

The East End Community Development Alliance: A briefing

Where did the Alliance come from?

At the 2002 EECVSF AGM it was proposed that the Forum should become “a more defined organisation – aided by the employment of a dedicated worker” because there was a “need for one point of contact in the East End for the voluntary and community sector which needs to be based and anchored in the East End”. These ideas were subsequently developed into the Forum’s first Development Plan, which envisaged the Forum developing as “the anchor organisation for the community and voluntary sector in east Newcastle” and “the primary conduit for consultation with the community and voluntary sector”. However its Steering Group were unable to secure funding for its delivery - most notably from the Included Communities Fund - a problem that reflected the Forum’s relatively limited capacity to manage staff and resources.

Meanwhile evaluation of the work of HealthWORKS East suggested that its combination of Development Work, Linkworker support, and Funding controlled by a Steering Group of local residents and community-based organisations had been very effective in achieving change at a local level and was valued by local groups. Voices both within HealthWORKS and the local community and voluntary sector were suggesting that this model ought now to be extended beyond the narrow field of ‘health’.

Many of the views expressed by community and voluntary sector groups during the 2004 LNRS consultations in East Newcastle tended to support the positions of the EECVSF and HealthWORKS East as outlined above. Needs identified during the Health and Social Care Theme consultation and the Cutting the Gap consultations included:

- Support and information for local people and community groups to be supported to participate in decision making related to the planning and delivery of services.
- Increased networking opportunities and better information and participation.
- Support for the role of community groups with funding where necessary.
- Independent sources of support and funding for local community groups.
- Substantial community/voluntary sector pot to support community to meet its needs and develop cross sectoral initiatives and improve access.
- Continued funding for HealthWORKS model and Linkworker scheme.
- An improvement in the community’s role in developing local solutions to local problems.

Both HealthWORKS East and the EECVSF were therefore in a position to bid for NRF money on the basis that there was local support for their future plans. However they had developed close links since 2000 and recognised the value of working together to achieve their goals rather than compete for limited resources. An Alliance between the two organisations would be a strong candidate for funding because it could combine:

- The EECVSF's political influence and track record of representing the local community and voluntary sector

with

- HealthWORKS East's experience and expertise in developing and applying a community development model based on development work, linkworker support and funding.

Accordingly, with the approval of local residents and community and voluntary sector groups attending the HealthWORKS East 2004 Annual Meeting, a bid was developed for the creation of an East End Community Development Alliance (EECDA). In December 2004 this bid was approved for funding by the Preparing for Change Board, and the Alliance became a reality.

What will the Alliance do?

The Alliance's mission will be: "To improve the community's role in developing local solutions to local problems". Its aims are to:

- Enable community groups to participate in local planning by building on the accepted role of the EECVSF as a vehicle for community sector representation.
- Apply the expertise in community development, grants administration and the provision of local Linkworker support gained by HealthWORKS to enable community groups to address both health inequalities and the broader regeneration agenda.
- Strengthen relationships within the community sector and between community, statutory and private sector agencies.
- Provide entry-level employment for local people in the field of community development.

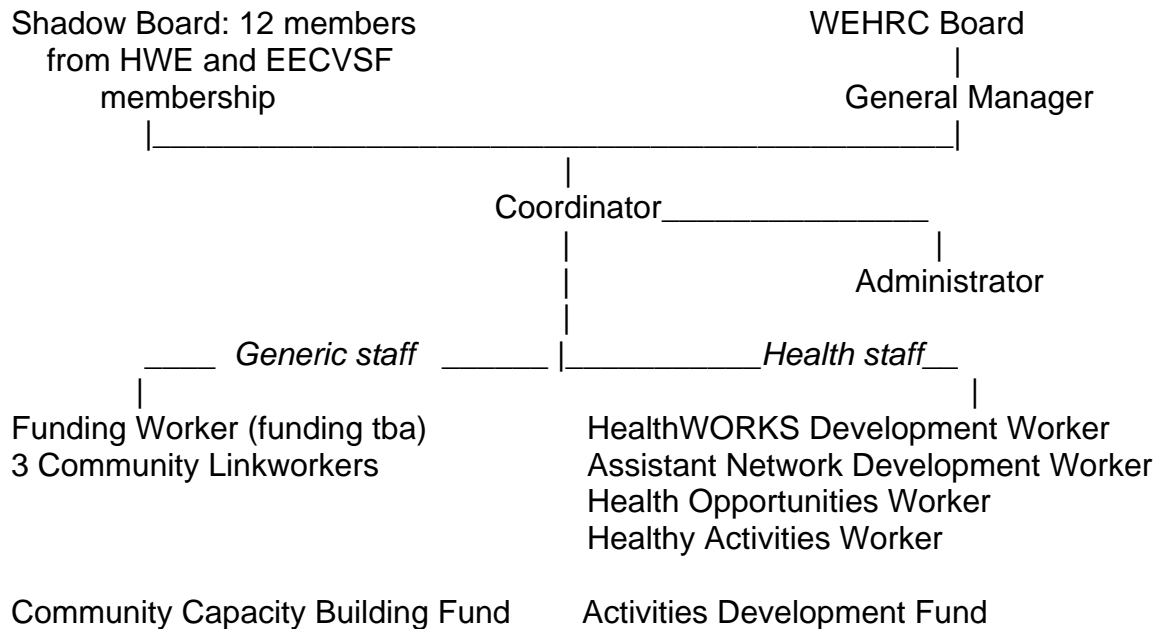
The detail of what the mission and aims will mean in practice will need to be agreed in consultation with the memberships of HealthWORKS East and the East End Community and Voluntary Sector Forum.

How will the Alliance work?

The relationship between Alliance members: The Alliance is a temporary arrangement between two key East End networks, so it is possible that the future of both the EECVSF and HealthWORKS East may be to remain as separate entities. However EECDA could be used as a springboard to create a single,

unified network if this was felt to be a good idea. There needs to be a debate within the EECVSF, within HealthWORKS East and between these organisations within the EECDA about the best way forward. The West End Health Resource Centre will also have an interest in these discussions as the host agency for both the EECDA and HealthWORKS East.

Structure, lines of accountability and roles: The EECDA will be structured as follows:



The role of the component parts of this structure will be as follows:

- The **WEHRC Board** will be responsible for managing the financial and human resources of EECDA as its host agency. They will also be responsible for managing the financial and human resources of HealthWORKS East as its host agency. They will be the accountable body responsible to EECDA and HealthWORKS' funders. These responsibilities will be met through the HealthWORKS core team, and in particular the WEHRC **General Manager** who will act as line manager for the **EECDA Coordinator**.
- The EECDA **Shadow Board** will not have formal managerial responsibilities in relation to the EECDA. In practice however they will be responsible for determining the priorities and direction of the EECDA, and ensuring accountability to the **EECVSF and HealthWORKS East membership**. They will also be responsible for determining how the **Community Capacity Building Fund** will be spent. In this they will be supported by the **EECDA Coordinator** who will be line manager of all

EECDA and HealthWORKS East staff. Supported by the EECDA
Administrator s/he will manage distinct Generic and Health Staff teams.

- The Generic team will comprise of 3 **Community Linkworkers** whose role will be to support local community groups and improve access to services and a **Funding Worker** (if appointed) to support local groups to access financial resources.
- The Health team will include a **HealthWORKS Development Worker** whose role will be to support the work of the **HealthWORKS East Steering Group** and in particular its distribution of **Activities Development Funding** to support the development of healthy living activities. It will also include an **Assistant Network Development Worker** whose role will be to develop networks around health-related issues, a **Health Opportunities Worker** whose role will be to develop engagement between health services and community groups and a **Health Activities Worker** who will develop a range of healthy living activities with local community groups.

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