

# **Communities Mental Health and Wellbeing Fund**

## **Fund Guidance**

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**Scottish Government**  
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# Communities Mental Health and Wellbeing Fund

## Fund Guidance

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**October 2021**

# Part 1: Communities Mental Health and Wellbeing Fund

## Background

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In February 2021, an additional £120 million was announced for a Recovery and Renewal Fund to ensure delivery of the commitments set out in the [Mental Health Transition and Recovery Plan](#). This funding comes in response to the mental health need arising from the pandemic, and is also intended to benefit the full agenda for mental health and wellbeing in line with the four areas of key need set out in the Plan.

As part of the Recovery and Renewal Fund, the Minister for Mental Wellbeing and Social Care announced a new Communities Mental Health and Wellbeing Fund (the Fund) for adults on 15 October 2021, with £15 million being made available in 2021- 22. This is the first year of a two-year fund to support mental health and well-being in communities across Scotland. The Fund will be distributed by Third Sector Interfaces (TSI's) to community groups and organisations. This funding reflects the importance we place on community support as part of our overall mental health infrastructure and the commitments given by Scottish Ministers to increase direct mental health investment, in both the NHS Recovery Plan and this year's Programme for Government.

Building on the focus on wellbeing and prevention in the Transition and Recovery Plan, the Fund will provide significant investment into community support for adults. This investment complements the children and young people's community wellbeing supports currently being rolled out across Scotland. It also has strong links to the Scottish Government's commitment to ensure that every GP Practice will have access to a primary care mental health and wellbeing service by 2026, providing funding for 1,000 additional dedicated staff who can help grow community mental health resilience and direct social prescribing.

This guidance outlines in more detail what the Fund is about, how it will be delivered, who can apply and how to do this.

## Fund outcomes

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The intended outcome of the Fund is to develop a culture of mental wellbeing and prevention within local communities and across Scotland with improved awareness of how we can all stay well and help ourselves and others.

The Fund seeks to contribute to the four key areas of focus from the Mental Health Transition and Recovery Plan:

- Promoting and supporting the conditions for good mental health and wellbeing at population level

- Providing accessible signposting to help, advice and support
- Providing a rapid and easily accessible response to those in distress
- Ensuring safe, effective treatment and care of people living with mental illness

The Fund also seeks to contribute to the following national outcomes from the National Performance Framework:

- We are healthy and active
- We will live in communities that are inclusive, empowered, resilient and safe
- We tackle poverty by sharing opportunities, wealth and power more equally

## Fund aims and priorities

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In line with our long term outcomes for mental health in communities, this Fund intends to provide stable investment for:

- Fostering a **strategic and preventative approach** to improving community mental health
- Supporting the **resilience of communities** and investing in their capacity to develop their own solutions, including through strong local partnerships
- Tackling the **social determinants of mental health** by targeting resources and collaborating with other initiatives to tackle poverty and inequality

The overarching aim of the Fund is to support community based initiatives that promote and develop good mental health and wellbeing and/or mitigate and protect against the impact of distress and mental ill health within the adult population, with a particular focus in 2021/22 on:

1. Tackling priority issues within the **Transition and Recovery Plan** such as suicide prevention, social isolation and loneliness, prevention and early intervention
2. Addressing the mental health **inequalities exacerbated by the pandemic** and the needs of a range of 'at risk' groups<sup>1</sup> locally
3. Supporting **small 'grass roots' community groups** and organisations to deliver such activities
4. Providing **opportunities for people to connect** with each other, build trusted relationships and revitalise communities
5. Supporting **recovery and creativity** locally by building on what is already there, what was achieved through the pandemic, and by investing in creative solutions

## Fund criteria

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The fund criteria set out the broad parameters for how funding should be allocated to community organisations. However, this is intended to be flexible in order to allow local partnership groups to identify their own priorities for spend within the terms of the fund criteria and in line with their local partnership plan (see below). Funding decisions should reflect the broad principles of the fund criteria as well as local priorities.

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<sup>1</sup> List of 'at risk' groups is outlined at in the *Equalities considerations and at risk groups* section

## Who can apply

The ambition of this Fund is to support initiatives which promote mental health and wellbeing at a small scale, grass roots, community level. It should be accessible to all groups, no matter how small or inexperienced they are. It can support both new and existing groups or projects. These do not have to have mental health and wellbeing as their main focus, but their application does have to clearly benefit the mental wellbeing of people in their community.

Applications can be accepted from a range of voluntary, 'not for profit' organisations, associations, groups and clubs or consortiums/partnerships which have a strong community focus for their activities. The range of organisations that can apply are:

- Scottish Charitable Incorporated Organisations (SCIO)
- Unincorporated Associations
- Companies Limited by Guarantee
- Trusts
- Not-for-profit company or asset locked company or Community Interest Companies (CIC)
- Cooperative and Community Benefit Societies
- Community councils

Local partnerships can also consider funding unconstituted groups, either by supporting them to be become constituted, or by providing small value grants (for example up to £2,000) for wellbeing support and capacity building purposes. Local partnerships can also consider allowing a constituted entity (that meets criteria above) to hold a grant for the unconstituted group. The TSI as grant giver would require to be satisfied with arrangements in terms of assurance around monitoring and accountability of spend.

## Type of projects we can support

The focus of the Fund is on the adult population and on projects which help whole communities and/or community groups, in turn making a difference to the lives of individuals. The adult population is considered to be those 16 and over, in that a wide range of community supports (such as an art club focusing on mental wellbeing) will be open to this age group. We recognise that there is some overlap with children and young people community support funding although that funding is focused on targeted CYP projects.

As outlined in the fund aims, it should fund community based initiatives that promote and develop good mental health and wellbeing and/or mitigate and protect against the impact of distress and mental ill health within the adult population. In addition, local partnerships should ensure that funding is allocated to initiatives which have a focus on:

- Tackling priority issues within the Transition and Recovery Plan such as suicide prevention, social isolation and loneliness, prevention and early intervention
- Addressing the mental health inequalities exacerbated by the pandemic and the needs of one or more of the 'at risk' groups locally

Local partnerships are not expected to target all these aspects within their overall funding package, but should agree which priority issues and groups they will focus on. **While the Fund can support**

**the expansion of existing activities, it is intended to provide additionality, not replacement funding.**

Projects should also have a specific community focus rather than providing regional or national coverage. Therefore, applications should be funded for initiatives based only within your local authority.

### What we can fund

We have provided some example projects in Part 3 to demonstrate the type of work that could potentially be supported through the Fund. It is not intended to support specific clinical treatment services, such as counselling, or CBT. The following list is not exhaustive and local partnership groups are expected to apply due diligence to the exact conditions they set locally – please also see Part 2 Q&A for further details.

We will fund	We cannot fund
Equipment	Contingency costs, loans, endowments or interest
One-off events	Electricity generation and feed-in tariff payment
Hall hire for community spaces	Political or religious campaigning
Small capital spend up to £10,000 (i.e.land or building projects – see details here <sup>1</sup> )	Profit-making/fundraising activities
Staff costs (noting this is a 2 year fund therefore one off or fixed term)	VAT you can reclaim
Training costs	Statutory activities
Transport	Overseas travel
Utilities/running costs	Alcohol
Volunteer expenses	
Helping people to stay safe (PPE for small gatherings/group activity)	

### How much organisations can apply for

There are no specific limits on the size of grant which can be applied for. The ambition is to ensure a broad reach across small community organisations through the distribution of smaller value grants, for example, those up to the value of £10,000. However, we anticipate that a smaller proportion of bids may be supported at a local level, for example, up to the value of £50,000.

### When organisations can apply

All local application processes should be live no later than the 30 November 2021 at which point community groups can submit applications to the TSI. We would also expect the TSI to offer information and guidance about the local Fund arrangements to those groups which may need this from the date of announcement on 15<sup>th</sup> October.

### Equalities considerations and at risk groups

Ensuring equality of access and full participation from all relevant and at risk communities is a priority. Local plans must take into account equalities considerations. This should identify

mechanisms to publicise the Fund widely, involve groups and communities from across all at risk groups and ensure provision of sufficient support to enable equality of access for generally excluded/seldom heard from communities.

Evidence shows that the pandemic has exacerbated existing mental health inequalities and has had a disproportionate impact on the mental wellbeing of a range of groups in society. Local fund allocations should ensure a focus on initiatives which are inclusive of the following priority 'at risk' groups:

*Women (particularly young women, and women and young women affected by male sexual violence); people with a long term health condition or disability; people who are or have been on the highest risk (previously shielding) list<sup>2</sup>; people from a Minority Ethnic background; refugees and those with no recourse to public funds; people facing socio-economic disadvantage; people experiencing severe and multiple disadvantage; people with diagnosed mental illness<sup>3</sup>; people affected by psychological trauma (including adverse childhood experiences); people who have experienced bereavement or loss; people disadvantaged by geographical location (particularly remote and rural areas); older people (aged 50 and above); and Lesbian, Gay, Bisexual and Transgender and Intersex (LGBTI) communities*

Where possible, applicants should outline how they will address intersectionality (i.e. multiple-marginalisation, such those experiencing both poverty and disability) and how their project specifically benefits any given community in an intersectional way. Applicants should also be asked to consider how their proposal contributes to promoting people's human rights. Consideration could be made around supporting advocacy for people at a local level to access care and help with signposting of the community supports being funded.

### Involving those with lived experience

Ideally all parts of the partnership and fund administration process should be informed by people with lived experience. In the context of this Fund, lived experience could, for example, include experience of mental health challenges, of being part of a marginalised group or of benefiting from mental wellbeing initiatives. Where possible people with lived experience should be involved from an early stage and in ongoing planning and decision making. By engaging with lived experience, better outcomes can be achieved. Some examples of the ways in which people with living experience can be empowered to develop policy and undertake projects can be found at Part 3.

## Roles and responsibilities

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The Fund will be delivered through a locally focused and co-ordinated approach, with a focus on collaboration across all processes. Local partnership groups should:

- be comprised of TSI's, Integration Authorities (via Health and Social Care Partnership Chief Officer or representative) and a range of other local partners
- build upon existing partnerships, networks and alliances - to work together to ensure support to community based organisations is directed appropriately and in a coherent way.

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<sup>2</sup> For more information on this category – please see Part 3 Examples section on the highest risk group

<sup>3</sup> As outlined earlier, the funding is not to support clinical treatment services in the community, rather to provide the broader community supports that can complement clinical care.

- prompt wider reflection on continuity of planning, action and wider engagement around how we support community mental health and wellbeing in future and align this with Primary Care

The purpose of the Fund is not primarily directed toward providing clinical interventions, but if any proposals do involve potential for clinically trained staff delivering therapeutic intervention there should be clear arrangements in place for clinical supervision and governance.

### Lead funding partners

Funds from the Scottish Government will be distributed through a grant to the 32 local TSI's across Scotland who will each act as the lead funding partner. They will work collaboratively with the other local partners, particularly with Integration Authorities (via Health and Social Care Partnership Chief Officer or representative) to establish local need and a process to distribute the Fund locally in line with the fund aims, priorities and criteria, in keeping with local strategies and priorities.

This partnership approach seeks to build on the strengths of the lead partners:

- TSI's are well positioned to provide knowledge and connections to, and capacity building support for community groups; have flexibility and agility to help timely delivery of funds to community groups, building on the good work undertaken through the emergency funding during the pandemic
- The close involvement of Integration Authorities will ensure strategic planning and coherence with existing local mental health plans and strategies and an understanding of how the wider mental health delivery infrastructure can complement community support

The Fund (and the separate grant to support TSI's administration and capacity building role – see *Funding Arrangements*) should be used to:

- **Strengthen the role and capacity of those working to** support community mental health and wellbeing, including for example local third sector organisations, small community groups etc.
- Strengthen the **learning, development and capacity building across those in receipt of this funding**
- Build wider **capacity and ensure sustainability** over time
- **Utilise an asset-based** approach to working with communities to plan and co-design learning and capacity building opportunities
- **Minimise bureaucracy** and ensure application and monitoring processes are fit for purpose, accessible and prevent delays in money reaching the communities that would benefit most
- Promote a **co-production** approach to developing local solutions for communities and individuals, encouraging recognised participants to work alongside new providers and partners from other sectors and ensuring that the voice of lived and living experience is at the forefront in all stages of the process
- Demonstrate the value of **partnership working**

The table below outlines the roles and responsibilities of the different members of the partnership groups.



Task / Role	TSI	Integration Authorities(via HSCP Chief Officer or representative)	Other partners	Scottish Government
<b>Planning</b> Assess local priorities within the scope of Fund criteria	Coordinate local plan and sharing of this with Scottish Government	Contribute - with specific input in terms of IA strategic plan and local mental health plans	Advisory – particularly equalities groups and those with living experience	Support, advise and share with National Oversight Group
<b>Seek fund applications</b>	Lead – action to promote the Fund	Contribute	Advisory	Promote Fund through existing networks
<b>Devise fund administration processes</b>	Lead	Contribute	Advisory - particularly equalities groups and those with living experience	Advise and support where needed
<b>Assess local funding applications</b>	Lead	Contribute	Advisory	No role – guidance provided sets out broad parameters of the Fund
<b>Capacity building with potential applicants</b>	Lead	Contribute	Advisory - particularly equalities groups and those with living experience	Support through Communities Mental Health and Wellbeing Network and National Oversight Group
<b>Evaluation and Monitoring</b>	Lead - devise local monitoring and report to Scottish Government	Contribute - in line with existing reporting	Advisory - particularly equalities groups and those with living experience	Collate local partnership plans; coordinate national evaluation; devise reporting templates in line with this
<b>National Oversight Group</b>	Contribute	Contribute	Contribute	Establish and support
<b>Wider networking</b>	Contribute	Contribute	Contribute	Establish Community Mental Health and Wellbeing Network and support this

### Other partners

Although the TSI's and Integration Authorities are critical partners, broad collaboration is important to ensure outcomes are inclusive and have maximum impact. TSI's should aim to build on existing partnerships and as far as it is practical and realistic, should adopt a flexible approach (varying by local priorities) to working with, involving or consulting a range of relevant bodies, such as:

- Community Planning Partnerships
- Local authority mental health leads i.e. children and young people community services leads

- Community anchor organisations
- Umbrella groups and organisations which represent particular geographies or key priority groups i.e. Minority Ethnic groups, Regional Equalities Councils, Scottish National Rural Mental Health Forum, LEADER network for Rural Scotland<sup>4</sup>
- Community Link workers
- Suicide prevention practitioners i.e. the new local suicide prevention implementation officers
- Other sectors such as culture, physical activity, heritage, green and outdoor space

In particular the TSI and local partnership should ensure that the Fund builds on and enhances local strategic plans for mental health and wellbeing – such as Health and Social Care Partnership (HSCP) mental health strategies and Community Planning Partnership plans.

### Local partnership plans for the Fund

The TSIs will coordinate the co-production of a Fund local partnership plan which should set out priorities for spend locally within the parameters of the fund criteria. The purpose of the local partnership plans is to:

- Ensure coherence of approach locally
- Tie into existing planning for mental health and community wellbeing
- Provide a strategic approach to addressing identified priorities locally in line with fund criteria
- Take account of current provision and address evidence on gaps in support
- Agree a set of outcomes for community mental health and wellbeing support locally and identify the contribution the Fund will make to these

TSIs should engage closely with HSCP Chief Officers or representatives on the plan to ensure fit with strategic plans of IJBs. The plan may be shared with integrated joint boards however given the tight timescales would not be involved in signing off of the plans.

Partnerships are also encouraged to look to new and imaginative solutions using the knowledge of those working in other sectors, where possible in order to expand the opportunities which the Fund presents for doing things differently.

The format for the local partnership plans should be decided locally, although we will provide a framework for sharing and reporting on these plans to contribute to national monitoring of local progress, narrative of achievement and highlighting any learning for future years.

In order to connect up the system at a local level, information on what has been funded through the Communities Fund and its impact (i.e. numbers using the support, impacts on individuals and so on) should be shared by each TSI with their integration authority who should update local mental health strategies and plans in line with this. To measure impact of the Fund and ensure connections are made across the system, the TSI and local partnership (where possible) should draw on local data and statistics relating to mental health and wellbeing held by General Practitioner practices

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<sup>4</sup> The National Communities Mental Health and Wellbeing Network can help provide some national support around these connections

and NHS services - such as numbers referrals for mental health difficulties, numbers of people rejected for therapeutic support.

### National Oversight Group

The Scottish Government will establish a National Oversight Group which will:

- Provide a layer of governance and oversight that brings together key stakeholders
- Make connections with other relevant national developments on mental health
- Support local partnership group proposals in line with fund criteria and local priorities and have national oversight of the gaps in provision for priority groups
- Advise on evaluation and reporting best practice and provide feedback on progress locally in line with this
- Report directly to the Minister for Mental Wellbeing and Social Care on progress
- Focus meetings on discussion of emerging risks, updates on progress of key actions, and any mitigating actions that require to be taken

### National Communities Mental Health and Wellbeing Network

The Scottish Government will support local partnership groups by developing a National Communities Mental Health and Wellbeing Network to bring together local partnerships and projects regularly to share practice, network and develop capacity.

## Funding arrangements

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Allocations to each of the 32 TSIs will be based on the NHS Scotland Resource Allocation Committee Formula (NRAC) formula, which is commonly used in mental health allocations. The details of the fund allocation will be outlined in the grant letters. Additional funding (on top of the £15 million) will also be distributed to each TSI in recognition of the substantial effort required in the administration of the fund particularly to tight timescales, and of the importance of the capacity building element of this Fund as an outcome in its own right. This funding will be provided at 7.5% of the value of the fund allocation for the TSI, with a minimum baseline payment of £10,000 for the Island TSIs.

### Fund administration

TSIs will take the lead in administering the Fund, securing input from their Integration Authority and wider partners throughout. This will involve:

- Setting in place a 'light touch' application process
- Promotion and awareness raising of the Fund
- Inviting bids from individual community groups and organisations
- Providing capacity building support to ensure access for less well developed organisations
- Considering potential of collaboration of bids and partners where possible
- Assessing bids, undertaking due diligence on applicants and making funding decisions in line with the local partnership plan and fund criteria as set out in this guide
- Issuing grant letters and managing payments appropriately to individual community groups and organisations
- Taking a lead on gathering intelligence and monitoring progress in their locality

- Reporting on distribution and impact to the National Oversight Group and Scottish Government

### Application process

Application processes can be adapted around existing local funding arrangements, such as if a community commissioning approach is being used. These arrangements and decision making structures must be representative, with good involvement of people with lived experience, and include sufficient training, expertise and knowledge to enable decision making based on objective criteria. A further priority is to ensure application processes are simple in order to enable small scale and inexperienced applicants to access funds. Examples of accessible application processes include [National Lottery Community Fund](#), [Delivering Equally Safe](#) and the [Equality and Human Rights Fund](#).

### Capacity building

TSIs, with support from wider partners, will have a key role in building capacity with the individual community groups involved, from supporting them to complete basic funding applications to providing advice, support and making connections throughout the project. To ensure funding reaches the groups who need it most, partnerships are asked to actively encourage and support less experienced small scale organisations who support mental health of priority groups. Particular care should be taken to ensure that more marginalised groups, who may not be as used to funding processes and are less able to respond quickly, are not disadvantaged.

### Assessing applications

When assessing and agreeing individual bids, it will be the responsibility of the local partnership group to look at individual applications as well as strategically at the coherence of proposals across their area, in line with their local partnership plan. Part of this oversight should include an assessment of the impact on specific groups and provision of this information through monitoring processes.

### Accountability and monitoring

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As the grant holders, TSIs will also have overall accountability for spend at a local level and will lead on reporting to national monitoring processes as well as to local evaluation. Requirements for monitoring and reporting will be communicated to TSIs in the coming weeks. These are expected to be light touch with TSIs expected to:

- Provide an interim update and end of year report
- Provide evidence of achievement against fund criteria and outcomes
- Share best practice and feedback on what has worked

A Scottish Government Fund Implementation Manager will be the named contact for the Fund (details to follow). They will lead on facilitating the Network and undertaking national monitoring of the Fund.

### Timeline

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Oct 2021	<ul style="list-style-type: none"> <li>▪ Fund announced by the Minister for Mental Wellbeing and Social Care</li> <li>▪ Fund allocation letter to TSIs outlining funding allocation to each partnership group</li> <li>▪ Guidance issued to local partnerships</li> <li>▪ Grant award letter and administration award letter to TSIs</li> <li>▪ Commencement of Fund discussion and planning by local partnership groups (to assess local need, consideration of existing plans, gap analysis)</li> <li>▪ Ongoing collaboration by local partnership groups to agree local plans</li> <li>▪ Fund monitoring process and template issued to local partnership groups</li> </ul>
Nov 2021	<ul style="list-style-type: none"> <li>▪ Local partnership groups begin to develop high level local plans for use of the Fund in their area and setting overarching aims for use of the Fund locally</li> <li>▪ National Oversight Group to supports development of local plans</li> <li>▪ Network meeting to share experiences</li> <li>▪ Fund application/assessment/distribution process finalised (TSI led)</li> <li>▪ Capacity building support for potential applicants that need this</li> <li>▪ Fund goes 'live' for community groups to start applying</li> <li>▪ Ongoing collaboration by local partnership groups around Fund decisions</li> </ul>
Dec 2021	<ul style="list-style-type: none"> <li>▪ Fund application/assessment/distribution process continued</li> <li>▪ Ongoing collaboration by local partnership groups around Fund decisions</li> <li>▪ Network meeting to share experiences/progress in setting up Fund</li> <li>▪ Finalised high level local plans (informed by early engagement around potential funded organisations) submitted to the National Oversight Group</li> <li>▪ National Oversight Group review of local plans</li> </ul>
Jan 2022	<ul style="list-style-type: none"> <li>▪ TSI to submit high level progress report on the delivery of the Fund</li> </ul>
March 2022	<ul style="list-style-type: none"> <li>▪ TSI completed allocation of all funds</li> <li>▪ TSI to submit report of spend (and evidence of impacts to date) this financial year</li> </ul>
April 2022 to March 2023	<ul style="list-style-type: none"> <li>▪ Year 2 of funding (subject to approval of the Scottish budget) – ongoing regular monitoring and reporting– note: in keeping with the Fund's timeline we would expect to see more substantial evidence of impact in 2022 to 2023</li> </ul>

## Part 2: FAQs

### 1. CONTINUATION OR RECURRING FUNDING

#### **Will there be any continuation or recurring funding?**

Yes a second year of the Fund and of the fund administration and capacity building grant to TSIs and the has been planned, subject to approval of the Scottish budget.

It should be noted that funding will be time limited and, therefore, applications to the fund should be sought for time limited projects and tests of change. Any funding towards core revenue costs will be short-term to support additional demands resulting from the COVID pandemic. In relation to core revenue costs, this should be made clear to organisations funded, who should be asked to provide details of their exit strategy to ensure ongoing funding can be found from another source.

**If there is a second year of funding, will the applicants who have received funding in year one be able to reapply for year two?**

There will be additional guidance provided regarding Year two of the Fund (which will be informed by Year 1) therefore decisions for allocation of Year 2 funds should be made in line with this.

**Will the Scottish Government priorities for the fund change in year 2?**

There will need to be consideration of Ministerial priorities and feedback from TSIs on the first round. The network and the national oversight group, informed by evaluation activity, should help inform future direction.

**Capital projects - in year 1 the maximum to apply is £10k. What will this be in year 2?**

Guidance for Year 2 will be provided (informed by Year 1), with no decisions currently made around this level of detail.

## **2. THE SIZE OF ORGANISATIONS THAT CAN APPLY TO THE FUND**

**What size of organisation can apply for the fund?**

The Communities Mental Health and Wellbeing Fund has been established to provide grants to small, grassroots community groups and organisations (i.e. voluntary or community organisations; registered charities; groups or clubs; not-for-profit companies or Community Interest Companies, and community councils).

We would expect the majority of grants in each local area will go to small to medium sized groups and organisations – with incomes ranging from under £25,000 per annum up to £1 million per annum.

**The guidance states that the majority of funding should go to organisations with an annual turnover below of £1m. Is this set in stone? How should TSIs approach this?**

The guidance sets out that the majority of funding should go to organisations under £1m to reflect the overall focus of the Fund being for smaller grassroots activity. The term ‘majority’ was intended to enable some flexibility for TSIs/local partnerships to allow some bids over this mark, as long as the work is in line with the aims of the Fund. For example, this could include national organisations, so long as they are demonstrating how they could provide a specific community based activity in your local area.

### 3. THE AMOUNT FROM THE FUND THAT CAN BE AWARDED TO RECIPIENT ORGANISATIONS

#### **What size of grant can awarded to applicants?**

This is a matter for the local TSIs and the partnership group to establish, using their knowledge of local circumstances and discretion and with reference to fulfilling the aims and terms of the Fund.

There is no set amount of money an organisation can apply for but we would not expect your local partnership group to support applications above £50,000 and we would expect the majority of funding to go towards small scale community projects, amounts of less than £10,000. The reporting expectations should be proportionate – for example, a bid for £50,000 would require further detail rather one for £500.

### 4. THE PROCESS FOR CHANNELLING MONEY TO RECIPIENTS

#### **What is the process for channelling money to recipients?**

The Fund will be granted to TSI's as a single payment. It is for the TSI and local partnership group to establish a satisfactory, light touch process for application and grant payments from the Fund to recipients, ensuring there are adequate processes in place to satisfy minimum standards of accountability and due diligence.

### 5. WHEN WILL THE GRANT BE PAID INTO TSI BANK ACCOUNTS

**To allow TSIs to plan for distribution of money to successful applicants, it would be helpful to know when the grant will be transferred to TSI bank accounts. Is there a timeline for this?**

There is a broad timescale of two weeks after signing and returning the grant letter. Most TSIs have received the money already.

### 6. WHAT HAPPENS IF THE TSI IS UNABLE TO OPEN FUNDS BY 30<sup>TH</sup> NOVEMBER

**What are the contingency plans for TSIs if they are not able to open funds by 30th November, or thoughts on how this can be managed?**

The 30 November deadline was set to ensure some national consistency, which can be used in broader communications. If a Fund will not open by 30 November, please contact Scottish Government (Ollie Glick [Oliver.Glick@gov.scot](mailto:Oliver.Glick@gov.scot))

## 7. WHEN DOES THE FUND HAVE TO BE SPENT BY

### **When does the Fund have to be spent by?**

This Fund covers financial year 2021-22 and it is important TSI's understand that they should not hold any funds allocated by the Scottish Government for 2021-22 beyond 31 March 2022. In practice this means a TSI must have dispersed the funding to agreed projects as soon as possible and by 31 March 2022 at the latest and be able to provide evidence of this through the agreed monitoring process.

It is for TSI's to manage the use of those funds by projects in accordance with the grant letter and ensure that funded projects are capable of carrying out the obligations for which they are funded. As per the Scottish Public Finance Manual rules there must be a need for the payment to projects to be made in 2021-22.

## 8. COMPLIANCE WITH PUBLIC SECTOR SPENDING RULES

### **What criteria do TSIs need to follow to ensure compliance with the guidance requirement to only distribute funding in line with the Public Sector Finance Manual?**

The funds must be distributed to funded organisations by 31 March 2022 to be compliant with the rules. However, every effort should be made to ensure funding is distributed to organisations as soon as possible this financial year, particularly given that the funds are intended to promote recovery from the pandemic and to respond to immediate needs of communities. Application deadlines should reflect these principles.

## 9. WHAT TIMESCALE DOES THE RECIPIENT ORGANISATION HAVE TO USE THE FUNDS BY

### **Once funding has been issued to a third sector group or organisation, within what timeframe does that funding has to be spent?**

A timeframe is not stipulated within the guidance document and it is a decision of the TSI/Local Partnership. However, Scottish Government expect the TSI to be able to demonstrate some outcomes in the first year, 2021-22, but would expect to see more substantial outcomes in 2022-23 and that should inform this decision.

## 10. CAN OTHER ORGANISATIONS DISTRIBUTE FUNDS ON THE TSI'S BEHALF

### **Is it legitimate for TSIs to transfer funding to another organisation who would then distribute small grants to other organisations?**

After further consideration, it is considered not appropriate for TSIs to transfer funding to another organisation for distribution. TSIs have been provided a separate grant to resource the administration of the Fund in line with the national guidance. There would be concerns with the proposed approach in terms of accountability of spend and ensuring funding decisions are made in line with fund aims and in connection with outcomes. Funding decisions should be made in line with the principles of the local partnership working



principles as set out in the guidance and this would be difficult to adopt through this approach.

## 11. CAN THE FUND BE USED FOR EXISTING PROJECTS

**Does the fund have to be used for new projects, or can it be used for expanding projects or continuing existing projects?**

This is a matter for the local TSI and partnership group to establish, using their knowledge of local circumstances and discretion and with reference to fulfilling the aims and terms of the Fund. It should be noted that whilst the Fund can support the expansion of existing activities, it is intended to provide additionality, not replacement funding.

## 12. CAN YOUNG PEOPLE BE ENGAGED TO DELIVER A PROJECT

**The fund is intended to benefit adults. If a proposal includes young people as volunteers in delivering support to adults is this still eligible?**

Yes, as long as the beneficiaries fit the funds criteria this would be eligible for support from the fund, however, the TSI and local partnership would need to ensure that where young people are involved adequate and satisfactory support and child protection measures are in place before funding has been agreed.

## 13. ARE PARENT COUNCILS LEGITIMATE RECIPIENTS OF THE FUND

**Are school Parent Councils eligible to apply for the fund? They aren't third sector orgs (as they are statutory)?**

Yes they are eligible to apply, subject to the following conditions:

Condition 1: The funded activities should meet the aims of the Fund and specifically should focus on supporting adults not children.

For information their functions are around:

- collaborating with the school in supporting children's schooling and learning;
- representing the views of parents;
- promoting and supporting contact between the school, parents, pupils, providers of nursery education and the community, and;
- communicating or reporting to the Parent Forum.

Condition 2: Any Parent Council applying to this fund should have a statutory duty to keep proper accounts, for which there may already be legal and regulatory requirements for them to do so depending on the status of the Parent Council, for example, some parent councils are registered with OSCA as a charity.

For information, Parent Councils are not statutory. Education authorities have a statutory role in establishing a parent council, however once the council is established, the education

authority does not control it, nor can it be said that a parent council acts on behalf of the education authority or a school under the authority's management in relation to which the Parent Council has been established; it acts on behalf of the parent forum, i.e. the parent of the pupils in attendance at the school.

#### 14. WHAT CAN THE FUND PAY FOR

##### **What can the Fund be used for - i.e. rent, equipment, staff costs, materials, etc.?**

The Fund is primarily focused on supporting operational and revenue costs – e.g. volunteer and one off fixed term staff costs, expenses, equipment, etc - to fulfil the activity. For this year of funding, small capital spend up to £10,000 is eligible.

#### 15. CAN THE FUND BE USED TO SUPPORT WORK DELIVERED BY THE TSI

##### **Can the fund support a TSI's own projects?**

TSI projects – including projects where the TSI is in a partnership with other groups or organisations in delivering the activity - cannot be supported through the Fund for 2021/22.

As the TSI is the lead partner for the fund in their locality there is a conflict of interest in TSI's accepting applications for the fund to support their own projects. It is crucial that the process is seen to be objective, open and fair.

We recognise that some TSIs do provide services that are relevant to the Fund aims. This approach can be reviewed for future years. However, in line with the administration grant provided to TSIs to support capacity building, we are also keen that TSIs work to support the wider third sector to fulfil the aims of the Fund.

#### 16. HOW CAN WE MANAGE CONFLICTS OF INTEREST

##### **Each TSI has a Board of Directors that also run third sector organisations. What if a director applies on behalf of their organisation? How to manage this conflict of interest?**

TSIs should consider their own governance arrangements to ensure any conflicts of interest are managed. For example, the use of an external panel. Ian Bruce (Glasgow TSI) has produced a paper for his Board which he is happy to share and which makes clear that the external panel makes the decision. TSIs are encouraged to share good practice on a range of governance challenges.

#### 17. CAN THE GRANT BE USED AS A PART OF A MATCH FUNDING PROCESS

##### **Can grants be used as a part of a match funding process?**

This is a matter for the local TSI and partnership group to establish, using their knowledge of local circumstances and discretion and with reference to fulfilling the aims and terms of the

Fund. Particular attention should be made with respect to any significant impact on timescales should match funding be pursued.

**Can an organisation use this fund to match fund another project that is already funded by Scottish Government?**

Yes, but it must be for additional activity and activities cannot be double funded.

**18. CAN CHURCHES AND RELIGIOUS BODIES APPLY FOR THE FUND**

**Promotion of religion is ruled out, does this prevent churches and other religious bodies applying?**

No, but the activity must be consistent with the aims of the fund and cannot be used to fund religious or campaigning activities.

**19. CAN COUNSELLING AND/OR OTHER THERAPEUTIC SERVICES BE SUPPORTED BY THE FUND**

**Can counselling and therapy services be supported by the fund? Is there any further guidance on what other types of therapeutic interventions (other than therapy and counselling) might be eligible? There is demand for counselling and therapy services which are not included in this fund. These are important areas, and how can they be funded?**

The funding is intended to support small scale, grassroots community projects, activities and initiatives that promote good mental health and wellbeing and/or mitigate and protect against the impact of distress and mental ill health within the adult population. The focus of the Fund is not about supporting clinical treatment services in the community – which may include counselling and CBT for instance - rather to provide a range of broader community supports that can complement clinical care. (Please see background note at the end providing context of the wider funding announcements and upcoming primary care developments in mental health).

However, we recognise that some community based complementary services as part of their offer also provide counselling, as well as other therapeutic services. Therefore, these are not excluded from the fund.

It is for the TSI and the local partnership to decide on the relevance and level of priority of the activity in respect of the aims of the fund and guidance.

Therefore it is worth bearing in mind:

the Fund is an opportunity to support a wide range of approaches to providing emotional and practical support to individuals for example peer support practices. there are other funding streams which can support counselling services in various realms (for example, the Scottish Government Survivors of Childhood Abuse Support Fund and Perinatal and Infant Mental Health Fund)

Any proposals that do involve potential for clinically trained staff delivering therapeutic interventions, there should be clear arrangements in place for clinical supervision and governance. Specifically with regards to counselling support, it should conform to agreed professional standards, such as those provided by COSCA and BACP. Formal counselling should be undertaken by a professional counsellor, acting in their specialist role, and in accordance with a strict code of ethics, which requires confidentiality, accountability and clinical supervision. The TSI needs to ensure that funded organisations are aware of these arrangements.

***Background Note: Details on recent funding and Upcoming Primary Care Developments***

Existing funding

The Transition and Recovery Plan was published in October 2020, and is supported by a £120m Recovery and Renewal fund. This will transform services, with a renewed focus on prevention and early intervention. This year, over £89m has already been allocated from the Fund. This includes:

£43m to improve the mental health care that children and young people receive, including £40m for Child and Adolescent Mental Health Services.

A further £15m to grass roots community groups via a Communities Mental Health and Wellbeing Fund for adults to help tackle the impact of social isolation, loneliness and mental health inequalities.

£4m to increase capacity in the NHS 24 Mental Health Hub, supporting a 24/7 response.

£9m to enhance Psychological Therapies, including £5 million to address waiting times this year (which allow Boards to recruit additional mental health professionals enabling more adults requiring PT to be seen. It will also allow practitioners – where appropriate - to use virtual technology to reach people in more remote locations, or those not able to attend in person.)

£5m to implement the recommendations of the Eating Disorders Review.

£4m for post-diagnostic support services for people with dementia.

Almost £2m to roll out digital innovations including online access to Cognitive Behavioural Therapy.

£1.6m to local authorities for trauma-informed services, systems and workforces.

£1.5m to address the mental health needs of patients hospitalised by Covid

£178k to support suicide prevention and self-harm.

Further allocations will be made in the coming weeks.

It is also important to note that we are investing in perinatal and infant mental health to provide mental health support for both parents and children at the earliest points in a

child's life. Since 2019, we have invested over £16m in statutory and third sector services across perinatal mental health, infant mental health, maternity/neonatal psychological support and counselling/befriending.

### Upcoming primary care developments

Scottish Government will shortly announce developments to improve the capacity of Primary Care teams to respond to mental health and wellbeing in local areas. These developments form part of 2021 manifesto commitments.

The Mental Health In Primary Care Short Life Working Group (SLWG) concluded in December 2020 and it recommended the establishment of multi-disciplinary Mental Health and Wellbeing in Primary Care Services (MHWPCS); within areas served by GP clusters, to provide assessment, advice, support and some levels of treatment for mental health, distress or wellbeing. This approach will create 1,000 new roles within multi-disciplinary teams which could include, Mental Health Nurses, Psychologists, Peer Support Workers, Enhanced Practitioners and Occupational Therapists. It will also ensure that every GP Practice has access to a Community Link Worker who, through their role, will support mental wellbeing.

The proposals are that every Integrated Authority area should have a local planning group and a plan to deliver these expanded multi-disciplinary teams. The plans should be inclusive i.e. these services are not age or condition specific and need to support CYP as well as adults to access the best supports and interventions available for them if they present to Primary Care. This investment will sit alongside the Communities Mental Health and Wellbeing Fund for adults and funding of community supports for children and young people issued through Local authorities. The plans for MHWPCS will be approved by a national oversight board with intention of seeing these teams develop and expand over a three year period to 2025.

## 20. MONITORING AND REPORTING

### **How will the Fund be monitored?**

We will require interim and year-end reports on the Fund's progress. Further information on requirements to follow.

Ongoing contact between TSI's, local partnerships and the Scottish Government will be established to support progress. TSI's and local partnership groups will be supported to participate in a National Communities Mental Health and Wellbeing Network to share progress and good practice.

Local processes should be adopted to monitor grant awards and progress. These should aim to be light touch. We would recommend reference to the good practice Harmonising Reporting template – found at: [Harmonising Reporting - Evaluation Support Scotland](#)

### **Is there an update on where we are at with a reporting framework?**

Further advice around reporting will be provided soon including templates. Further work will be done, working with the national network being set up to consider evaluation, including sharing of storytelling/showcasing best practice.

Further information to follow on the oversight group, monitoring and network information.

The first meeting of network was held on 1st December.

## Part 3: Examples

### Project examples

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Below is a selection of examples which demonstrate the *type* of projects that could be funded through the Fund. This does not mean these particular groups will be funded, rather they are illustrative and are in no way exhaustive of the type of projects that could be funded.

#### **African Women’s Network**

The project works with women from African backgrounds in Glasgow as a community that experiences disadvantage on the basis of sex and race. The project will recruit 20 women (Anti-Stigma Ambassadors) to run basic mental health sessions to demystify mental health and increase awareness of available support and to shift attitudes towards mental health from negative to positive, as opposed to being a thing of shame. This will have a confidence building aspect to it.

The Anti-stigma Ambassadors will be supported to initiate conversations in their groups and communities, exploring perspectives, challenging myths, sharing information and encouraging help seeking.

#### **Chris’s House**

Chris’s House is a “centre for help, response and intervention surrounding suicide”, and was established in Wishaw by Ann Rowan, the mother of Chris, who completed suicide at the age of 36. Chris’s House is a 24-hour non-medical crisis centre, where guests are allocated a volunteer worker who supports them through their depression and suicidal thoughts to build resilience and confidence.

The service is staffed by unpaid volunteers who come from a range of backgrounds, and are trained to provide guests with one-to-one support such as counselling and reiki sessions, risk assessments and contacts with statutory services where necessary. Staff also provide community outreach and training and a range of support groups including Loss Surrounding Suicide for those who have been affected by suicide.

Chris’s House is funded through donations and fund-raising activities from families who have had contact with the service and the general public, including the annual Charity Ball and the Walk of Hope. They also have sponsorship from a number of local businesses. Growth in demand for their services has led to a second property being opened in Midlothian.

#### **Men Matter Scotland**

Men Matter Scotland (MMS) is a peer-run charity based in Drumchapel which seeks to promote wellbeing and prevent suicide in men. They run confidential peer-to-peer support sessions and arrange referrals for men in distress where needed.

The organisation promotes activity and connection through talking groups, art sessions, bike club sessions, ice water breathing technique training and cold water exposure. Demand for their services rose rapidly after their Hub opened in February 2021 and they currently have around 700 registered members.

MMS is overseen by a Board of Trustees and supported by trained volunteers. Some of MMS's members have shared their stories on the organisation's website, giving an insight into their own life experiences and how MMS has helped them.

### **Common Wheel**

Common Wheel is a mental health charity who aim to reduce isolation, develop skills, improve mental wellbeing, and challenge stigma. Their values are Care, Positivity, Equality and Partnership. Mental illness and associated stigma may lead to loss of employment, poverty, and withdrawal from society. Conversely, unemployment and poverty are likely to exacerbate mental illness. Common Wheel aims to break this cycle.

Multi-story is a collaboration between Common Wheel and the Gartnavel Royal community. The aims are to inspire, encourage, and enable access to cultural connection and creative expression through reading and writing. Common Wheel believe this shouldn't stop just because you are in hospital.

This project has accessibility, flexibility, and collaboration at its heart. It is intended for patients, staff, friends, family, and visitors to Gartnavel Royal Hospital. The project provides resources for individuals to use on their own terms, some of which have been produced by former patients or people managing mental illness in the community. The project writer provides advice for staff supporting patients to engage with the pack or works with individuals on their own creative writing. Common Wheel are currently working on access to a library membership for e-materials for all patients and a series of authors talks.

### **Lived experience examples**

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As outlined the guidance, the ambition for this Fund is to ensure lived experience is central to the Fund. This section provides some examples of lived experience from the perspective of setting up a community group (Plus Perth), using lived experience in policy development (Homelessness and Rough Sleeping Action Group) and also lived experience approaches utilised in local areas (Dundee Healthy Minds Network).

### **PLUS Perth**

PLUS is a member led social movement charity based in Perth & Kinross and which works on challenging stigma and discrimination and recovery from mental ill-health. PLUS's members are



people who have experienced mental distress in their lives, and those who agree with the PLUS values of trust, honesty, equality, justice, love, compassion, partnership working and community spirit.

PLUS grew from a small group of individuals who had used mental health services, in response to a recognition from the Scottish Government of low levels of service user involvement. NHS Tayside are their main funder and they are led by a board of between five and eight Trustees. Members are involved in decisions relating to the priorities of the organisation and in identification of projects.

PLUS have developed a community market garden from a formerly derelict site in Perth, giving volunteering opportunities and purpose to those recovering from mental ill-health; they run a weekly lunch club to allow members to meet to discuss issues and plan events and they also host poetry, art and gardening groups. The Digital Garden section of their website allows members to share audio-visual resources including photographs, excerpts from fiction and non-fiction works, audio clips and videos. The website also offers a range of mental health resources including newsletters, blogs and book recommendations.

## **Homelessness and Rough Sleeping Action Group**

In October 2017 the Homelessness and Rough Sleeping Action Group (HARSAG) was established to provide recommendations to the Scottish Government on the actions and solutions needed to eradicate rough sleeping and transform the use of temporary accommodation in Scotland. As well as representatives from third sector homelessness organisations such as Crisis, Shelter Scotland and Simon Community, the group's *Aye We Can* lived experience work strand provided a key reference point. This work, led by Glasgow Homelessness Network (GHN, now known as Homeless Network Scotland), recognised that involvement in co-production can be empowering and would allow people from different backgrounds to be involved in different ways and for different reasons.

GHN gathered personal experiences from people with first-hand experience of homelessness through an online survey completed by 165 people from across Scotland, followed by regional discussion events held in Glasgow, Edinburgh, Aberdeen, Perth and Dumfries, alongside a set of telephone interviews. A report on the findings was published in March 2018, and HARSAG published their final recommendations in June 2018.

The involvement of people with lived experience meant that the recommendations made by HARSAG were grounded in reality and were more likely to make differences which were really needed and wanted. The Homelessness Prevention and Strategy Group (HPSG), co-chaired by Scottish Government Ministers and COSLA's Community and Wellbeing Spokesperson, used this to develop the [Ending Homelessness Together](#) high level action plan published in November 2018. The action plan, committed to carry on the collaborative and inclusive nature of HARSAG's work and specifically stated the importance of lived experience in designing and delivery effective services.

Homeless Network Scotland hosts the Change Team, a group of people with frontline and personal experience of homelessness who act as a link between decision makers and the people affected by these decisions. The Change Team is represented on a range of Scottish Government groups including HPSG, and were recently asked for input into the job description for a Homelessness Policy Team Leader. The Scottish Government Homelessness Unit has ongoing engagement with

the Change Team to ensure that the voices of people with lived experience and those working on the frontline are at the heart of our work to end homelessness. A specific commitment was made in [Housing to 2040](#) to support a secondment to the Scottish Government for someone with lived experience of homelessness and a member of HNS has recently been seconded to the Scottish Government Homelessness Unit to ensure that lived experience is embedded in policy decisions.

## **Dundee Healthy Minds Network**

Dundee Healthy Minds Network is an engagement platform for anyone in Dundee with lived experience of mental health challenges who have an interest in formally or informally getting involved in giving an opinion about statutory service running, planning and development. The network seeks to influence and change the design of mental health services and supports to reflect the views and wishes of those with lived experience of mental health challenges in Dundee.

It involves working closely with people with lived experience of mental health challenges to explore what is working well and what areas need further improvement and provides an opportunity to share your experiences and listen to the experiences of others, providing a collective voice on mental health services and supports in Dundee.

Types of Involvement:

- Being a member of Dundee Healthy Minds Network
- Attending a HMN reference panel or drop in
- Attending meetings, forums and events
- Contribute to decision making – Influence mental health plans; influence mental health service design and how support is delivered; work with others to solve problems and so on
- Taking part in research or training
- Taking part in a ‘work stream’ on a particular issue for example:
- Locality based early intervention/preventative mental health support, Accommodation with support, Mental Health / Substance Use, Support for people experiencing distress, Suicide prevention
- Varied methods of involvement include focus groups, questionnaires, discussion groups, feedback cards, being a service user representative, suggestion boxes and so on

## **Collaborative working example**

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### **Health and Social Care North Lanarkshire Community Solutions partnership programme**

Community Solutions is a partnership initiative between the [Health and Social Care Partnership North Lanarkshire](#) (HSCNL), [Voluntary Action North Lanarkshire](#) (VANL) (the local Third Sector Interface (TSI)); and the diverse, large and vibrant Community and Voluntary Sector (CVS) in North Lanarkshire. HSCNL provides a recurrent, ‘core’ investment of around £1.2 million a year, with supplementary funding where possible. Additional funding is also secured from other sources, including the Scottish Government - either directly or through national funders, the local authority or NHS. Programme governance is supported by a partnership Governance Group which reports to HSCNL and the Integrated Joint Board. VANL hosts and manages the programme, which includes

support for planning and development, management of funding awards, monitoring, evaluation and funding, and communications.

[Community Solutions](#) is a successful, cross-sector health and social care investment programme in North Lanarkshire which has been operating since 2011. The programme provides ongoing funding to over 30 community and voluntary sector (CVS) organisations and small grants to many more each year, so they are able to promote and support the health, wellbeing and inclusion of local people, especially vulnerable and equality groups such as children and young people, carers, older adults, and people with disability and/or mental health challenges.

The 'core' programme provides support and over £1.2 million annual funding to:

- Six CVS organisations to convene and facilitate local, cross-sector consortia which share information, good practice and manage a small grants fund for the local CVS
- Around 30 CVS organisations to provide services across North Lanarkshire to above priority groups on issues such as advocacy, befriending, community transport, food, hospital discharge, mental health and wellbeing

In addition, the programme secures and allocates additional funding to support the above and other issues, where possible – for example Self Directed Support. Community Solutions evaluation demonstrates that the programme is highly cost effective, with sound partnership working between the statutory and CVS which empowers and supports local people.

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<sup>i</sup> Please make sure you own the land or building, have a lease that can't be ended for five years, have a letter from the owner saying the land or building will be leased to you for at least five years, or an official letter from the owner or landlord that says you're allowed to do work on the building) - you should also think about getting planning permission for the work too.

## Further information on the 'at risk' group: People at Highest Risk from COVID-19

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This section provides further information on this group considered to be 'at risk' in terms of mental health and wellbeing:

In March 2020, people who were identified as being at highest risk of severe illness if they caught COVID-19 were added to a Shielding List and advised to stay at home and minimise all contact with others in order to protect themselves. They were advised to shield for 12 weeks until 18 June, and then for a further 6 weeks until 31 July. They were advised that they could go outdoors from 18 June alone or with someone from their own household. We asked people to take the most stringent steps to protect themselves including limiting contact with other people in their households. From the end of July when shielding was lifted, the Scottish Government continued to provide advice and support to everyone on the shielding list, mainly through letters from the Chief Medical Officer, leaflets, on-line advice\* and an SMS text messaging service. From October 2020, the Chief Medical Officer provided additional advice aligned to the 5 protection levels. In January

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2021 when Scotland went back into lockdown, everyone on the Shielding List who could not work from home was advised not to go into the workplace or use public transport until this lockdown was lifted on 26 April. In July 2021, we changed the name of the Shielding List to the Highest Risk List to reflect the fact that we were no longer advising people to shield, and everyone was advised that they could now follow the same advice as the rest of the population.

Since July 2020, our aim has been to provide information, advice and support to enable and empower people at highest risk to make their own decisions about their own daily lives and activities. However, there has been an understandably disproportionate impact on their mental health and wellbeing. There is wide evidence of people experiencing moderate to severe anxiety, higher levels of suicidal thought, struggles, some severe, with mental health, and loneliness. Although people have not been advised to shield since July 2020, we know from user research\*\* that in July 2021, 59% felt uncomfortable about Scotland moving beyond level 0; 73% felt uncomfortable about returning to work; 24% were still not meeting with others out-with their households outdoors; and, 50% not meeting with those out-with their households indoors, indicating high levels of anxiety and struggles to re-connect with people and activities.

There are around 180,000 people on the Highest Risk List, about 3% of the population. People are added to the list when they have specific cancers, severe respiratory conditions, rare diseases, are organ transplant recipients, are pregnant with heart disease, are on immunosuppression therapies, or, have liver cirrhosis, kidney disease, or have their spleen removed. GPs can also add patients at their discretion for other reasons. Around 50% of this group are over 64 years of age. There have also been children and young people on the Highest Risk List. Access to community initiatives which can provide opportunities for people who have been on the highest risk list to connect with others who have been affected by the pandemic and support their recovery through creative and local solutions has the potential to make a key contribution to addressing the mental health and wellbeing needs of this group of people.

\* [Coronavirus \(COVID-19\): advice for people at highest risk - gov.scot \(www.gov.scot\)](https://www.gov.scot/covid-19/advice-for-people-at-highest-risk)

[Covid - support if you're on the highest risk list \(previously 'the shielding list'\) - mygov.scot](https://mygov.scot/covid-19/support-if-youre-on-the-highest-risk-list)

\*\* [Coronavirus \(COVID-19\): highest risk - survey report - July 2021 - gov.scot \(www.gov.scot\)](https://www.gov.scot/covid-19/highest-risk-survey-report-july-2021)



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