”

Referrals are taken from GPs, health visitors, social workers, and the newer role of ‘support brokers’ (those brokering community services). Relatives and neighbours often make referrals, and many people self-refer – usually vulnerable for one reason or another.

**Volunteers**

Over two hundred volunteers offer their time to the scheme. Recruiting volunteers is an ongoing process. “Whenever there is a fete or a community event locally, we try to make sure that we have a stand, so that we can recruit volunteers. We also advertise in the local press and run campaigns on local radio from time to time. If there’s any platform going, we’ll stand on it. It’s important to keep up our profile locally. Although we have over two hundred volunteers now, people move away or move onto other things so we need an ongoing recruitment policy.”

Perhaps surprisingly, not all of the volunteers are retired. “Our volunteers come from across the board. Many of them are retired, but we also have mothers whose children have now gone to school and who want to do something useful during the school day. We have students on GAP years looking to gain valuable experience that will help them secure the job they need in future years: in these competitive times, very often voluntary work on the CV is all-important. And we also have a small number of young people who are in their final year of school, looking to acquire skills that they can add to their UCAS forms and help them get into university. Above all, volunteers need to have some time to spare- and people have time to spare for different reasons.”

While 50-75% of all the volunteers who come through Volunteer Link Up feed into the Good Neighbour Scheme, sometimes, if more appropriate, the scheme will refer these volunteers onto other work. “For example, we only do light DIY jobs and minor gardening tasks. Sometimes we’ll get volunteers who want to offer more – perhaps they’re a qualified plumber or want to do more serious gardening. On those occasions we’ll refer to other services that we know are looking for volunteers of this type. Other organizations that are looking for volunteers will also get in touch with their specifications.”

Recently the scheme has matched volunteers to a local hospital looking for staff to push trolleys, as well as the local Multiple Sclerosis society which was looking for befrienders specifically for people with Multiple Sclerosis.
Organisation
The Witney scheme differs from many of the Good Neighbour Schemes in Oxfordshire in that the post of manager is a paid role. In addition, there are four part-time members offering a 1.8 FTE cover. The posts are funded in part by a National Lottery Grant, and partly by grants from the town, district and parish councils. Oxfordshire Social Services currently makes a substantial contribution towards funding (50%). There is great concern that proposed public sector cuts will impact on the funding.

Volunteer Link Up was already a registered charity, and in 2010, it became a company limited by guarantee. This was largely the choice of the trustees: becoming a company means that they have greater degree of protection (if someone were to seek legal action for any reason).

Challenges: funding
A constant challenge to the scheme is ensuring that funding continues. Staff salaries take a big chunk out of the funding; a very modest rent is paid for accommodation to the Methodist church (the scheme has an office in the Methodist Church premises). Other costs include public liability insurance, telephone line rental and CRB checks for all volunteers.

Benefits from volunteering: the reciprocity of helping and being helped
An unexpected side-effect of the volunteering is that very often those who help gain as much from the experience as those who are helped.

One volunteer, a man in his thirties, had experienced family breakdown and unemployment. He began at Volunteer Link Up by doing odd jobs and gardening for older people, and through that, decided to train as a landscape gardener. Through volunteering he eventually became employable.

Here is the story of another volunteer and the young man he helped.

“Last year, an older man in his forties came to see us. His marriage had broken up, he’d had a mental breakdown and he’d lost his home. He was at rock bottom and his self-esteem was low. He asked us if he could be of any use. He went through the necessary CRB checks and following this, we matched him up with a young man in his twenties who was physically very disabled. This young man lived at home with his parents and wanted someone who would take him out once a week to the local pub for a pint and a chat.”

The coordinator reported that the same volunteer had come in again recently. He was a different person: he had grown in confidence. He was still going out once a week for a pint with the young man, but through the volunteering he had been offered some work with an organization helping homeless people. The voluntary work had turned into a paid role; and within a short space of time the young man had been offered a more senior post which included accommodation.
“The volunteer had got his own life back on track: he was re-established. He’d got a job and a home. He said he’d learnt more from the experience of volunteering than from anything he’d done before. Through befriending a vulnerable person, he’d grown in confidence himself. He’d assumed some responsibility: this in turn gave him a sense of purpose which enabled him to move on from his own problems. And he still takes the young man out once a week, and what’s more, they’ve become friends.”
CASE STUDY 5: BERINSFIELD Good Neighbour Scheme: a deprived ‘urban village’ on the point of set-up

History
Berinfield is a large ‘urban village’ about seven miles south east of Oxford, built in the 1960s on the site of a former airfield, and intended as housing for workers in the then booming Cowley car factories in Oxford. With the collapse of the car industry, it now scores highly on the Index of Multiple Deprivation (IMD), with high numbers of lone parents, families on benefits and people out of work. It has a well-established Information Centre which has been running for over 35 years and which has always had a strong agenda of social inclusion. The Information Centre is now run as an independent charity.

Setting up
The centre is currently in the process of setting up a dedicated Good Neighbour Scheme, to build on the good work that is already undertaken by volunteers in the area.

The project manager of the information centre explains the advantages of setting up a scheme to operate from an established base.

“We’re very much established here as a source of guidance and information, and people know us and trust us locally. For us, the Good Neighbour Scheme is very much about providing an outreach service over and above what we can offer in the centre. We want to spread out into neighbouring villages.

At the moment, we’re in the process of setting up. We’re doing a big recruitment push to attract volunteers locally – we had a big spread in the Oxford Mail [the local daily newspaper for Oxford and Oxfordshire] last week. At this stage, we don’t want to be too specific about what we will or won’t do – we may get a volunteer with a particular talent who approaches us, so we’d look at trying to match that to what people want. We think though that it’s going to be mainly light gardening, light household tasks that people want help with – “tea and sympathy” is very much on our agenda as well. Above all, we’re about social inclusion here in Berinsfield: making people feel welcome and comfortable. I think these initiatives have to be dynamic: you’re responding to what people want and until they come forward or you find them, you won’t know what those needs are. We’re also planning to offer a driving scheme for older people – collecting shopping or prescriptions.”

The scheme is in the process of applying for funding. “We’ve applied to OCC’s start up grant, and as well as that, we’ve just put in a bid for some Comic Relief\(^{38}\) money. Publicity and leaflets and so on – that’s a big cost. And we’ve just heard about a “stronger communities fund” so we’ve put in a bid for that as well.”

\(^{38}\) Comic Relief is a charity aiming to address poverty and disadvantage in the UK and internationally.

An advantage of the Berinsfield scheme, operating from an established centre, is that fund-raising and writing bids are second nature to the new Good Neighbour Scheme team, as they have been fund-raising for many years. However, support from Oxfordshire County Council’s Community Development team has still been welcome.

“We’re just waiting to hear back now about funding. But the good thing is, that we’ll be able to hit the ground running. People know about us and what we do: I’m optimistic that when we set the ball rolling, we’ll be able to get ourselves established fairly quickly.”
CASE STUDY 6: KIDLINGTON AND DISTRICT Good Neighbour Scheme

Setting up
Kidlington is a large village some five miles north of Oxford, with a population around 14,000. Like the Berinsfield scheme, the Kidlington Good Neighbour Scheme operates out of an established information centre. The Kidlington Information Centre has been running for over twenty years. The Kidlington scheme was launched in February 2010 and went fully ‘live’ in June 2010. The scheme bid for a start-up grant from Oxfordshire County Council and was fortunate to receive the maximum amount of £5,000.

The coordinator believes that as the scheme runs from an established information centre, this has given it a head-start. “We’ve been able to hit the ground running. We’ve got the infrastructure set up, people know who we are and where we are. We already have a committee and treasurer set up through the centre, so it’s probably been a smoother process for us than for many schemes.”

Users
The scheme is open to those living in the Kidlington and district area (which incorporates the large village of Kidlington and about eight smaller villages in the vicinity). The scheme is open to those who are either disabled or who are over the age of 60. So far there are about eighty users. Recruiting users has been difficult. “In terms of the clients, it takes time. You have to build up people’s trust, particularly with older people who can be quite wary of new schemes.”

Volunteers
Attracting volunteers has been less difficult. “With the volunteers, we’ve been very lucky. Following a leaflet drop that we did, a lot of people came forward at once, which meant we had a lot of CRBs to do at the same time!” To date, the scheme has recruited 55 volunteers.

Volunteers range from some younger mothers in their twenties who are keen to offer an hour of their time here and there, through to ‘young retired’ people in their sixties. “We’ve got slightly more women than men. And not all of them are people who don’t work. Many work part-time. We have one volunteer who works full-time and commutes to London but still gives her time at evenings and weekends. We’ve been struck by how generous people are prepared to be with their time.”

Services
The scheme offers a range of services including shopping, dog-walking, light gardening, befriending, and collection of prescriptions. Some users receive weekly befriending visits, others receive help on a more ad hoc basis, for example, occasional help with gardening.
Transport is currently not offered, but they are looking at offering this in the future.

“We’ve had a lot of enquiries about transport, so we’re planning to do this. We’ve looked at the requirements in terms of insurance. We’ll probably restrict it in terms of area, though, offering only local trips. We don’t charge at all for our services, but we don’t like our volunteers to be out of pocket. If we offered transport further afield – such as to the hospitals in Oxford – the expenses would mount up in terms of petrol and parking expenses for volunteers, so we’re going to keep it local.”

“We’ve had some requests for services we can’t provide, such as care and medical help. And one lady asked us to decorate her house and we had to say, sorry, we can’t do that! On the whole, though we’re usually able to meet people’s needs. We’ve had some great feedback, and when people get a good service, they spread the word.”

**Organisation**

The scheme is still managing on the start-up funding it received last year: publicity, producing leaflets and completing CRBs are the biggest costs to date. The scheme is fortunate to be able to operate out of the Information Centre. The office manager of the information centre has a paid role in the centre; however, she shares the unpaid role of coordinator of the Good Neighbour Scheme with another volunteer.

Although the scheme is going well, the coordinator is still looking to improve the service.

“We’d like to attract more disabled people. At the moment, we only have around six disabled people on our books. We think there must be a lot of younger disabled people out there that we’re not reaching. We’re going to start trying to reach out to this group, through health centres and other agencies.”

**Feedback letter sent to the Kidlington Good Neighbour Scheme**

“I would like to say a big thank you for arranging for two small jobs to be undertaken and an equally big thank you to the kind chap who did them.

I have been trying to find someone for 18 months and 6 months respectively and was beginning to despair of ever getting them fixed. I cannot believe they have been done.

Thank you once again”.
CASE STUDY 7: Good Neighbour Scheme developed for the Chinese Community in Oxfordshire

The Oi-Sum Good Neighbour Scheme has six volunteers offering a total of 24 hours per week.

Volunteers from the Chinese Community offer their assistance by

- Escorting older people to the Chinese Community centre and assisting while they are there (around 12 visits per week)
- Visiting people at home and in hospital (average 6 per week)
- Reading and translating simple letters (2 per week)
- Filling in questionnaires (2 per week)
- Shopping (6 per week)
- Seated exercise class (1 session per week)
- Signposting to services (4 per week)

Services offered

- Home/hospital visiting and befriending
- Organising coffee mornings for older people who live alone
- Helping with shopping
- Attending day centres and social events
- Signposting to services

Services considered most useful

- Befriending
- Reading and translating letters
- Transport

Needs not being met?

- Acting as interpreters for older people at GP and hospital appointments

Other support:

- Scheme supports nine carers
- The Oi-Sum Good Neighbour Scheme is continuing to support older people and carers living in Oxford, Cherwell, Bicester and Abingdon
- Oi-Sum GNS is currently recruiting Mandarin-speaking volunteers in Kidlington as there are isolated older Chinese people in the area

39 Reproduced with permission of Oi Sum Scheme: Oxfordshire Community Development Team, Oxfordshire County Council, March 2011
The Oxfordshire Good Neighbour Schemes: what can we learn?

Chapter 1 about the policy background, and the importance of local assessment of community, alerted us to the potential diversity of Good Neighbour Schemes – who they serve, how they operate, what services they provide, and how they meet the needs of their neighbourhoods. So finally, we should attempt to make sense of the diversity demonstrated in the seven case studies from Oxfordshire set out in Chapter 2. To summarise, we can offer the following dimensions.

- **Size**
  This varies from the tiny village of Letcombe Regis, population 300, with eight or so volunteers, to Witney, the largest market town in West Oxfordshire, with a population of 25,000, and over 200 volunteers helping 600 users.

- **Users**
  Most schemes focus on elderly people. But some also help younger people – young mothers, or people with disabilities. Some schemes indicate the decision about focus depends on local needs, and the extent to which other organizations are already providing a service.

- **Volunteers**
  Schemes depend largely on ‘the retired’, including ‘the young retired’. But a surprising number of schemes in Oxfordshire present a far more varied picture. They recruit volunteers in full- or part-time work, giving up time in the evenings or weekends; younger people not currently working, such as mothers giving time while children are in school; and young people giving time during a GAP year or during the school year – this as a sort of internship to improve their cv.

- **Services**
  Services offered present a very wide variety, as expected from the literature. Services are quite specific to the neighbourhood, and the group, however (the Chinese Good Neighbour Scheme is an example). The schemes are also specific in not offering services already provided by a neighbouring scheme (Letcombe Regis, for example, does not offer transport as there is a very successful scheme two miles away in Witney). It is also clear what is not offered – either because the group does not collectively possess the necessary skills, or because legislation or insurance...
requirements mean that the service has to be provided professionally or subject to strict regulation.

- **Funding**
  Some schemes exist ‘on a shoestring’ (Kennington appears to be one example). Others draw in considerable funds, from the local authority (county, district, parish), religious bodies, national charities such as Comic Relief or the National Lottery (Witney is the clearest example of this).

- **‘Stand-alone’, or ‘embedded’ in another organization**
  The complexity – or simplicity – of a Good Neighbour Scheme may be partly a matter of size, partly of funding. But the key factor may well be whether a scheme has grown out of, or is linked to, another organization. Three of the seven examples in Oxfordshire are ‘embedded’ in another organization. The Witney scheme is run by Volunteer Link Up, a charity and company limited by guarantee; the Berinsfield and Kidlington schemes have been set up by long-established information centres. Witney is by far the most complex, in terms of the size of the operation (number of users and of volunteers), funding sources, and ‘professionalisation’ of the assessment and recording procedures. Witney has a paid coordinator and four paid part-time staff. Kidlington’s coordinator is unpaid, but she is a paid member of staff in the Information Centre where the scheme is based. This sort of complexity seems a very different operation from, say, Letcombe Regis.

We can also draw out themes from the Oxfordshire schemes. Here we consider three – history and change; the complexity of the formal/ informal relationship; and what we might call the ‘norms’ or expectations in this informal/ voluntary world.

**History and change: the process of ‘formalisation’**
It is abundantly clear that the world of the Good Neighbour Schemes is very different in the 21st century from the early beginnings of, say, the FISH scheme fifty years ago. We can sum this up as ‘formalisation’. Volunteers used to watch out for children coming home from school, run playschemes, take families and children out on trips, take food to housebound elderly people; these activities recall the informal neighbourly activity described in many community studies of
the 1950s and 1960s, or indeed in current studies of the reciprocal relations between neighbours, friends and family (neighbours look after the cat, take in the newspaper, share the ‘last teabag’; friends share intimate disasters; family look after the baby). Do Good Neighbour Schemes support, or replace, such relationships? The difference, perhaps, lies in the anxieties underpinning the requirements for public liability insurance, accountability, CRB checks. As one coordinator said, ‘We are a litigious society.’

The formal/ informal continuum

It may be helpful to ‘map’ Good Neighbour Schemes along a continuum from the most informal at one end to the most formal at the other, as measured by, say, the presence of a paid coordinator and staff; formal procedures for recruiting and checking volunteers; procedures for responding to and assessing requests for help, and for keeping records on requests and users; and the formulation of a constitution. The Oxfordshire schemes are not difficult to locate on such a continuum.

Oxfordshire County Council’s guidelines push schemes towards the more formal end of the continuum, in order to protect both users and volunteers. The award of the start-up grant, and the willingness of the Community Development Team to recommend that professionals such as GPs refer people to schemes for help, is dependent on a degree of formalization – public liability insurance and CRB checks, for instance. But there are many ambiguities. There are many informal schemes in the county operating without CRB checks or insurance; these schemes all know and trust each other, and are well used and supported; many have been running for years.

A note on ‘norms’ and expectations

The informal and voluntary world of Good Neighbour Schemes is an ambiguous ‘mix’ of formal and ‘professional’ behaviour (procedures for recruiting volunteers, for example) on the one hand; and quite different expectations and behaviour on the other. Examples of this second element stand out in the Oxfordshire case studies.

40 See appendices for Oxfordshire’s Toolkit.
One example concerns the ‘reciprocal’ nature of the relationship between volunteer and user, helper and helped. There are two vivid examples from Witney: here is one of them:

“The volunteer had got his own life back on track: he was re-established. He’d got a job and a home. He said he’d learnt more from the experience of volunteering than from anything he’d done before. Through befriending a vulnerable person, he’d grown in confidence himself. He’d assumed some responsibility: this in turn gave him a sense of purpose which enabled him to move on from his own problems. And he still takes the young man out once a week, and what’s more, they’ve become friends.”

There are also vivid examples of what is considered appropriate behaviour. A user expecting a shelf to be put up by a volunteer is perfectly within appropriate expectations, but expecting the house to be decorated is not. But perhaps the clearest and most common example concerns transport. Here is a 60 year old woman with a progressive degenerative arthritic condition, unable to drive or use public transport:

“I usually offer £5, but very often I know that the driver will either donate this to charity or offer it back to the scheme. People are very generous with their time…. I don’t know what I would do without it. Booking a taxi is very dear, I wouldn’t be able to afford to that on a regular basis. Just knowing that there’s help just a phone call away has made all the difference to me.”

This very subtly portrays both the delicacy of the relationship – the user’s gratitude is expressed in her approach; and also her understanding of the generosity expressed in the volunteer’s approach. These examples go to the heart of Good Neighbour Schemes.
CHAPTER 3
CONCLUSION: THE FUTURE AND THE BIG SOCIETY

What finally should be said by way of conclusion? Here we offer some thoughts on the future and on the notion of the ‘Big Society’.

The fundamental core of Good Neighbour Schemes – as Abrams wrote some thirty years ago – is reciprocity: that is, the mutual relationship and inter-relationship between gaining and giving. That, we must assume, will remain the core of any such schemes in the future, whatever their title.

One vision of the future is the web – perhaps not the ‘virtual community’ discussed in Chapter 1, but increasingly familiar sourcing of web-based information and networks. The function of coordinating such relationships and the resulting services might well increasingly be performed over the web. For example, Leeds LinkAge Plus project talks of ‘technically-literate mediators’ or ‘info-mediaries’, who can access information from web-based sources on behalf of less ‘web-literate’ older people. Some families already use facebook to coordinate support packages of care for family members. With the success of schemes such as the web-based www.fixmystreet.com, it is possible that Good Neighbour Schemes may move in this direction. It is not clear, however, what form of infrastructure will be required for schemes of this sort to develop and survive. Current evidence suggests that schemes such as Oxfordshire and Suffolk, described in Chapter 2 and the appendices, work best within a framework of expertise, advice, trouble-shooting and sharing of training and information provided by statutory sources in the local authority. A move in the future to web-based schemes may well require a framework of support from those committed to putting information on the web.

The vision of the future set out by the current government is different however. Cameron’s speech on the ‘big society’\(^\text{41}\) contained no reference to infrastructures of support, or the delicate web of assumptions and norms about behaviour and relationships in the informal and voluntary world. The ‘big society’ is based on assumptions that ordinary people wish to take over public

services such as schools. The extent to which this is the case, remains to be seen. Some of the coordinators interviewed for the Oxfordshire study have already expressed their scepticism:

“Quite frankly, I find it insulting. Our volunteers have already given so much time for free and now, with the Big Society, they’re making cuts to statutory services and asking Good Neighbour Schemes to pick up the pieces. It’s not acknowledging what’s gone before. It’s assuming that all these good-natured voluntary services are quite happy to take everything else on, for free!

The team responsible for Good Neighbour Schemes at Oxfordshire County Council – the Community Development Team – was really helpful when we applied for this grant, guiding us through the progress and supporting us all the way. They’ve been on hand to help and support us. Now it turns out that this team is being disbanded from the 1st April 2011 in the latest round of budget cuts. It’s not right and it’s not fair – and it’s not good news for Good Neighbour Schemes.”

We leave them with the final word.
BIBLIOGRAPHY


Age Concern and Help the Aged (2009) One voice: shaping our ageing society. Age Concern and Help the Aged. London


www.cdf.org.uk/SITE/UPLOAD/DOCUMENT/Manchester NeighbourlinessReview.pdf


IDeA (2008) *Communities- healthy, strong and prosperous: the links between the personalization and place-shaping agendas in social care and health.*

IPC (Institute of Public Care) and Oxfordshire County Council (2010) *Community Building- a literature review*. Institute of Public Care. www.ipc.brookes.ac.uk


Oldenburg, R. (1989) *The Great Good Place: cafés, coffee shops, bookstores, bars, hair salons, and other hangouts at the heart of a community*, New York: Marlowe


Pride, L. (2009) *Running a good neighbour scheme in Oxfordshire: good practice guidelines and toolkit*. Oxfordshire Community and Voluntary Action (OCVA) and Oxfordshire County Council (OCC)


Sobel, J. (2002) ‘Can we trust social capital?’ *Journal of Economic Literature*, 40. 139-54


73


APPENDIX A

Suffolk ACRE

Suffolk ACRE forms part of the Rural Community Action Network (RCAN). RCAN covers the whole of rural England through the work of 38 local member organizations, eight regional bodies and ACRE. Network members link national, regional and local policy with community action at the grassroots. The local member organizations are all independent charities, largely county-based. As local development agencies, RCAN members have been facilitating social change in rural communities for decades by providing tailored and comprehensive support to rural communities to enhance their quality of life and access to services.

Suffolk ACRE launched its Good Neighbour Scheme in July 2003 as a way of tackling social exclusion and rural isolation by creating a network of sustainable, individual Good Neighbour Schemes around the county. For each scheme a team of volunteers is raised to offer a variety of types of help. The service is offered principally to the elderly and vulnerable, although any resident can use the scheme. The services offered include befriending the elderly and lonely; giving lifts, especially to doctors surgeries and hospital appointments; minor domestic repairs (especially checking smoke alarms and changing light bulbs); help with filling forms and advocacy; help with pets (particularly during a resident’s stay in hospital) and possibly a one-off tidy-up of a garden.

Aims and objectives

- To fill any gaps in a network of care within a community and to put help within reach of every resident of a community
- Also aims to provide structured volunteering with support from Suffolk ACRE. All volunteers are subject to CRB checks in order to be able to build confidence within the scheme locally.

Suffolk ACRE Good Neighbour Schemes also encourage partnership working, for example, such as referring a client to another agency if their needs go beyond the scope of the scheme. This may be to agencies such as Meals on Wheels, Age Concern, Social Services, a Carers Organisation or other agencies.

A Good Neighbour Scheme Co-ordinator was appointed and has been responsible for developing the 20 or so schemes that are up and running around the county. Other partners include Suffolk HomeShield, the Suffolk Older people’s Strategic Partnership, Age Concern Suffolk, The Rural Coffee Caravan Information Project, The Suffolk Advocacy Forum, Mid-Suffolk Action Partnership, the Healthy Adults and Communities Sub Group of Suffolk Coastal LSP. Beneficiaries include older and vulnerable people in all the parishes served.

Funding

A start-up grant of at least £500 is sourced for each scheme, which pays for a mobile phone; public liability and group personal accident insurance; criminal record (CRB) checks on volunteers; identity cards for volunteers, publicity and stationery. Most start-up grants have been sourced from county councillors’ locality budgets but also from the Suffolk Community Safety
Office, Suffolk Coastal Community Safety Office, Mid Suffolk District Council, Forest Heath Community Safety Coordinator; Forest Heath Crime Reduction Partnership; the Adnams Charity and Community Champions. Once it is up and running, each scheme needs to be self-sustaining through fund-raising and donations.

**Key outcomes and benefits**

The key outcomes are:
- Older and vulnerable people are able to remain living in their homes as long as possible, reducing pressure on hospital and care beds
- Beneficiaries have better health and a stronger sense of wellbeing. Volunteers are mostly older people themselves and they too benefit from better health and wellbeing through being kept active and involved by the Good Neighbour Scheme
- The Good Neighbour Scheme helps to build more cohesive communities

**Case study supplied by Rural Community Action Network (RCAN)**

Suffolk ACRE’s aim is to help communities in Suffolk to identify and tackle their needs through community action, supporting community groups and voluntary organizations to undertake self-help activities and enable communities to take ownership for their own well-being. This is done via a range of schemes and projects, including:

- Rural Affordable Housing
- Good Neighbour Schemes
- Community Building (village halls)
- Social Enterprise
- Insurance
- Key Safes
- Community-led planning (parish plans)
- Funding advice/facilitation
- Transport schemes
- Training and employment services
- ICT services
- Heritage Coast Market Towns Initiative
APPENDIX B: Examples of other types of support

The Good Gym: be good, get fit!

“With aging you lose a lot of friends. It’s really sad and it does affect your quality of life. Loneliness is difficult to cope with” Joan, aged 87 (www.thegoodgym.org)

The Good Gym is an initiative currently based in the Tower Hamlets area of London and supported by:
- The Social Innovation Camp
- The Big Boost
- Think Public
- Headshift

The Good Gym recognizes that loneliness and isolation are key issues for older people in Britain. It suggests that people who want to get fit should channel the energy they usually spend at the gym towards social good (“be good, get fit”).

How it works:
The Good Gym pairs runners with isolated, less mobile people. Runners jog to the person’s house, deliver something nice, have a brief chat, then go on their way again.

Volunteers are:
- CRB checked
- Asked to offer 1 ‘run’ a week (often evenings or weekends)

The people visited by the runners are called “coaches” because they are seen to motivate people to run – for their own, as well as a wider good.

The Good Gym plans to expand across the UK.

Source: www.thegoodgym.org
Timebanking and embedded time banking

- Timebanking is a system where individuals can earn credits for time they spend helping out in the community. For every hour they spend helping elderly neighbours with their shopping, or pitching in at the community gardens, they earn a credit (assistance, or menu of incentives- vouchers)

- Timebanking recognizes and rewards people for good deeds they do while at the same time helping to build social networks and trust in the community

- An ‘embedded’ timebank is one which is hosted by a local agency like a school or housing association

- Tasks undertaken by Good Neighbour Schemes can be incorporated into Timebanking
APPENDIX C: