



Transformations in Community Collaboration:

**Lessons from COVID-19
Champions Programmes
across London**

February 2023

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MAYOR OF LONDON



About this Report

Between 2020-2022, thousands of Londoners committed themselves as Community Champions, collaborating with local councils, NHS, and voluntary and community sector organisations to help protect their families, friends and neighbours from the effects of COVID-19.

These Community Champions programmes took many forms, and were boosted by Department for Levelling Up, Housing and Communities (DLUHC) grants for COVID Vaccine Champions (CVC) in 2021 and 2022.

In London partners including Public Health England (now Office for Health Improvement and Disparities and UK Health Security Agency), NHS England-London, London Councils and the Mayor of London came together to fund a Community Champion Coordinators programme.

Working together at a London level was so valuable that this programme now continues into the future. It ensures that local activity continues to inform regional policy and practice, supports local places to learn from each other and enables the spread of excellent practice across London.

As part of the learning from London COVID-19 Champions Co-ordinators, an external partner was commissioned to develop a compendium of case studies from each programme.

Approach

For this compendium, each local area was interviewed and a short review of their programme produced. These case studies have been reviewed and signed off by the local areas.

In total, 27 case studies were developed, documenting champions and associated community engagement activities across 30 London boroughs.

The case studies reflect activities that took place from the beginning of the COVID-19 pandemic, through to early autumn 2022, and as such are a snapshot of a moment in time.

This report documents and celebrates what happened within each London borough during these unprecedented times and provides insights and resources for the development of Community Champions programmes moving forward.

It also summarises themes and findings on the power of Community Champions as a form of two-way engagement with vulnerable and difficult-to-reach communities, both in times of crisis and in order to address systemic health inequalities over time.

References

A summary of key acronyms and DLUHC CVC grants is included in the supporting references.

Credits

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Foreword

Collaborating effectively with communities is crucial to achieving health outcomes and health equity. COVID-19 Champions programmes across London showed how important – and possible – it is for councils, the NHS and others to engage directly, openly and regularly with communities.

These Champions programmes were not new; they drew on significant work that had come before, but they were different. Using WhatsApp, Zoom and other technology was new (in part enforced by the pandemic but also reflecting the nature of how we communicate today). Champions programmes not only had a significant impact on the response to the pandemic, but they have helped transform the way that councils, the NHS and others engage with and listen to communities now and in the future.

The priorities and challenges facing us all today, including Core 20+5, the London Recovery Plan, the GP contract and more, all commit health partners to outcomes that require us to continue to develop and innovate in how we engage, collectively, with all communities across London.

The COVID-19 pandemic was an unprecedented experience for all of us. It challenged and stretched us to act in new ways, to work together like we never had before, to trust, to listen, to be humble and to be brave.

What happened in London during COVID-19?

While the worldwide collaboration that led to life-saving vaccines less than a year after the virus first appeared was breath-taking, equally inspiring and transformative was how people from all walks of life, from across neighbourhoods, communities, workplaces, faith groups, schools, and families came together to help each other.

In London thousands of people signed up to be Community Champions, COVID-19 Champions and COVID-19 Vaccine Champions. They shared vital information about COVID-19 with people in their communities and they supported people to have their COVID-19 vaccines.

In March 2021 NHS England-London, Public Health England (now UK Health Security Agency and Office of Health Improvement and Disparities), the Greater London Assembly and London Councils launched the London Covid-19 Champions Coordinators Programme.

The programmes achieved three things.

- Catalysed the development and spread of excellent Champions Programme practice across the city, with places learning from each other and coordinators feeling supported and enabled by each other.

- Established direct connection between health system leaders in London and local partners. This regular two-way discussion influenced policy, for example helping to shape the door-to-door testing that took place across the capital.
- Brought London's regional health partners together to collaborate around specific communities and community challenges.

Why learn from Champions programmes?

We know that these Champions programmes have had a profound impact on how we think about public health responses and how we work collectively as statutory bodies with communities to enable better, more equitable health. These types of conversations and approaches are critical to achieving the type of transformation that we know is needed to reduce the health inequalities that are pervasive across London.

Health services and health care, not confined to the NHS, must shape services that work for all residents in London. We need to hear, understand and apply people's day-to-day experience of managing their own health, of choosing to access services and of using the NHS and the wider

health system. This is not just a moral argument – it's also deeply pragmatic. Our current health care systems are not sustainable if long-term health inequalities remain.

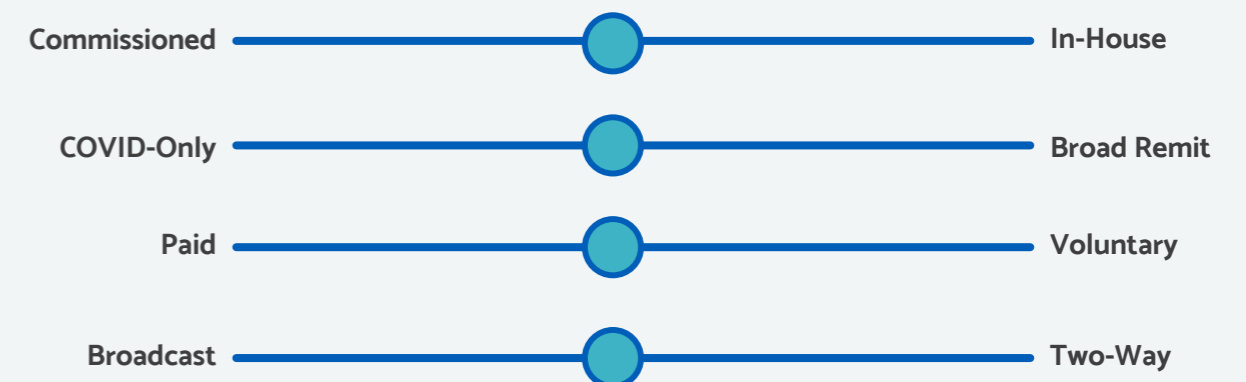
We need to learn from approaches to listening that have worked – and continue to build on those. This compendium captures the learning from Champions programmes during COVID-19.

The themes and insights drawn from this specific point in time should help inform our continued innovation and revolution of how we work – as one village – for better health.

Thank you

We thank all the Champions, the co-ordinators, their colleagues and teams for continuing to work so hard together to respond to the COVID-19 pandemic and to continue to strive for a healthy London.

Summary: Types of Champions Programmes



London Champions programmes take many forms, united in their objective to form trusted relationships with underserved and marginalised communities with the aim of improving their health and wellbeing.

Beyond that, they may be rapid, crisis-response networks that form and dissolve with changing contexts, or decades-long initiatives with stable infrastructure and funding streams. They may count dozens of people within their network, or several thousand. They may be part of a larger community engagement system or a stand-alone channel.

Within the context of Champions programmes that addressed COVID-19 and vaccine hesitancy from a public health perspective, we identified a small number of key attributes that help characterise programmes.

There is no “right” or “wrong” in these variations, but the different types of programmes do face different types of tensions and challenges, and create a range of strengths and opportunities. You’ll see these attributes for each case study.

Commissioned or In-House

At the furthest extreme, in a fully commissioned Community Champions programme, the public health department uses an umbrella or bridge organisation with strong existing relationships to the council to fund smaller voluntary and community sector organisations in activities that engage communities and residents on specific themes of interest.

At the other extreme, within fully in-house programmes, officials from public health directly recruit, communicate with, and collaborate with residents and community leaders, often informally and outside traditional statutory channels (for example via WhatsApp groups or in regular Zoom drop-in sessions.)

Along the spectrum, you may see a blend of different models and partnerships across public health and the NHS or other local authority departments and initiatives.

COVID-Only or Broader Remit

Most programmes formed during the pandemic, either directly in response to emergent needs of communities, or fuelled by funding grants from the DLUHC CVC (Department of Levelling Up, Housing and Communities Community Vaccine Champions) funding, detailed in Annex A.

However, very few of the programmes retain a COVID-only focus. Most programmes have found that high levels of “COVID fatigue” in recent times mean that the best route into conversation is via other health and wellbeing topics of interest. Vaccine messaging can then be introduced once engagement and trust has been established. In many boroughs, Community Champions programmes emerged from, or have been merged into, larger streams of work on health inequalities.

In any case, all of these programmes proved vital, even life-saving channels, of communication for communities deeply battered by COVID-19 and its associated social, economic and health challenges.

Paid or Voluntary

These are terms that appear obvious at first glance but describe a more complex landscape upon closer reflection. Who is serving whom? What is the “work” at hand? What is the fastest way to get resources to the people and places that need it the most? How does money change power dynamics and relationships?

In some cases, members of the Champions network are paid employees of statutory bodies or voluntary and community sector organisations, on a permanent or sessional basis. At the other extreme, the work of coordinating the network is essentially unfunded, bundled into other council roles, and participants receive no compensation beyond occasional expenses or access to accredited training.

Funding can take many forms, from incentives to grants, and unpaid roles often provide skills and training that lead to new opportunities. However, there can also be a risk of inappropriately offloading work to unpaid residents, to stretch budgets.

Broadcast or Two-Way

The currency that unites these programmes is information, and the urgent need for public health departments to communicate useful, trusted, actionable messages out to communities in a timely way.

Almost all Champion programmes include some type of “one-to-many” broadcast communication, whether via email, WhatsApp, or targeted advertising. Almost all Champions programmes include a feedback loop from communities into public health, to help inform both strategic priorities and tactical execution.

However, the form and format of both directions of communication can vary widely. In particular, the furthest extreme of two-way communication involves residents speaking directly to public health officials, building personal relationships with them, and seeing their input actioned by statutory bodies within days or weeks of sharing. This is compared to the slower but more structured pace of more formalised co-production, co-design and engagement strategies.

For an example of a long-standing Champions programme with a broad remit and structural funding, see Kensington and Chelsea and Westminster on page 44

For an example of a programme that emerged from COVID-19 crisis management focused on two-way communication, see Newham on page 54.

Themes and Key Findings

“We need to continue building this bridge, because we can’t build a bridge and burn it after we use it. Those bridges need to be there. And they need to be maintained. And they need to be looked after.” (Richmond-upon-Thames)

This report showcases the impact and accomplishments of Champions programmes in London during the COVID-19 pandemic, and acts as a resource for planning and implementation of future approaches moving forward.

Specifically, this is not a formal evaluation of the impact of Champions programmes, or an attempt to determine what a ‘good’ or ‘successful’ programme looks like.

However, it is impossible to speak with over 30 different Champions programme coordinators without cross-cutting themes emerging. These key findings are presented as provocations for further conversation and exploration, as public health departments continue to engage with their communities moving forward, in times of both crisis and “business as usual”.

There are also lessons from work done at a regional level. The regional programme provided a powerful tool to help London level teams understand Londoners’ concerns and offered two-way communication between the system and communities at scale. Coordinators also found the opportunity to come together,

in a space convened by a fellow coordinator, useful. For coordinators, feeling supported and part of a community was necessary as the demands of the pandemic took their toll.

Crisis creates opportunity for new ways of working

Many of these innovations wouldn’t have been possible before the pandemic. These include technological leaps such as the use of WhatsApp and Zoom. But also shifts of power, such as letting communities develop their own public health messaging and vaccine deployment strategies. Or shifts in care, creating relationships where residents can comfort public health officials during the hardest challenges of their careers, and those officials can grieve with their communities with a cup of tea in a virtual room.

Many public health professionals reported a fundamental change in the way they integrate communities and community priorities into their daily work. Similarly, many residents and grassroots organisations have had access to funding, training, visibility and influence on government

decision-making in unprecedented ways. As these programmes emerge from the crisis phase and move back into more familiar patterns of operation, the questions remain - ‘To what extent will these changes persist?’; and ‘To what extent should they?’

Trust rarely works without “boundary breaches”

While the explicit objective of a Champions programme is usually about information and behaviour change, the implicit narrative is always about trust - ‘Who has it?’ and ‘How can it be built?’

The good news is that trust CAN be built, even across people, communities, and perspectives that appear impossible to reconcile at first glance. Roma communities will organise carpools to vaccination clinics. Kids will make a video about healthcare that goes viral. Ordinary citizens will have a hunger to understand how a vaccine was developed and tested. And lives can be saved by knocking on a door and asking the right question. The harder reality is that trust isn’t built in minutes or hours, but over months and years that don’t fit neatly into project plans and funding schedules.



1. Crisis vs Sustained Operation?

The grassroots urgency for communities to engage in questions of public health waxes and wanes over time. To what extent should Champions programmes respond to this dynamic or attempt to proactively work across it?

But what also seems clear from looking across these programmes is that trust emerges in the cracks and in the boundary breaches. The new ways of working in times of crisis are part of an essential alchemy of trust. When people act outside of the usual roles, procedures, assumptions and scopes of interest, long-held beliefs and biases can be challenged.

This dynamic then creates a tension about how to integrate the trust that develops “outside” of the system back into systemic change. Can people ever truly have trust in a system, or only in individual human beings who have visibly demonstrated that they have your best interests at heart?

Measurement and quantification are a double-edged sword

Collecting metrics and stories around the outputs and outcomes of Champions programmes can be a valuable lever in securing funding and creating transparency and accountability. However, it also requires substantial resourcing to collect and analyse the data, can put disproportionate pressure on the smallest chains in the system, and



2. Existing vs New Paradigms?

Many existing models of organisation, management, content production, and evaluations aren’t fit for purpose for use with Champions programmes. How can programmes work together to create new models that work better?

the act of measurement changes the relationships it’s intending to observe.

For these reasons, many programmes choose explicitly not to measure certain activities. There is also a strong reliance on qualitative evaluation and case study evidence. But there is also a strong thirst for new methods and approaches, in particular collaborative approaches across programmes to find an effective and sustainable solution.

Video and social media are effective for engagement, but require new skills and resources

Information developed specifically by local people for local needs is a cornerstone of Champions’ work. However, the most effective content often requires specialist skills in graphic design, social media, programmatic advertising, behavioural insights, and video production.

Furthermore, there is no easy way to share content across programmes, particularly in a rapidly changing crisis environment. This has implications in terms of the resourcing required, opportunities for skill development and collaboration with local communities,



3. Consistency vs Organic Structures?

There is no single definition of a Champions programme, which creates potential for innovation and potential for confusion. How much variation should exist across programmes at a local, regional or national scale?

and also structural sharing solutions across London and beyond.

Champions can have many meanings across regions, but should have a clear meaning locally

Every interview started with the question, “what does a ‘Champions programme’ mean to you?” And the sheer variety, thoughtfulness, and inventiveness of the answers was inspiring. However, this also creates potential for confusion: with funders at the national level, in terms of ability to collaborate and communicate at the regional level, and for staff, residents and voluntary and community sector organisations at the local level.

Hopefully these case studies will begin to create a vocabulary and perspective that helps at the national and regional level, without requiring unnecessary homogenisation. However, we would caution coordinators to keep a tight hold on language and meaning at the local level, to avoid wasteful duplication, burning-out specific resources within the community, or over-generalising scope and losing connection to specific needs.

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Commisioned vs In-House

Fully commissioned programmes use a bridge organisation to fund smaller voluntary and community organisations in activities that engage residents on specific themes of interest. In-house programmes put employees and officials from the council in direct communication and collaboration with residents and community leaders, often informally. Across the spectrum, you may see a blend of different partnerships across public health and the NHS or other local authority departments and initiatives

Commisioned

Barnet
The City and Hackney
Croydon
Enfield
Haringey
Kensington and Chelsea/Westminster
Lambeth

Blended

Barking and Dagenham
Ealing
Harrow
Southwark
Wandsworth

In House

Bexley
Brent
Camden and Islington
Greenwich
Havering
Hounslow
Kingston upon Thames
Lewisham
Merton
Newham
Redbridge
Richmond upon Thames
Sutton
Tower Hamlets
Waltham Forest

COVID-Only vs Broader Remit

Most of the Community Champions programmes across London formed during the pandemic, either directly in response to emergent needs, or fuelled by the Department of Levelling Up Community Vaccine Champions (DHLUC CVC) grants in 2021 and 2022. However, few of the programmes retain a COVID-only focus. In many boroughs, Community Champions programmes emerged from, or have been merged into, larger streams of work on health inequalities. In general, Champions themselves prefer branding around “Health” rather than COVID Vaccination.

COVID-Only

Camden and Islington
Croydon
Havering
Kingston
Newham
Waltham Forest

Evolving

Barking and Dagenham
Barnet
The City and Hackney
Haringey
Hounslow
Lambeth
Merton
Redbridge
Richmond
Southwark
Tower Hamlets
Wandsworth

Broader Remit

Bexley
Brent
Ealing
Enfield
Greenwich
Harrow
Kensington and Chelsea/Westminster
Lewisham
Sutton

Paid vs Voluntary

These are terms that describe a complex landscape. In some cases, all of the members of the Champions network are paid employees of statutory bodies or voluntary and community sector organisations, either on a permanent or sessional basis or via grants. At the other extreme, the work of coordinating the network is essentially unfunded, bundled into other council roles, and participants receive no compensation beyond occasional expenses or access to accredited training.

Paid

The City and Hackney
Croydon
Haringey
Kingston
Lambeth

Blended

Barking and Dagenham
Brent
Enfield
Harrow
Havering
Hounslow
Kensington and Chelsea and Westminster
Merton
Redbridge
Southwark
Tower Hamlets
Waltham Forest

Voluntary

Bexley
Barnet
Camden and Islington
Ealing
Enfield
Greenwich
Harrow
Kensington and Chelsea/Westminster
Lewisham
Sutton

Broadcast vs Two-Way

All Champions programmes include some type of “one-to-many” broadcast communication, whether via email, WhatsApp, or paid programmatic advertising and a feedback loop back from communities into public health, to help inform both strategic priorities and tactical execution. The furthest extreme of two-way communication involves residents speaking directly to public health officials and seeing their input actioned by statutory bodies within days or weeks of sharing.

Feedback Loop

Barking and Dagenham
The City and Hackney
Croydon
Enfield
Haringey
Havering
Kensington and Chelsea/Westminster
Kingston
Redbridge

Two-Way

Barnet
Bexley
Brent
Camden and Islington
Ealing
Greenwich
Harrow
Hounslow
Lambeth
Lewisham
Merton
Newham
Richmond
Southwark
Sutton
Tower Hamlets
Waltham Forest
Wandsworth

Barking and Dagenham

“We feel it works a lot better because people can have a wider conversation, and then sort of slot the vaccination in there. Everyone has different health concerns, so if we can stop people smoking and get them healthier, we’re still winning.”

“We listened to what they wanted rather than tell[ing] them what we’re doing. Whatever tool they thought was better, we used, because it’s their community and they know how they’ll respond.”

Formation and Format

The Barking and Dagenham Community Health Champions programme formed in December 2021, with DLUHC CVC funding, and ran through August 2022.

The funding was split between in-house staff and communications resources, and four community partner grants of about £45,000 each. The grants were targeted to different cohorts, in different areas, which the data showed to have the lowest vaccine uptake. For example, one grant focused on African and Afro-Caribbean communities, while another focused on Eastern European outreach. Each funded organisation mobilised their existing volunteers, or recruited new ones, in order to create Community Health Champions.

The programme was intentionally positioned with a broad remit beyond COVID and vaccine uptake to ensure interest and engagement in communities showing significant signs of fatigue. Champions were armed with resources across a range of health concerns, which they helped design and specify.

Activities and Success Stories

Barking and Dagenham has a longstanding relationship with the British Red Cross, which created a bespoke training package for the Champions, covering topics such as tackling common misinformation, identifying barriers to access the vaccine, and being able to describe some of the facts about the COVID vaccine.

The borough also commissioned a media company to provide behavioural insight support to the programme, and which visited each Champion organisation and guided them on topics such as understanding vaccine hesitancy and the differences between unvaccinated groups, and working with the groups on which communications worked for each of them.

Working with the Champions, the borough created a toolkit of material the participating organisations could use across all of the different health initiatives, for example, materials on weight management, stopping smoking, healthy lifestyles, cancer screening and diabetes.

Delivery activities included roadshows, concerts, home visits, sermons, campaigning, workshops at Saturday schools, drop-in sessions, and youth internships.

In addition to the direct impact of the Champions on the health of their communities, significant value came from the power of networking and connecting the organisations that participated. Feedback from participating organisations confirmed that groups that would never have come together now have a working network, they felt listened to and valued, and barriers were lifted.

Monitoring, Evaluation and Lessons Learned

The programme included a formal evaluation and reporting phase during the final month. This process highlighted that every group felt the programme needed to be longer.

Reflecting on the overall programme, a key challenge was managing across different types of organisations with different capabilities. Some Champion organisations were well-rooted and very mature, with large volunteer bases that do this type of work all the time. Some needed more support and training to develop their capabilities and get started. A one-size-fits-all approach worked for nobody.

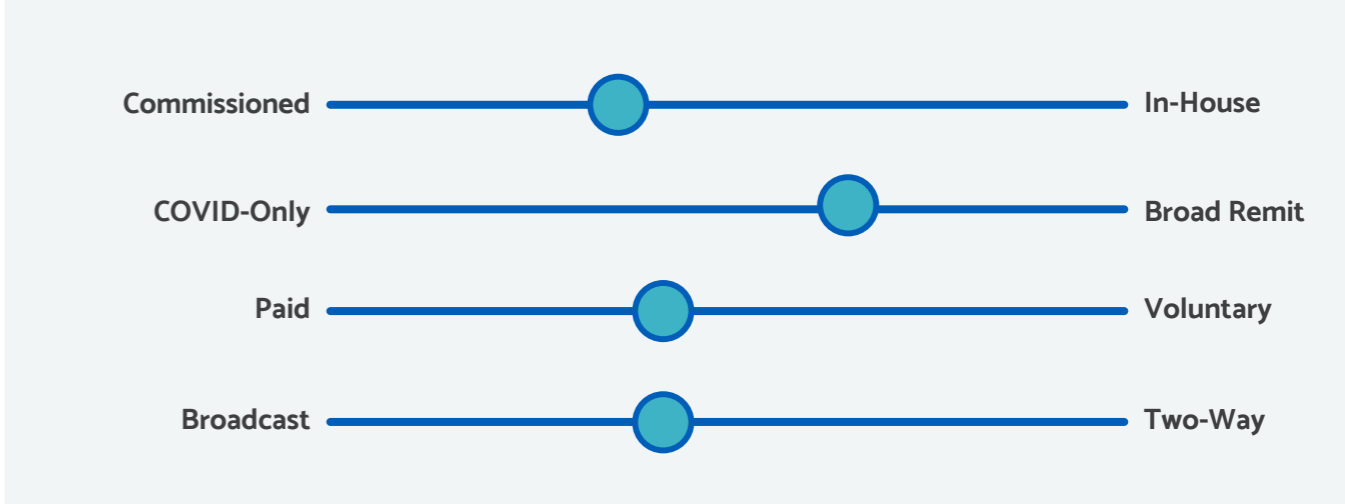
The fixed timeframe also proved to be limiting. Many Champions fed back that they couldn’t initiate hard conversations from the first moment they met someone. They needed time to build rapport and relationships before even asking people if they’d had the vaccine.

Looking Forward

Given the limited timespan of the programme, Champion organisations have been encouraged to keep going if they want to. Most have indicated that they are happy to keep promoting public health messages moving forward, as the need arises. The borough sees this as an invaluable initial investment that will continue to provide reach over time. For example, a mosque involved in the programme realised they could amplify reach via their pupil contact numbers. So, they designed an app that goes to over 2,500 households, each containing multiple people and multiple generations. Now, when public health has messaging that needs to go out, the mosque is happy to share it via the app and amplify the council’s reach.

“Trust takes time, and trust doesn’t work on a project schedule.”

“You’ve got these four different groups that probably don’t actually talk to each other that much. So, the networking between them has been really positive. Like bringing together a mosque with a church. Those relationships are now made and hopefully they will continue to help each other in the future.”



“We were very conscious that a lot of them signed up as COVID Champions, and that was their main focus, so we wanted to manage that transition quite carefully.”

“There is so much great stuff happening. And sometimes it’s just a case of people don’t know about it. To be able to give a voice to these things and provide signposting to services makes a real, longer-lasting impact for us.”

Formation and Format

Since November 2020, Barnet has developed a network of over 250 Health Champions around the borough who are interested in the health and wellbeing of their community and are free to participate as and when they want to in the programme.

Barnet public health activates these Health Champions through Groundwork London (part of the Barnet Together partnership) to disseminate information and get feedback from people on the ground.

In early 2022, COVID was dropped from the official title of the programme, and it was broadened to include five key health topics: COVID vaccinations, living with COVID, mental health, cardiovascular disease, and childhood immunisations. There was a collaboration session with the Champions to introduce these new topics, and at least one session on each of those topics with public health to put a spotlight on the services that Champions can link people to.

The council commissioned Groundwork London to run the programme. Groundwork coordinates closely with Barnet public health and the council communications team on strategic direction and the creation of information resources. The programme is overseen by Barnet’s Deputy Director of Public Health, who also amplifies awareness of the Champions across the council.

Activities and Success Stories

Originally meeting weekly, the Champions network now meets about twice a month. Attendance varies depending on the current situation and interest in the topic, but on average about 20 people attend.

Health Champions are currently offered a 45-minute, online training module of Making Every Contact Count (MECC). Moving forward, the borough is looking at creating a more interactive, intermediate version of this training, as well as extended content around the COVID vaccine, motivational interviewing skills, bereavement support, and conversation skills for topics such as stopping smoking.

Vaccine uptake in Barnet was particularly low amongst some of the most vulnerable populations, including young people, Romanians, and Black Caribbean communities, for different reasons. The Champions programme focused on creating targeted infographics, webinars and events that provided solutions to the barriers to uptake within these demographics.

In summer 2021, the Vaccine Bus was launched in Barnet in partnership with the council and CCG. The Champions were consulted on where to host the bus and other pop-up vaccination sites. The bus ran until early 2022 and the Champions

played a crucial role in sharing the bus times and locations through their networks each week.

In November 2021, the Champions held a birthday party to celebrate the first year of their programme. Other highlights include an inter-faith video created in collaboration with Barnet Multi-faith forum, available at: <https://www.youtube.com/watch?v=ZmH-VzviqJE>

Monitoring, Evaluation and Lessons Learned

The programme provides quarterly status reports on KPIs, alongside an annual report that deep dives into engagement levels and impact assessment. Surveys with Champions are timed to feed into the reporting, without bombarding them with requests. The programme is also working through a LOGIC model to look at different outcomes.

Part of the DLUHC CVC funding has been used by the borough on a grant scheme for voluntary and community sector organisations to increase uptake of the COVID vaccine within targeted communities, and there has been cross-pollination and support between the Champions and these new projects, but also a desire to keep the Champions programme separate, to motivate and recognise the work that they’ve been doing without diffusing their impact.

Looking Forward

Moving into autumn 2022, Barnet is working on renewed Champions recruitment in areas of the borough where vaccinations have been low, and where health inequalities are high. This includes a targeted push with different voluntary and community sector organisations and community groups for specific demographics, and provides an opportunity to upskill and train the Champions on areas of priority for the borough and interest for them. It’s also a time for deeper reflection and planning.

“I think that’s a bit of a challenge but a learning as well, to keep focused on what the Champions are doing, and harness that community spirit that’s very much still alive with them.”

“It’s the first time we can do some proper forward planning and not be reacting to constant changes in the situation and guidance.”



“The Champions have said to us all along that they would like to develop their public health expertise, so we’re linking up Champions with things already going on in the system (for example, Mental Health First Aid, Talk Cancer, or MECC) rather than creating a standalone programme just yet.”

“The most engaged champions are managing to keep involved. We are still able to help them and develop them and they’re able to help us, but it’s more a labour of love at the moment.”

Formation and Format

Bexley Champions was formed by the council in June 2020, bringing together over 460 individual citizens, community group representatives and local businesses. Over time, Champions have partnered with the local care partnership, NHS and public health, but it has remained a largely unfunded programme, coordinated via the council engagement manager.

From its early days, the Champions have aimed for a focus larger than the COVID-19 pandemic, encompassing general health and wellbeing, with their top three priorities being mental health, heart health and dementia. In addition, there are some Champions with a special interest in cancer awareness, particularly prostate cancer.

During the height of the pandemic, Champions met fortnightly with the Director of Public Health. Later, that dropped to monthly catch-up calls, and now the Champions stay connected via Facebook and WhatsApp. The council regularly shares messages with them and connects them to training opportunities.

Activities and Success Stories

An information bus - in association with the Bexley Accessible Transport Scheme - was a big focus for Champions in Bexley. Using the bus to share information through trusted voices in the community, via peer-to-peer conversations, was vital in getting through to people hesitating to get the vaccine.

In late 2021, the COVID bus was rewrapped and launched as a Health and Wellbeing Bus, going into areas that needed a bit more engagement, and Community Champions were very central to that. That three-month pilot is now being evaluated for effectiveness. It’s a question of whether a physical presence is the right priority for tackling health inequalities, or whether investment should be directed towards people and community development.

For example, a recent success is the Champions’ work at Slade Green Food Bank, which is in an area deeply affected by health inequalities. The food bank volunteers and staff come up against daily issues of mental health, which often created a real crisis flashpoint within the food bank. Bexley held a three-day mental health first aid course attended by Community Champions, food bank volunteers and staff. Prior to the training, there was just one person at the food bank who could act as point of contact for mental health issues. Now, the Community Champions help the food bank volunteers to relieve pressure on what was becoming a real problem in the community. This type of activity is something they are looking to replicate, where Community Champions support grassroots community groups on projects.

There also remains substantial pull from across the council to get Champions input into different projects, such as interview panels or co-production.

Monitoring, Evaluation and Lessons Learned

The council prepares a monthly report on Champions’ activities, how they’re being linked into the system, and what kinds of numbers are involved.

Throughout the pandemic, the biggest lesson learned was to take a relationship-building approach. Allowing people to have a two-way conversation and come to a decision by themselves proved most effective. For example, to maximise impact, Bexley needed to have a pop-up vaccination centre very close to where the bus and door-knocking were taking place. Gentle persuasion and information-sharing worked best when provided alongside convenient access.

Looking Forward

As the local care partnership links up public health and primary care networks, Community Champions are seen to have a pivotal role, for example in revitalising patient participation groups beyond the “usual suspects” who are used to having their voices heard.

The council is also looking to develop the keenest Community Champions to co-produce messaging and public health campaigns, and maybe even some of the services around those things. Ideally, in the future, there will be a training and development budget, along with funding for a coordinator.

“There is a real change in the way that the health care system and the council work together with communities, and Community Champions have been a part of a couple of projects, making co-production possible. So, communities, voluntary groups and other partners are being involved with service design and commissioning a lot more, suddenly. And I think Champions are a big part of that.”



Brent

“The trust building is quite significant. We started with really challenging and difficult conversations, so we had to listen a lot. And that relationship with the community has really changed. But not just with the community, but the partnership approach between the council and NHS as well. The way we’re working is so joined-up that we feel like we are working as one.”

“At the start, there was this need to deliver straight away. But actually, we just needed to listen. The community really needed their voices to be heard. We can’t just decide and go to the community. We have to go to the community and do things with them. You have to take small steps to get to that bigger goal.”

Formation and Format

Brent Community Champions is a key element of the Brent Health Matters programme, focused on tackling health inequalities across the authority. Brent Health Matters is run by a programme director and senior programme officer and reports into a joint health inequalities executive board in partnership across the local authority and ICS.

Inequalities were highlighted as a top priority in the early months of COVID-19, when public health data started to show which areas were hardest hit. The public health team set up a pilot in the two wards with the highest number of deaths. After a six-month pilot, the Champions programme expanded borough-wide, and now consists of 45-50 registered volunteers.

Alongside the Community Champions, Brent Health Matters also recruited five community coordinators, employed by the council, to work with organisations and Champions to develop local action plans within each ward. In parallel, the CCG funds clinical teams to address issues linked to inequalities, and DLUHC CVC grants were used to fund health educators. Based on a need identified by the Champions, the council has funded three rounds of community grants to support organisations encouraging vaccine uptake and supporting the health and wellbeing of their communities.

The Champions are coordinated in a hub-and-spoke arrangement, via the community coordinator for their local area, and then connected in a WhatsApp group, for both information dissemination and two-way sharing. The focus on ward-based activities means that Champions aren’t evenly spread across the council: some wards may have 15-20 Champions, while others just have a handful.

Activities and Success Stories

The Champions meet with their local community coordinator each month to help develop the local action plan, but participation is intentionally kept informal to increase accessibility. The team also offers training on topics the Champions have identified, for example, MECC. Champions’ activities range from passing along messages from Health Matters to organising joint events which take the healthcare teams out into the community. The Champions also help with content creation, for example identifying myths around the vaccine to inform the development of specific assets, and in checking translated materials to ensure they are correct and culturally appropriate.

One of the key issues highlighted by Community Champions was the difficulty of navigating health and care services. So Brent created an advice line, enabling everyone in the borough to be able to call and quickly get help accessing a service.

Another success is in Alperton, where Champions created a mental health forum in collaboration with the clinical team, and established a community garden to raise awareness.

During the first phase of the programme, many of the volunteers were unemployed, and the Champions programme was promoted as a way to develop skills and confidence towards future employment. A number of the Champions have moved onto paid roles within the council.

But above all, the biggest success is the level of trust and connection built within certain communities who have historically mistrusted statutory bodies.

Monitoring, Evaluation and Lessons Learned

Brent Health Matters has a performance dashboard, which was driven by a dedicated performance specialist, allowing the team to build up a good evidence base.

That resource ended in January 2022, and data collection started to lag. A new team will begin to support this again, underlining the significant time and resource capacity a programme like this needs to run over the long-term.

Looking Forward

Brent Health Matters recognises that this is just the start, and that tackling health inequalities will take a long time, as the drivers are structural and deeply-rooted. They have a ten-year vision, because these inequalities are going to take ten or more years to resolve.

“This is something we are quite proud of. Because that is what we said we would do, invest in the community.”

“We worked really on the dashboard because this is difficult stuff to collect or produce data for. Yes, you spoke to 1,000 people. But what does that really mean?”



Camden and Islington

Formation and Format

Shared across Camden and Islington, COVID-19 Health Champions started in September 2020 as an initiative of the bi-borough public health team, inspired and informed by COVID-19 Champions in other councils. It was strongly supported by local councillors as a way to work more closely with communities and disseminate accurate information, with a number of the councillors becoming Champions themselves.

During its operation, there were over 300 Champions, split between the two boroughs. Champions were recruited through general communication campaigns, but also targeted approaches to specific groups and communities, including ward partnership meetings and via local voluntary and community sector organisations.

The programme was staffed by public health and supported by colleagues in the NHS when appropriate. Weekly summaries of the Champions' concerns were shared with stakeholders across council communications, the North Central London Integrated Care Board (formerly known as CCG), and the public health departmental management team, to ensure that the issues Champions raised were fed into a collective response around COVID-19.

The programme was wrapped up in April 2022. COVID-19 Health Champions were informed of other ways to get and stay involved, including other Champions programmes in the boroughs. This was an intentional decision not to develop a wider focus for COVID-19 Health Champions, taking into account feedback from COVID-19 Champions, and lacking a clear vision for how that would add value over and above the other Champions programmes that were already running. In addition, DLUHC CVC funding was used to develop more targeted and hyper-local work with voluntary and community sector and community groups.

Activities and Success Stories

The programme consisted primarily of a newsletter and weekly drop-in sessions on Wednesday evenings, later changed to fortnightly as the situation improved. There was also a WhatsApp broadcast group, and an email address where Champions could submit questions or suggest topics for the next drop-in.

All Champions were offered Make Every Contact Count training, adapted to the specific topics of COVID-19 and COVID-19 transmission, and motivational interviewing training adapted for vaccination conversations. The public health team also promoted other free training to the Champions, such as Mental Health First Aid. Champions were pivotal in shaping the local vaccination rollout, feeding back their experiences and what they heard on the ground to shape the messaging and communications approach.

“We feel really proud of the relationship with the Champions that was built over time. For a lot of those people, it was the first contact that they had with the council. To build that rapport, we really got to know each other, and better understand each other. That felt like a real achievement, breaking down barriers about the council, what we do, and how we work.”

They fed back on the locations that the vaccination bus could visit to increase uptake, and became communication hubs for their communities, facilitating information sessions in community settings such as local mosques and community centres to discuss the vaccine. One of the Community Champions, Oliur Rahman, was awarded an MBE for his work with the Bangladeshi community.

Monitoring, Evaluation and Lessons Learned

The approach rested on empowering and equipping Champions with information, and then letting them disseminate it in the way they felt was most appropriate. As that looked quite different for different Champions, it made it challenging to understand how successful the programme really was. Feedback from Champions one year into the programme highlighted how much they valued coming together as a group with similar concerns and sharing their experiences along the way.

The COVID-19 Health Champions had a strong appetite for data and detailed evidence around how the vaccines had been developed so they could have confidence in the conversations they were having with residents. Another challenge emerged around the amount of resource required to deliver the programme well. It proved to be quite resource-intensive on top of existing workload. But across these challenges, a key lesson proved to be the importance and value of two-way conversation.

Looking Forward

A key focus moving forward is in reflecting on and incorporating more two-way conversations into the work of public health in Camden and Islington. The successes and learnings from the programme continue to inform the DLUHC CVC-funded hyperlocal work with voluntary and community sector partners to engage individuals and communities in conversations regarding the COVID-19 vaccine and wider public health topics.

“The engagement we’ve done previously is more one-off, about a specific issue. But COVID-19 Health Champions showed the importance of having that regular, two-way conversation over time. Having Champions constructively challenge us around what we’re doing and develop ideas together.”



The City and Hackney

“Working with VCS partners, including smaller grassroots organisations, during the pandemic improved the reach, accessibility and acceptability of public health messages. The model of Community Champions being based within a VCS organisation has given instant communication channels with clearly identified communities and service users. The groundwork that these community organisations have previously done, the trust and connections they have established and their knowledge of communities’ needs and priorities have been invaluable in assisting the Community Champions’ role.”

Formation and Format

Formed in August 2020, in response to the COVID-19 pandemic, the City and Hackney Public Health Community Champions Programme has recruited over 250 individuals, the majority of whom are based within voluntary and community sector (VCS) organisations. Participation as Champions has been largely powered by a parallel grants programme which distributed grants of between £3,000 and £20,000 to over 60 VCS organisations. Grant-funded organisations were required to appoint a member of paid staff or a volunteer as a Champion.

The initial aims were to ensure accurate, timely and accessible information relating to COVID-19 was communicated effectively amongst diverse communities, and to collate feedback about what was happening on the ground to inform the local response to the pandemic. Moving forward, Champions are identifying wider health and wellbeing priorities that are important to their communities, including mental health and wellbeing, diabetes, hypertension, and childhood immunisations.

The programme has been jointly designed and delivered by City and Hackney Public Health, Volunteer Centre Hackney (VCH), and Hackney CVS (HCVS), with day-to-day coordination provided by VCH.

Activities and Success Stories

Champions informed and supported their communities and service users in a variety of ways. For example:

- Providing, and increasing access to, up-to-date information on COVID-19, and addressing specific concerns, for example about the vaccines.
- Translating communications into community languages or more accessible English and making full use of social media, print media, videos, texts, meetings, group discussions and individual conversations.
- Assisting people in practical ways to access COVID-19 related services, for example helping people to book tests and vaccinations.
- Reassuring people who were afraid of the immigration consequences of accessing NHS services to get vaccinated and helping them register for primary health care.
- Working at a strategic level with City and Hackney Public Health and faith and business leaders in various communities to get their buy-in to the guidelines and to reassure their communities, for example that the vaccines met faith rules.
- Providing, and helping people access, mental health and emotional support, including bereavement support and social contact with others.
- Directly providing and supporting people to access physical and general health and wellbeing support, activities and other practical support.

In addition to providing information and services to their communities, service users and groups, the Champions and grant-funded organisations reported back to the Public Health Community Champions programme team about needs observed on the ground. This created a two-way communications loop that was felt to have helped improve the local response to the pandemic.

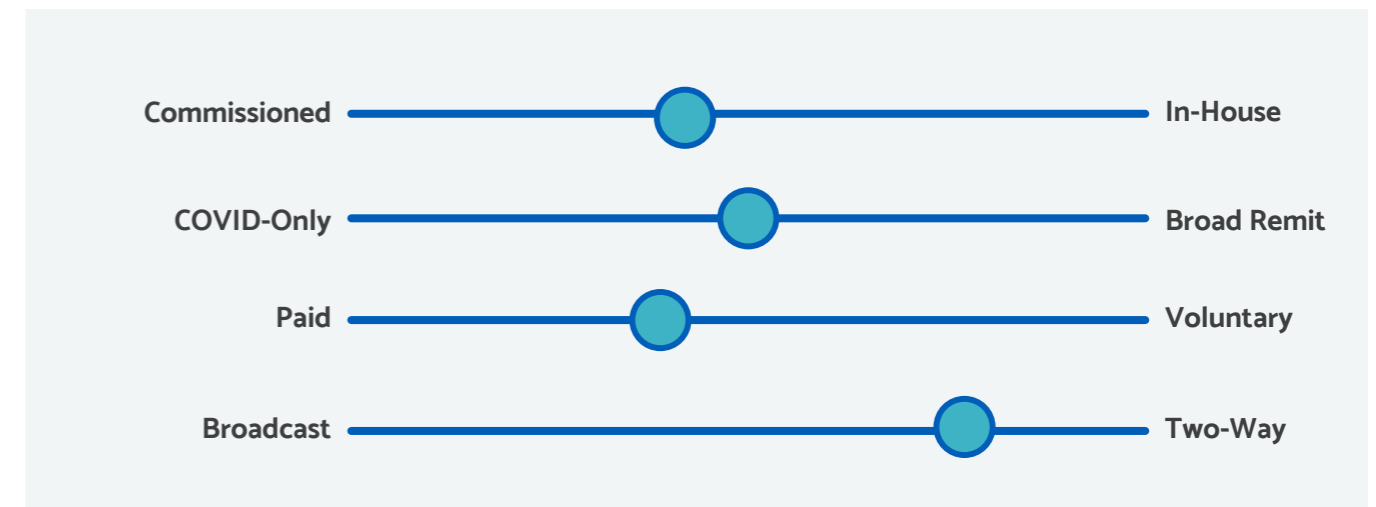
Monitoring, Evaluation and Lessons Learned

A detailed evaluation of the Programme has been carried out, and the full evaluation report is available at: <https://cityhackneyhealth.org.uk/wp-content/uploads/2022/08/The-COVID-19-Community-Information-Programme-Final-Evaluation-Report-July-2022.pdf>. The evaluation adopted a mixed-methods approach and used surveys, focus groups and interviews with Champions to complement analysis of available programme data. Challenges identified in the programme design included how Community Champion activity could be measured in a way that is proportionate and doesn't act as a barrier to engagement. Providing accessible training and support for Community Champions, including facilitating peer support and partnership-building opportunities, has been a key success of the programme.

Looking Forward

COVID-19 exposed and exacerbated pre-existing inequalities, and the evidence of programme impact demonstrates the importance and value of this type of approach in addressing long-standing health inequalities. Looking forward, the team aims to continue to build on the successes of the programme and apply the learning to wider health and wellbeing issues. Champions are identifying health topics that are a priority in their communities and working in partnership with statutory sector partners to co-design and deliver health interventions, and inform the development of services.

“Challenges around COVID-19 messaging were interrelated and layered, including poverty, disability, language, digital exclusion and some distrust in the vaccine and statutory organisations. As time went on, many people were said to have tired of the COVID-19 messaging, or felt it was less relevant as their lives had become so limited. It then proved more effective to cover COVID-19 information and guidance indirectly by embedding these in other activities and events.”



Formation and Format

Croydon's Champions programme throughout COVID has focused on commissioned projects within the voluntary and community sector, steadily expanding to a larger number of smaller, more grassroots organisations.

Efforts started with six projects with larger organisations in 2020 and 2021, working to support communities that have been disproportionately impacted by COVID-19. In 2022, DLUHC CVC funding was used to commission 31 grassroots projects that run through the end of the year, to upskill people to have better conversations about the vaccine. For example, participating groups include a drama group for children and a pastor producing a podcast for his congregation.

In addition to the funded Champions projects, the public health team has been running a vaccination van, which started as a six-week pilot in March 2022 and was extended through the end of September. They have also created a vaccine hesitancy toolkit and targeted social media campaigns based on community engagement.

Activities and Success Stories

The organisations receiving the latest round of funding have had the opportunity to attend training days, which explain how the vaccine works, bust common myths, and provide Q and A with clinical professionals. The training has received very positive feedback, with participants commenting that it fills the gap between content that is either too complex or too simple to be meaningful. Over 100 people have been trained to date, largely frontline staff from participating organisations, who have also agreed to receive ongoing emails from public health initiatives. The Vax Van service ran from the beginning of April 2022 to the end of October 2022. During this time it delivered 2,662 vaccines.

The public health team ran a survey in schools about the vaccine and created a TikTok campaign featuring a young Nigerian doctor who appeared on BBC Junior Doctors and who was mentioned by several of the survey respondents. The campaign directly addresses topics raised in the survey, including the vaccine's effects on fertility, how the vaccine works, and how it was developed so quickly.

Monitoring, Evaluation and Lessons Learned

Participating organisations provide monthly reports to the council, documenting activities taking place. At the end of the programme, they've been asked to provide case studies and end-of-project reports. In addition, the team has mapped geographic areas in which interventions are taking place by postcode and will look back on vaccine uptake over this period of time. They expect the impact to be small, based on the size of the groups participating, but believe it's important to compare the trend in neighbourhoods where there has been intervention.

The Community Vaccine Champion Project was focused on grassroots organisations, but recognised the value of conversations had on the high street, and in places such as barber shops. Businesses were difficult to include in the funded-projects scheme, but public health colleagues working in the mental health space are exploring how to equip high street assets with the skills to have conversations about mental health moving forward.

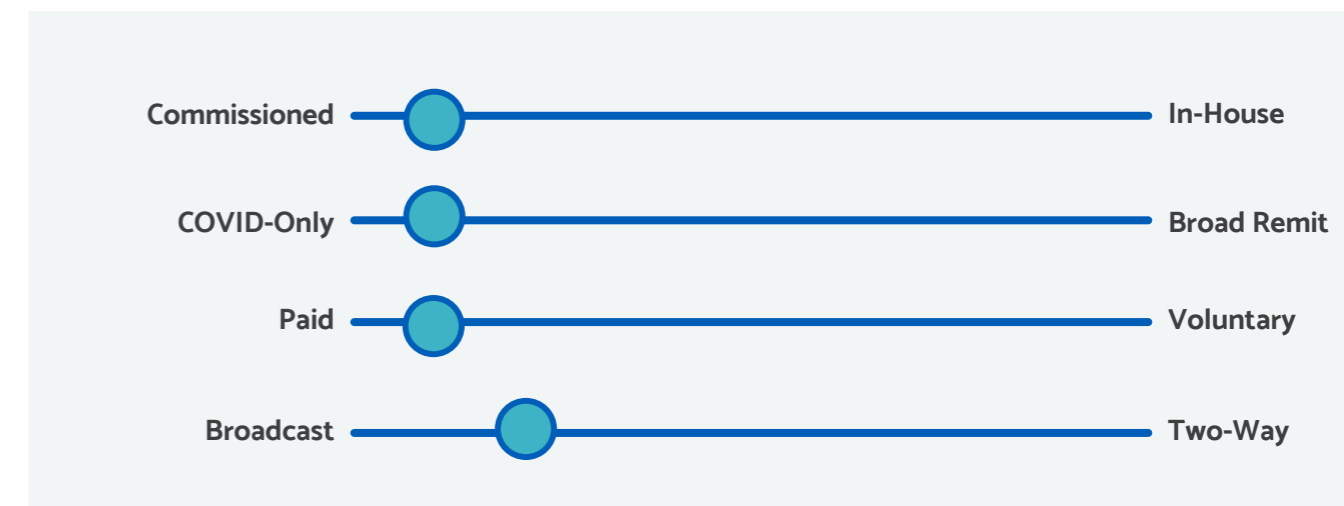
Another learning is that not everybody who is vulnerable is connected to a community in the traditional sense, such as an ethnic or faith community. For example, a woman who had recently moved into the borough only went to the Job Centre. So, the team are investigating the role of places like Job Centres and food banks as a source of Community Champions or a point of targeted intervention.

Looking Forward

Although there isn't funding for Champions project grants after December 2022, Croydon is hoping to keep the network alive, as Champions are interested to receive further training on a range of topics and help disseminate messaging on other public health initiatives.

At the end of the year, the project reports will be shared across the public health team to showcase the work they've done and consider other areas where Champions might have an impact. The One Croydon Alliance, which is a partnership between the NHS, Croydon Council and Age UK Croydon, which aims to improve access to health and care services, is developing six community partnership hubs across the borough. Part of the remit of the hubs will be to coordinate and support community engagement and development in their locality. It will be important to transfer the learning and existing engagement via COVID and vaccines into these partnerships.

“My reflection is that this is what these Champions can do, they get information out to their communities. And I think that if you're just expecting people to follow the council on social media, that's not really going to be effective. For us, this is an opportunity to develop these Champions, who've already got that engagement, and they're already doing these projects, and there's so much good learning.”



Ealing

“We’re looking at how we can make sure we offer support to both those types of Champions, and potentially more support to the ones that don’t have an organisational framework around them.”

“I have to say that I think the reason the youth programme has been so successful is really down to the youth worker who’s leading it. He’s got an amazing relationship with the young people and built a team around him. I don’t think the programme would be working that way that it is without him and his twenty years of experience.”

Formation and Format

Ealing started to develop its Champions programme in 2022, using the DLUHC CVC funding to mobilise a range of new and existing relationships into a structured framework. The Community Champions programme is now a permanent resource for the council- and borough-based partnership, and it launched in October 2022 with 26 new Community Champions recruited thus far. Ealing is looking to both individual residents and representatives of local organisations to join as Champions.

The programme has built on the work of a consortium of voluntary sector organisations, which was commissioned during the pandemic to promote messages around COVID-19, including myth-busting, as well as keeping safe and healthy. Ealing used a planning phase to listen to feedback from its communities, participating organisations, and NHS partners, and to learn from other London Champions programmes. This has helped design a holistic programme, rather than a COVID- or vaccine-specific programme. Feedback indicates high levels of vaccine fatigue in the community, but significant interest in mental health issues and supporting the cost-of-living crisis. This broader remit aligns with the aims of the programme, which are to enable Champions to use their informal networks, local connections, lived experience and knowledge to facilitate a two-way conversation with the council and partners. There is a strong focus on developing community leaders and building better relationships with trusted individuals within communities of interest in Ealing.

Ealing’s young people’s Champions programme, which evolved from some previous research amongst young people on vaccine hesitancy, has been running separately for a little longer than the adults programme. Ealing has now got 15 Youth Champions and their programme is coordinated by a specialist outreach worker to have a focus on mental health. Initially trained as action researchers, the Youth Champions have been organising events, designing merchandise, and working with community organisations, barbershops, and schools to address the concerns and worries of young people. They have created their own brand, and recently launched a film capturing some of the causes of mental health challenges in young people.

Activities and Success Stories

Part of the DLUHC CVC funding has been used to develop capacity within the community engagement team, particularly in working with voluntary sector organisations. A new staff member has been focussing on helping smaller organisations share resources, work together and be able to successfully bid for funding.

The team has been compiling a compendium of volunteer organisations and creating a bank of shared contacts. This process is helping to identify people willing

to be Community Champions, particularly from the communities most affected by inequalities, and recruitment to the programme is ongoing. Ealing is also undertaking a training needs analysis with the new Community Champions, which will be used to develop the ongoing programme of support and training on offer.

Monitoring, Evaluation and Lessons Learned

Ealing has successfully acquired Arts and Humanities Research Council funding for a suite of research activities in collaboration with the Institute of Development Studies, which will look at partnership working in the Integrated Care System on health equity. This grant will enable a certain number of peer researchers to be trained and embedded in various health equity initiatives of the borough-based partnership.

One of the initiatives is the Community Champions programme, and as such the evaluation of the programme will be undertaken by a number of the Champions themselves being trained as peer researchers. This evaluation will focus on understanding the lived experience and impact of Community Champions, including how the programme could enhance its impact.

Looking Forward

The Champions programme is emerging at a time in which Ealing is challenging itself on best practice in community engagement and methods of co-production, on improving race equality through responses to its Race Equality Commission, and system-wide approaches to tackling health inequalities through a new Health and Wellbeing Strategy for 2022-2027. Both the young people’s and adults’ Community Champions programmes are seen as evolving programmes, but ones that are essential components of these improved ways of working for Ealing.

“We’re developing our health and wellbeing strategy for 2022-2027 as well. And we are looking at all of the kinds of ways we can engage with the community, to hear their voices to help shape the strategy beyond the board. So, there are many things that we are doing that will help us learn what’s the best way to involve residents. Champions is one element of that.”



“It’s really interesting to see people forming connections in the chat [during network meetings] and then going on to apply for funding together or connecting their services in a complementary way. It’s getting people out of being in silos and into useful relationships with other service providers. That’s where I think the real growth and change is going to be visible.”

Formation and Format

Enfield Health Champions is a network of over 60 individuals, who are employees or long-term volunteers of voluntary and community sector organisations, facilitated by Enfield Voluntary Action (EVA). After a small pilot, the programme was commissioned in 2019 with National Lottery Funding, which has been extended to 2023.

The overall objective is to form a cohort of people within voluntary sector organisations who understand public health messaging and can be a trusted voice in their communities to influence health behaviours. It also creates an opportunity for Champions to engage with leaders in the statutory system (including the local authority and NHS) and influence the strategic development of policy and services to work better for their communities.

During the peak of the COVID crisis, the programme slowed down to allow organisations to focus inward and on the immediate issues of the pandemic and its impact on their stakeholders and communities, but it’s now reactivating around initiatives to reduce health inequalities. Specifically, additional funding in 2021 from the North Central London Integrated Care Partnership has been used to increase the reach of the programme to targeted wards, communities and demographics around factors that influence childhood obesity.

Enfield Health Champions receive 3.5 days of accredited training on influencing health behaviours and Making Every Conversation Count (MECC). Champions have also been offered additional two-day training in mental health first aid.

In return, Champions are expected to attend quarterly network meetings. Members of the network are also eligible to apply for small grants towards outreach that wouldn’t normally be funded by the NHS or public health.

Activities and Success Stories

A key success has been the creation of a steering group for the programme that puts Champions in dialogue with strategic leadership in the statutory system. Additional training for the Champions on the steering group has been planned for 2023, and they have been given the opportunity to represent their work to a wider audience and understand it as part of a bigger picture.

Another positive consequence of the Champions has been the use of network meetings to create organic partnerships across participating organisations.

Monitoring, Evaluation and Lessons Learned

Formal evaluation of the programme begins in 2023 as part of the National Lottery funding. In the interim, most key lessons have been around how to keep Champions engaged over the long-term and over a range of health issues. Free, accredited training is a big draw for Champions and their voluntary sector organisations.

However, ongoing engagement can be more challenging. To help address this, Champions are now required to apply with their manager’s support, and to agree a short memorandum of understanding with the programme. Creating a few small barriers up-front helps ensure people have considered their commitment to the programme moving forward.

The programme has also learned about how to structure messaging around public health topics such as COVID, vaccinations and health inequalities to avoid the jargon that’s used in the system, but which is meaningless to the people the programme is trying to reach.

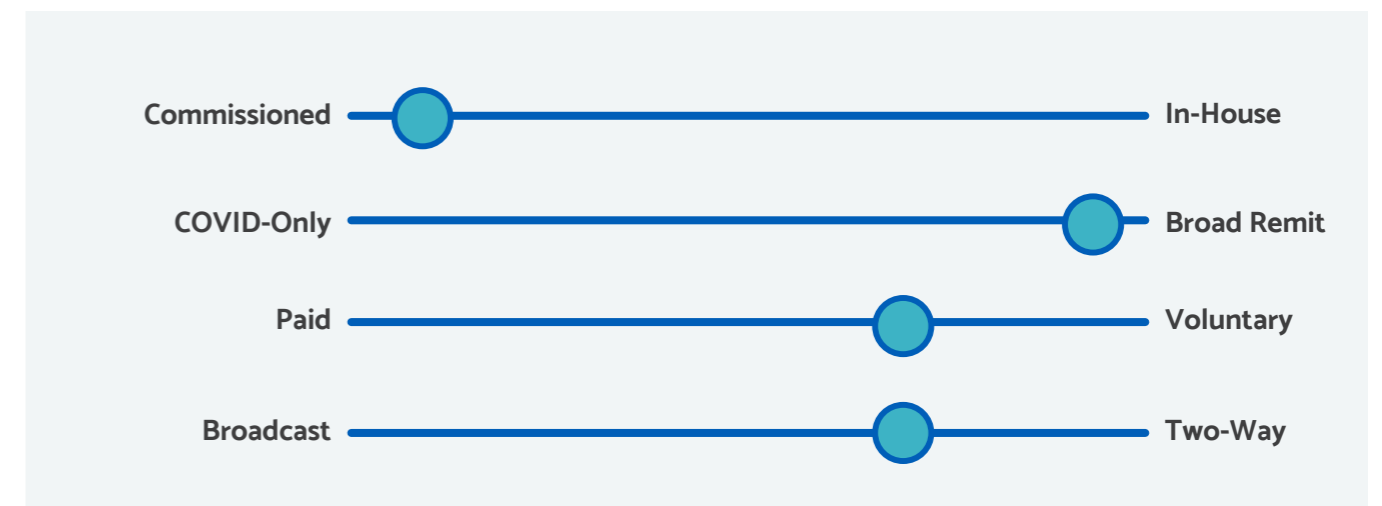
COVID also highlighted the need for rapid, scalable communications systems across the network that don’t rely on one-to-one outreach from the coordinator. As the programme grows, it needs to use technology and digital communications more effectively to disseminate knowledge across silos and remove bottlenecks to opportunities.

Looking Forward

The team underlines that Champions programmes are not a magic bullet but that they are a crucial connection between statutory services, the voluntary sector, and individuals.

“It’s not easy. But people within the statutory system who have influence and leverage have started to actually understand how the voluntary sector works and rather than thinking in terms of service delivery on spreadsheets, they start to understand that residents are individuals and each VCS is quite individual, too.”

“The ‘what’s in it for me’ factor had to be realistically considered. It helped, explicitly saying, ‘Look, we’ve given you this training. The individual gains continued professional development. The organisation has benefited from their increased knowledge and being part of the network. And now you can access more funding. We need you to be able to engage with citizens.’”



“It’s been a great collaboration and team. I feel lucky we came together to collaborate and support each other. We would check each other’s messages that we were sending out. But also checking in on each other. It was great. But what was most important for both of us wasn’t what the organisation was trying to achieve. It was about ensuring that the people, the residents, had the information they needed, knew where to go and who to trust. We’d knock on one door and they’d meet both of us.”

Formation and Format

The Royal Greenwich Community Champions programme started in autumn 2020 as a partnership between the public health team at the Royal Borough of Greenwich and the South East London NHS. It spans three levels of participation:

- Anybody living in Royal Greenwich can opt in to receive emails or WhatsApp messages and cascade the information.
- Nine communities of interest, such as Nepalese and Somalis, within Greenwich have been identified as needing more help and have Champions from within those communities involved “hands-on” to ensure they receive information specifically designed for them.
- Seven geographic areas have designated Neighbourhood Champions, a coordinator on the public health team and funds available to small community groups in the area responding to neighbourhood needs. These grants were decided via community voting days.

Initially focused on COVID-19, the programme now enables accurate and valuable health and wellbeing information to reach more widely into communities through more organic community channels.

The programme was formed when the NHS and public health teams discovered they both wanted to create a Champions programme and recognised the need to access their communities directly during the pandemic. Thoughtful division of responsibility enabled the organisations to balance the load while still respecting data privacy boundaries.

Activities and Success Stories

During the height of the pandemic, in addition to email and WhatsApp, the programme held webinars every other week, with Q and A. Champions were also offered MEOC and COVID vaccination training. Champions would support sharing information about door-knocking campaigns tied to nearby vaccination clinics – a number even came out door-knocking with the teams. By doing this, Champions were able to show residents exactly where to go and made them feel safe and comfortable to get their vaccine.

The team is particularly proud of Champions who have developed and extended their involvement over time. For example, one woman started as a Community Champion and vaccination centre volunteer, and then applied for and now works as a Neighbourhood Champion Coordinator. Others came together to receive small community grants. These projects have just begun, and their momentum and impact will continue to grow as they evolve and change over time.

The Champions met on 14 July 2022 as a thank you and to discuss and identify ways

for the programme to evolve and move forward. This was also the first opportunity for many of the Champions to meet in person and celebrate. A video was made to document the event and people’s experiences of participating in the programme, which can be viewed at: <https://www.royalgreenwich.gov.uk/communitychampions>.

Monitoring, Evaluation and Lessons Learned

A research evaluation and report on the programme was commissioned to identify insights and needs from the community. One key learning was the difficulty in engaging younger people, and the team is exploring the power of social media; for example, younger Champions have used TikTok and Instagram to great effect.

It’s estimated that the borough-wide Community Champions network is reaching more than 20,000 residents and creating connections that bring benefits and create opportunities to work differently and collaborate with communities.

Looking Forward

A survey in 2021 and recent feedback from Champions shows widespread enthusiasm for moving forward. Champions are proactively volunteering to help with the upcoming flu and booster vaccinations. The team are collecting ideas and working with a steering group from across the NHS, local authority, voluntary sector, and the Champions themselves to explore new ways forward. The intention is that the Royal Greenwich Community Champions remain a core means by which RBG Public Health and the South East London NHS communicate directly with residents around health and wellbeing, building on the effective work delivered so far. With a more neighbourhood-based way of thinking, working with and developing ideas with Community Champions will continue to be key.

“I’m extremely proud of the diverse group that we’ve created in our Community Champions team. In the past, we’ve generally attracted people from a similar walk of life for such a programme. Now we have a more representative group inputting their voice. They are growing in confidence too - coming to us with brilliant ideas of how to spread the message and engage with more people.”



Haringey

“Public health could develop material in different languages but didn’t have the networks to ensure the materials reached the right people. Link Workers had the WhatsApp groups, the newsletters, the Facebook groups already – so once they were trained and equipped to dispel the myths and misconceptions, they could point people in the right direction to make an informed decision. The message was constantly changing, so it was very much a dynamic and brilliant initiative.”

“Why would we think that one model or solution could work for everybody? We’ve got the Spurs stadium, but a massive event could be inaccessible to so many people. What we need to do is actually embed all of these activities and services into our communities.”

Formation and Format

In order to mobilise quickly and effectively within existing relationships and governance structures, Haringey commissioned a team of COVID Community Link Workers with existing networks into their communities. Haringey used data to identify groups where vaccine uptake was particularly low and used their VCS strategic partner, Bridge Renewal Trust, to employ Community Link Workers on a sessional basis.

At the peak of the programme, there were ten Link Workers, each providing about 18 hours of support each week. Their role was to develop and cascade messaging coming from the wider public health campaign to their communities. They were provided with training and the weekly communications messaging. Then they created content in their own languages, to address major concerns and barriers for their communities, and were free to distribute it and engage their communities in whatever way would work best.

For the time being, the programme has come to a natural end. Interest may return with the new NHS ICB and the winter resilience initiative to commission Link Workers again.

Activities and Success Stories

Some Link Workers would leaflet or create videos. Others would host community webinars with clinicians who spoke the community’s language. Public health and clinicians visited Bulgarian Saturday school to engage parents, and also food banks. Other innovative outreach occurred with workers on construction sites and with Bulgarian-speaking sex workers in the area.

Funds also supported a vaccine bus during late 2021 and early 2022, with an affiliated outreach team. The bus was strategically positioned in high footfall locations and areas with lower vaccination uptake.

Public health quickly learned that people need to receive the vaccine message as part of other health priorities. This inspired public health to partner with a local, Black-led voluntary sector organisation to create a Black Caribbean and African Health and Wellbeing event in November 2021. About 500 people attended, supported by 13 different organisations and local health services and practitioners, combining health and wellness messaging, access to an array of services and the vaccine bus.

Monitoring, Evaluation and Lessons Learned

Link Workers found it much more effective to have clinicians who speak the language participating in events, versus using interpreters. They also found it difficult to engage local businesses, which were hesitant to be perceived as pro-vaccine and potentially impact their business in a divisive situation.

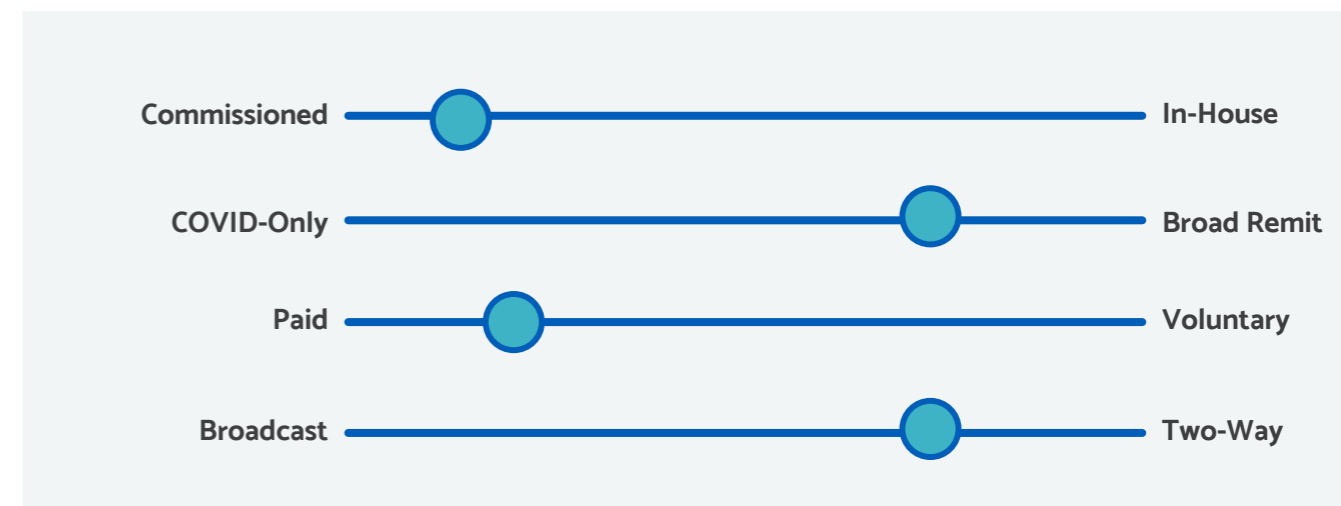
In general, the Link Workers learned that non-English speaking communities preferred vaccination clinics to the bus, whereas Black communities liked having the bus at community events and in their neighbourhoods.

Looking Forward

The council is looking at wider community engagement and Champions infrastructure, developing networks comprising members of specific communities as well as VCS organisations, councillors, and public health to have conversations around the needs of particular populations, including Somali, Bulgarian, Polish, Turkish and Kurdish communities.

There is also a focus on hyperlocal and micro-community focused events within the Black communities of Haringey. There are about eight different events planned this autumn, targeting the varied needs and interests of the Black-Caribbean, Black African, Portuguese-speaking, and Spanish speaking communities, as well as young men, and older “Windrush” generations.

“It feels as if we’ve moved away from a traditional public health approach. We’ve tried so many things that we never would have considered before. Looking at inequalities, using data, listening to people, partnering with VCSs, all of this has trickled through to business-as-usual. And this is all a legacy from the COVID vaccine work.”



Harrow

“It was an opportunity to tell the community directly what was happening, the precautions they needed to be taking, and explain the decisions the authority was trying to make on their behalf with the data we had. We were surprised by how many people were joining and how useful they found it. They felt that we were on their side. It became an insight into local government and being right at the middle of it. They trust us and have seen how we work at the height of an emergency, and now we’re using that to build up engagement around inequalities.”

Formation and Format

The heart of Harrow’s Champions programme is the weekly Community Touchpoint Meeting. During the height of the pandemic, a series of grants were distributed to community groups via the authority’s CVS infrastructure. A condition of funding was attending the Thursday morning meeting. More than 18 months on, the funding has stopped, but the meeting continues with strong attendance from across 30 participating organisations.

Whilst the CVS coordinator organises the sessions and holds the contact list, public health manages the agenda and drives the dialogue. Over time, the focus of discussion has broadened beyond COVID and has proven particularly helpful in complementing data from the joint strategic needs assessment (JSNA).

The weekly meeting remains a largely informal initiative, with light-touch structure and governance. However, public health and NHS colleagues are aware of the meeting and see it as an established and trusted route into the community, for example to recruit participants for non-clinical research studies.

Activities and Success Stories

Champions organisations used their funding at their own discretion and in the ways that they believed would work best for their communities, without formal reporting or outcomes measures. It was seen as a way to reach out to those communities hardest hit by the pandemic and keep them informed. For example, it created tight links into the Somali, Ghanaian, and Eastern European communities.

An example success story features a Champion from an independent library who felt confident to challenge people who weren’t wearing masks and inspired others to do the same. Another showcases the trust built with Eastern European communities, which created a route into itinerant populations who aren’t registered with GPs, but who will now attend events such as hypertension screening at a community pharmacy.

Over time, Champions have proven to be an excellent way to understand and prioritise the needs of these communities and have exposed many gaps and differences versus the more statistical data that public health traditionally works with. For example, dialogue highlighted that community priorities were less on wider social determinants of health, and more on needing to know that their healthcare services were of good quality. Similarly, unemployment was less of an issue versus cost of living, low wages, and fuel poverty. The meetings also highlighted concerns with bedwetting and school readiness after the pandemic; young people and vaping; menopause and material outcomes; and loneliness.

Monitoring, Evaluation and Lessons Learned

The programme builds trust by bringing communities in to see how decisions are being made and providing opportunities to influence those decisions. That “primes the pump” for deeper, ongoing engagement about challenging issues.

The informal, team atmosphere allows community members to push back on public health professionals and clinicians when they get something wrong. And it allows the public health team to share concerns and judgements about the still-rapidly evolving COVID situation in a way that they wouldn’t be able to publish in an email or newsletter.

Although there have been attempts to transition from the online meeting into targeted, in-person public health events (for example, sending a clinician to speak to Black Caribbean communities about diabetes), demand has been limited. Most organisations seem to prefer to participate in the intimate and trusted space of the online dialogue, creating a “last mile” problem for the programme to consider moving forward.

Looking Forward

The Champions will continue to meet every week as long as community organisations want to continue the conversation. It’s believed that the informal nature of the meetings and programme are a key factor in its success.

“The JSNA provides loads of data that highlights areas in Harrow that are particularly poor or getting worse. But we need the community insight into those areas as well. So, on the one hand, you’ve got the data, on the other hand, what do you think about the data? Is it real? Are there issues that are missing? That’s where the dialogue happens.”



Havering

Formation and Format

The London Borough of Havering adopted a systematic approach to encourage vaccine take-up, using the COM-B model for behaviour change as a foundation for developing an overarching strategy to address vaccine confidence. In particular, they targeted populations that the evidence suggests are more hesitant, for example people from Black and minority ethnic groups, certain faith groups and health and social care workers.

The framework helped the council develop several initiatives that address the factors required to change behaviour, such as 1) the capability (skills, ability and knowledge), 2) the opportunity (the social and physical environment that makes a specific behaviour possible), and 3) the motivation (impulses, habits, needs or intentions).

This included Vaccination Ambassadors, active and prominent members of the community or faith groups, keen to improve the health and wellbeing of the group they lead. They received tools and training by the council to become competent in discussing COVID-19 vaccinations. The training was given by a public health consultant and a health psychologist to give the Ambassadors confidence in having non-judgemental conversations with individuals who may be unsure about having the vaccination. In addition, four community groups were offered a grant to promote vaccinations through peer support and motivation, to co-design targeted messages with cultural insights and to give feedback to improve access to vaccinations.

Activities and Success Stories

Vaccination Ambassador training was a two-hour session with a consultant in public health and a lecturer in infectious diseases, covering all pressing COVID-19 vaccination topics, including immune responses, vaccine trials, and types of vaccines and their contents. Other concerns such as fertility, pregnancy and breastfeeding were openly discussed. The consultants also covered vaccine delivery in Havering, how to spot a credible and reliable source, and how to avoid vaccination invite scams. The attendees were then taken through conversational skills training with a doctor of health psychology and motivational interviewing trainer.

Other measures to raise awareness of COVID-19 vaccines included:

- Delivering local and national communications that emphasise accurate information about the vaccine via numerous channels, such as FAQs on the council website, council newsletters, and door-to-door leaflet drops;
- Organising online public meetings for residents with the NHS Medical Director, other health professionals and the local authority's Director of Public Health;
- Sharing of true stories from people and amplifying their messages on social media (Facebook, TikTok) and in the council's bulletin, and;

Evaluation found that knowledge about the COVID-19 vaccine increased from an average of 3.1/5 pre-training to 4.3/5 post-training; confidence regarding having conversations about the COVID-19 vaccine from an average of 3.1/5 pre-training to 4.8/5 post-training; and beliefs about the importance of having conversations about the COVID-19 vaccine from an average of 4.4/5 pre-training to 4.9/5 post-training.

- Launching a "Better Days Ahead" campaign. The campaign's goal was to instil confidence in a brighter future and frame the vaccine as the primary way out of the crisis. Some local providers gave cash rewards to staff who had had vaccinations.

Monitoring, Evaluation and Lessons Learned

After one month, two main indicators were surveyed. Vaccine Ambassadors rated their confidence in having conversations at 4.1/5 and their beliefs about the importance of having conversations about the COVID-19 vaccine at 4.6/5.

Vaccine confidence is a complex issue and has to be addressed on multiple fronts. The COM-B model shed light on the three main areas to focus on. Through the course of the programme, Havering learned the importance of:

- Engaging early with targeted groups and co-designing support;
- Sharing stories of people who got vaccinated and countries with high vaccine coverage to establish a social norm around vaccination and motivate others to do the same;
- Involving trusted health authorities when organising online FAQ sessions or events to address residents' concerns and correct misinformation; and
- Using community venues where offered.

Looking Forward

Vaccine Ambassadors asked to be trained in awareness of heart disease, hypertension and cancer, so public health will consider the request in their next budget and workplan.

"Care home managers reported that the Vaccine Ambassador training might have played a role in increasing the uptake in care homes and home care to just under 80% from around 60% six weeks ago."



“Two years ago, engagement looked like doing a quick focus group. Now the whole health system is looking at it differently and coming to us for insights.”

“I was there, and everyone was so happy that we got to do it together. And many of the staff were from the Somali community as well. And it felt like it was really co-hosted. The organiser went on to win the Hounslow Council COVID hero award in 2021.”

Formation and Format

Hounslow Champions formed in August 2020 using a simple, informal model: you receive messages from us, relay them to your community, ask questions if you have them, and tell us what you’re hearing if you feel like it. Recruitment started through existing community and social media channels and quickly grew to around 125 individuals, due to the urgency of the situation and the need for reliable information on a day-to-day basis.

After about five months, two community engagement officers were recruited to cover the Champions, plus a broader remit. They developed a newsletter, a WhatsApp group and weekly drop-in calls, and started bringing in strong co-design elements, particularly with the vaccination deployment. The programme staff report into an inter-disciplinary public health team focused on behaviour change and population health management. Weekly feedback from Champions is reported to the COVID-19 surveillance team, and the Champions have become a go-to resource across the council for feedback on new ideas and initiatives.

With the DLUHC CVC funding, about 24 paid Community Link Workers were added to reach communities where volunteer Champions weren’t willing or able to connect. And in 2022, the programme has started to bring in wider health concerns and offer training to Champions, like suicide prevention, and to consider the long-term structure and role for the Champions beyond emergency response. The Health Outreach Team has set up a branded “storefront” in the main shopping centre, where people can get one-stop access to all sorts of COVID and non-COVID health information, and even get vaccinated, bringing health out into the community beyond the clinicians’ surgeries.

Activities and Success Stories

One of the best Champions’ collaborations was via a grassroots organiser in the Somali community who built a series of trusted relationships during lockdown. Working with him, public health set up a vaccine clinic at one of the estate buildings near his community on a Friday, staffed by Somali nurses, and he spent the week before promoting the event at mosques and prayers, driving people, and bringing in 90% of the people vaccinated that day from the Somali community.

Building on this relationship, the organiser launched wider health and wellbeing support for his community, including things like Zumba and henna sessions. The women come for activities that they are interested in, and get to meet with the health and wellbeing service and talk about nutrition when and where they need it.

Hounslow also saw success with the Polish community, which was initially incredibly difficult to break into. Now, after several years of building trust, public health co-hosted a Polish summer fair and brought staff to offer the opportunity to get vaccinated in a community environment.

A series of Champion-led videos were created to support vaccine uptake in different languages, and can be viewed here: <https://www.youtube.com/watch?v=y14F2JncALU&list=PL0eLmKG9l2SUQP2SdxfWYUd9HqzjSWC5>

Monitoring, Evaluation and Lessons Learned

In addition to standard monitoring of reach and amplification of their digital assets, the team has integrated other behavioural and data insight approaches, such as A/B testing messages to understand what messages work best, and thematically analysing conversations the paid outreach workers hold, mapped against behaviour change theories. Analysis of this data revealed important insights into vaccine hesitancy beyond traditional demographic segmentation. The team notes that for many people in London, community isn’t geographically determined and differences between predictors of vaccine uptake aren’t always based on attributes like ethnicity or gender.

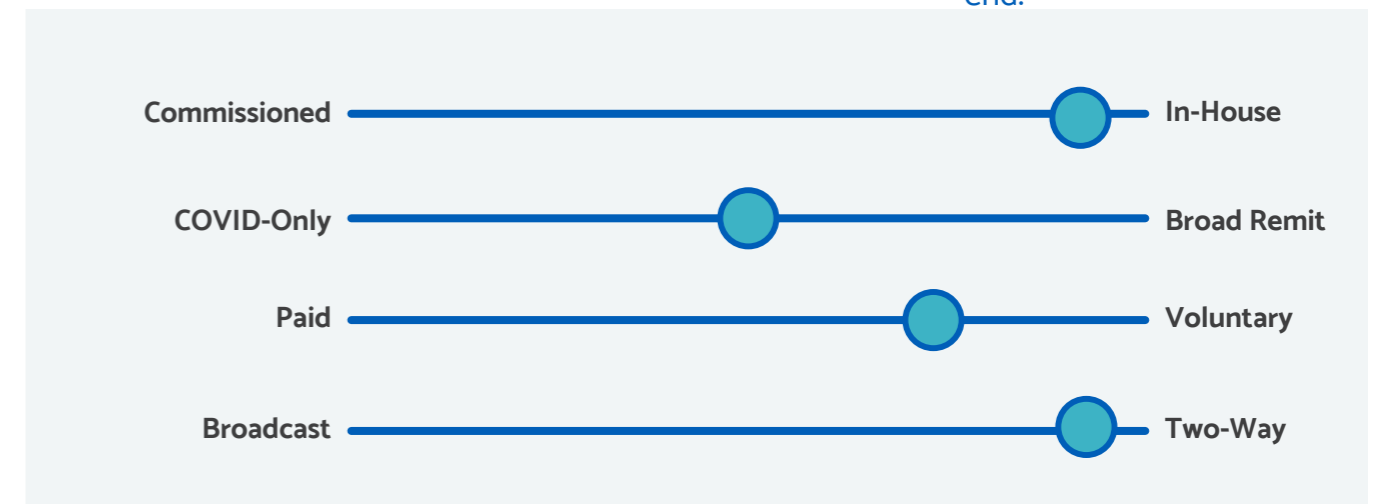
The team is now beginning a more formal evaluation and listening phase with Champions, to thank them for the work that’s happened already, but also to plan what the programme should look like moving forward. It has been a challenge to determine the appropriate balance of volunteer and paid work, as paying people shifts power dynamics towards the council, despite often feeling like the right thing to do.

Looking Forward

A key concern is making sure that the Champions’ way of working is still a priority, now that the emergency is over and staff are returning to focus on their “business as usual” projects. The team is also considering the role of Champions alongside the new ICS initiatives and the scope of where health starts and stops for people and their communities.

“We discovered a cohort of people across demographics who are health conscious in many ways but believe their good health will protect them. They have the same motivations as us but think differently about what being healthy means. They aren’t disengaged with health, but with pharmaceutical interventions. And this has broader implications beyond COVID.”

“It’s time-consuming. And it’s not easy. And some days will have success. And some days not. But it’s part of our health and wellbeing strategy for the next five years, that move to community-based conversations throughout our work, versus just the end.”



Kensington and Chelsea and Westminster

“I think one of the surprises for me was just how well they adapted to all the online activity, and then getting to grips with all the public health messaging around COVID and raising the questions. I can’t tell you how many questions and issues came into us from the community. Actually, it’s more than surprising. It’s actually very humbling to see. Volunteers who have lost family members or have had COVID in their family, people losing jobs, losing income and lots and lots of financial worries, but still wanting to support other people in the community.”

Formation and Format

Community Champions is a bi-borough programme for Westminster and Kensington and Chelsea, founded in 2008 (as a tri-borough initiative including Hammersmith and Fulham) to bring together local residents interested in supporting the health and wellbeing of their communities. Currently there are about 200 resident volunteers working across 11 hyperlocal neighbourhood projects. The projects are commissioned, staffed, and managed by local VCS organisations on five-year contracts.

In March 2020, the Champions pivoted to support the COVID response, alongside moving their existing project activities online. In October 2020, a lighter-touch, online bi-borough-wide COVID Health Champions programme was created to further disseminate accurate information across pre-existing social and community networks. In total, about 142 Westminster and 90 Kensington and Chelsea residents signed up to receive regular email bulletins and attend online information sessions as part of this complementary initiative.

The Champions programme is centrally managed by a programme manager located in public health. It is funded by the Public Health Grant, with some contributions from local CCGs (now ICB) and housing providers. Each project is led by a project manager skilled in community development. Resident volunteers are recruited from their local neighbourhoods and receive tailored training, alongside support from the project staff, peer support, and employability support, where relevant. Although managed as a bi-borough programme, some reporting has to be done separately to the two funding authorities, and projects are located within specific wards that are shown to experience the greatest health inequalities.

Activities and Success Stories

Champion support during the pandemic included public health messaging vis-a-vis COVID-19, wellbeing checks, information dissemination, signposting to services, and food and prescription deliveries. Champions fed back real-time community intelligence to shape engagement and helped lead (often difficult) community vaccine conversations and promote the vaccine bus and pop-up clinics. As everything moved online, Champions also provided a great deal of digital support for homeschooling and for older and vulnerable populations.

Non-COVID Champions projects range from wellbeing and breakfast clubs for older residents, sewing classes, storytelling for parents and carers, yoga, community theatre and nature connection sessions. There are subsets of Community Champions within the broader programme, which include Junior Champions (aged seven to 11) and Maternity Champions.

Project managers keep in regular contact with their Champions via formal team meetings and one-to-ones, alongside more informal support. Information is

cascaded via social media, WhatsApp and email, for Champions to share with friends, family, neighbours and community contacts. As appropriate, projects translate official resources into community languages.

Monitoring, Evaluation and Lessons Learned

There is an internal monitoring system to track outputs and outcomes, collecting both qualitative and quantitative data on KPIs within the service specification, volunteer recruitment and training. This is implemented via quarterly performance monitoring and real-time data capture in a database hosted by Imperial College London. This forms the basis for end-of-year reports, councillor briefings, and secondary data for evaluations. The most recent year-end reports can be found here:

- <https://www.rbkc.gov.uk/health-and-social-care/public-health/community-champions>
- <https://www.westminster.gov.uk/health-and-social-care/your-health/community-champions>

Feedback from Champions is collected quarterly via the monitoring process, fortnightly via regular managers’ meetings and by email or phone as needed in between to ensure a two-way feedback loop between the community and public health.

The scheme has been evaluated in two major externally commissioned evaluations (2014 and 2018), plus a series of smaller-scale evaluations/impact studies, which find £5-£6 of value created for every £1 invested. These studies can be requested from communitychampions@westminster.gov.uk.

Looking Forward

Proven, long-term success means that there are increasing demands from other parts of the council, NHS or other partners for Champions to support issues in public health, whilst keeping true to the grassroots, volunteer ethos of the programme.

“We wanted to see if scaling the programme had diluted its benefits. We were really pleased because expansion didn’t adversely impact the health and wellbeing benefits for those involved.”



Kingston upon Thames

”One of the recommendations from our local research was to address a simple knowledge barrier and serve residents hyperlocal ads promoting their nearest walk-in location and clinic times. We targeted ads within a 1km radius of every walk-in in Kingston.”

Formation and Format

Kingston Community Vaccine Champions was a six-month initiative from February to July 2022. Using the DLUHC CVC funding, ten local VCS organisations were granted about £9500 each to incorporate vaccination messaging into their work. Targeted communities included Koreans, South Asians, BAME communities, young people, people with disabilities, the homeless, refugees and people speaking English as a second language.

Champions participated in a weekly network meeting, where they received training and updated messaging. This included a 2.5-hour introduction session delivered by public health and local GPs about the project and common vaccination myths, MECC and ensuring how to have healthy conversations on difficult subjects, and bite-sized training on healthy lifestyles from guest speakers (for example, on weight management and diabetes).

Included in the training was information about Connected Kingston, the local social prescribing tool. Champions were shown how to search, refer and share information about local services with residents, as part of their conversations both during the project and after.

In addition to community grants, Kingston focused on targeted vaccine communications and paid promotions to underserved communities who don't visit the typical local authority platforms. Instead, the messaging was placed where people were, in the languages they speak. In total, the 12 top spoken languages in the borough were included.

To inform activities, 20 researchers from the track and trace team were redeployed to conduct local vaccine hesitancy research, speaking with about 500 people in total.

Activities and Success Stories

In addition to weekly meetings, messaging was cascaded out to champions via WhatsApp and Facebook groups. Champion organisations then added vaccine messaging into all of their activities each week. This included talks, coffee mornings, Eid pop-ups, creating short video testimonials and working with trusted community leaders. In addition, the environmental services team coordinated information and pop-ups for close contact services such as beauticians and hospitality venues.

Paid messaging included a range of local testimonials from different voices, community members and faith leaders. They were placed on a YouTube channel, and then the videos were boosted locally. The team also placed geographically-targeted ads within 1km of vaccine walk-in locations.

The programmatic ads were a massive success. They reached two-thirds of the borough's population, with over 1.8 million views from 150,000+ residents. This has informed a permanent change towards the use of translated materials online,

alongside WhatsApp and Facebook, as a way to distribute public health messaging moving forward.

Monitoring, Evaluation and Lessons Learned

Overall, the programme was seen to improve public health's relationship with the communities, and provided invaluable data on the usefulness of different types of programmatic and targeted advertising.

Each funded organisation had a dedicated support person within the public health team, with whom they had a monthly conversation about activities, support and resources needed. This rich, qualitative contact was considered key versus more quantitative monitoring.

The programme also highlighted the need for further professional development training for volunteers - to invest in them, help them become better Champions, develop their skills and improve their impact in their communities.

The biggest challenge the programme faced was getting people to engage in the topic of COVID vaccinations at all. The vaccine hesitancy research highlighted the key issues around trust in the government's messages, but also a lack of knowledge about where to get the vaccine. This helped inform the geo-targeted advertising approach. Gypsy, Roma and Traveller communities proved particularly difficult to reach.

Looking Forward

Programmatic and translated communications will continue to be a key strategy for Kingston moving forward. In addition, a number of VCS groups working on the CVC project have created a new federation for collective grant bidding, making it easier to apply for larger pots with a broader impact on the community.



“The leads from those charities are influential in that decision-making process. The council really listens to them and follows their lead with where they think the resources from this project need to go.”

Formation and Format

Lambeth started in June 2021, by recruiting Champions from local charities already working with the communities most in need of COVID and vaccination support. This included a particular emphasis on undocumented individuals living in the borough.

Over the past year, Lambeth’s Ambassadors have shifted from a purely COVID and vaccine focus to a broader perspective on health and its social determinants. There has been a natural shift in participating organisations over time, with some dropping out and others joining, which has helped balance geographic spread across the borough. There are now seven charities involved with the programme, with 12 individuals acting as Champions/Ambassadors.

Ambassadors run community events and drop-in support sessions and provide weekly support on Lambeth’s wellbeing bus (which provides vaccinations, mental health services and citizens’ advice). Ambassadors are being connected into Link Workers and GP surgeries, so they have more resources and a better understanding of the health system.

The Ambassadors meet once a week and have regular group meals and get-togethers for team bonding. A lot of cross-over and collaboration between Champions happens on the bus, or at the events they attend together.

The programme is commissioned by Lambeth Council and run by Age UK Lambeth. Funding is distributed on a monthly or quarterly basis, and commissioning has shifted several times within the council. The strategy is set in a two-way feedback loop with participating organisations via a monthly leadership meeting.

Activities and Success Stories

Beyond geographic diversity, there is a broad spread of interests and activities across Ambassador organisations. For example, one is focused on digital inclusion, while another runs sewing groups. There have been dance groups for older people, mental health and wellbeing workshops, and Ambassadors who visit food banks to signpost health services. All of these begin to build safe spaces where health concerns can be discussed in a semi-private manner, and residents supported to find the help and resources they need. A recent success was the Winter Wellbeing event, held in Brixton. The turnout was great, the atmosphere positive and people really engaged with the themes and speakers.

An Ambassador has set up a website and social media presence for the group, which has helped create an integrated identity and foundation for their work.

- Web: <https://sites.google.com/wellbeingambassador.org.uk/wellbeing-ambassador/home?authuser=0>
- Twitter: <https://twitter.com/wellbeingaukl>

All the Ambassadors have had mental health training together, focussed on consistent referral to resources within Lambeth. Most have also completed Level 2 Behavioural Change from the Royal Society of Public Health. The council has trialled other accredited courses, but feel the work required was too extensive, and are now planning to create a portal for online options for classes on topics such as coaching conversations, common health issues, food safety at events, etc.

Monitoring, Evaluation and Lessons Learned

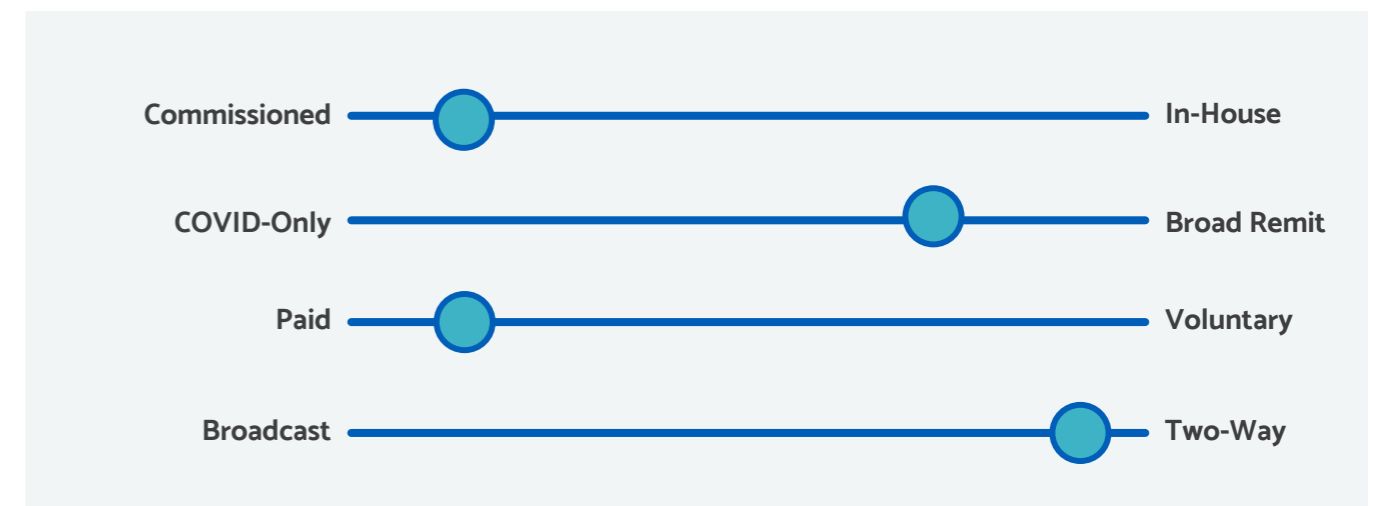
Ambassadors record every substantial conversation they have (for example, that results in a signposting or referral process or significant exchange of information) in an online form. Activities and events are recorded in a separate form, including number of attendees, location and content. Social media is monitored, and participating organisations submit a monthly report to highlight case studies.

The programme records the themes that come in with conversations with Ambassadors and shares them with the council. These tend to be stable, around mental health, unemployment, cost of living and housing. The charities have been vocal in pushing back against public health initiatives that don’t address underlying, uncomfortable topics, such as poverty and structural racism.

Looking Forward

The programme has reached a relatively mature state, with a natural transition of people in and out of roles while the core function remains. The council has let the group’s charter evolve organically, from the interests of participating organisations. However, there is also a sense that there could be a stronger central focus for the group, and more sharing of resources across organisations that will evolve over time.

“Because it’s quite a qualitative project, story-based personal experiences are quite important for understanding the importance of it. Focusing only on how many more people have been vaccinated misses so much of the valuable progress being made in building trust and connection with previously underserved groups.”



Formation and Format

The Lewisham Public Health team began the Lewisham COVID-19 Community Champions project during autumn 2020 to provide clear, trustworthy information about the pandemic and related health issues to Lewisham’s diverse communities.

Around 200 volunteers have been recruited via existing channels, including VCS groups, Black Asian and Minority Ethnic community groups, staff groups, health providers, business owners, local councillors and faith leaders.

The COVID-19 Community Champions receive the most up-to-date information around COVID-19, vaccination programme information, guidance and health information, via a weekly email. They are also invited to attend optional twice monthly webinars, which also provide a forum for Champions to share ideas on how they disseminate the information and feedback to public health team members on the impact of local initiatives.

Targeted promotion has been undertaken within local communities, including provision of translated materials and information in a printed format. All information is held in the Community Champions Google Drive. In addition, the new RSPH Level 2 Award in Encouraging Vaccination Uptake was delivered to Community Champions in June 2021. Champions have also received Youth Mental Health First Aid and Talk Cancer training.

A dedicated community connector was recruited, who builds relationships and rapport with community members, helping to recruit Community Champions and develop networks to provide health promotion information on COVID-19 and vaccinations in a culturally sensitive way.

Activities and Success Stories

Champions have developed their roles as trusted members of the communities in Lewisham and have been able to give accurate information about COVID-19, vaccinations and the pandemic. Champions felt very positive about the impact they had had in their communities.

Lewisham also launched Young Champions - a tailored health programme for ages 13 to 25, to include transition groups as they play a key role in supporting families and community members, providing factual information regarding COVID-19. Focus groups were held with participants to co-produce the initiative, a series of outreach and communications targeting young people were also undertaken. An Instagram Live event was held in July 2021 to target the 18 to 24 age demographic. This event was hosted by an ex-Young Mayor and a Lewisham GP.

Targeted activity has been conducted in the north of the borough where local community volunteers have undertaken training in doorstep conversations to support in vaccine uptake of local residents where data shows this activity has

been low. The vaccination programme has been brought to the community and also included the opportunity to access health professionals and additional health information on diabetes, hypertension and weight management.

Monitoring, Evaluation and Lessons Learned

In May 2021 Lewisham Public Health commissioned an evaluation partner, Justice Studios, to evaluate the effectiveness of the Lewisham COVID-19 Community Champions programme. The evaluation used a mixed methods approach – literature reviews, online surveys, in-depth interviews, discussion groups with young people, and participant observation. A group of nine Young Research Advisors – young people who live in Lewisham - were recruited and trained in research methods. They collected data for the evaluation.

The report concluded that the programme can be seen to be a good model for other healthcare initiatives, particularly in communities where there are high levels of distrust of the council, where people may choose not to engage with the council, and/or communities that are “hard to reach”. However, there is still scope to widen the network of Champions and encourage more community leaders and volunteers to sign-up to the programme.

Looking Forward

Central to the future of the Community Champions programme is a recognition of the need for it to be a sustained, meaningful commitment to the community rather than a short-term project. Community ownership is a priority within the programme, and it will become one of the eight strands of the Lewisham Health Inequalities Programme jointly overseen by the Council and health partners, which will be delivered over the next two years will include our successful Community Champions programme, building community capacity.

“Community members felt the approach of Champions having the autonomy to decide how to disseminate COVID-19 information was beneficial. The programme will continue to be applied flexibly so that Champions can choose the best ways to engage with communities based on their existing knowledge, including operating as Champions covertly. It is important that the trust Champions have built up in their communities is continued and developed. Also that Champions feel that their role in promoting information about community health and wellbeing is sustainable and a natural progression.”



“Building trust is an important part of connecting with our communities. We’ve got a safe space to share information. They know if they ask a question, we will do our best to answer it. And if we can’t answer it there and then, which has happened a number of times, we go back to them on our Friday email with the answer. That’s something we will build on as we continue to live safely and fairly with COVID-19.”

Formation and Format

Merton Community Champions formed in September 2020 in response to residents’ desire to help reduce transmission rates and support the NHS, but they weren’t sure how to do that and which sources of information to trust.

There are currently two sets of Champions programmes in Merton, under 18s, and 30+, with approximately 210 Champions in the latter group. The programme continues to grow over time, with active participation of around 50 people each week, and all Champions receive the resources and notes to share with their networks.

The programme started on an entirely voluntary basis and with an intentionally light-touch ethos. The programme is now fairly well-known within Merton, and that’s made organic growth and management easier over time. In 2022, DLUHC CVC funds were used to incentivise organisations to join the network, which has fuelled additional participation from representatives of a diverse range of communities.

The programme operates as a “network of networks” with an operational lead from the public health team coordinating things day-to-day and a member of the Public Health Senior Leadership team providing strategic oversight and reporting into the Director of Public Health.

Activities and Success Stories

The programme is powered by Wednesday drop-in sessions (both daytime and evening, and held fortnightly), Friday emails full of resources for Champions to share with their networks, and a WhatsApp group that makes it easy for Champions to forward information onward or ask any questions that they may have.

The drop-in sessions include an overview from a VCS-led service that is part of the network, Champions Corner (a Champions-led slot to open up discussions and ask questions), and a public health-related workshop on a topic that the Champions have expressed interest in (for example, COVID-19 vaccinations, suicide prevention or bowel cancer screening). At its heart, drop-in sessions provide an opportunity for an ongoing dialogue with our Champions and for them to come with specific questions and get trusted information from public health and NHS experts.

The public health team also organises training on topics the Champions ask for. For example, when Champions reported that having vaccine conversations was challenging, the team delivered effective conversation training that helped develop their understanding and confidence. Champions could see that it wasn’t their job as Champions to convince people, but that it was their job to create the space for sharing information and active listening.

Monitoring, Evaluation and Lessons Learned

The public health team takes a light-touch approach to monitoring and evaluation and produces surveys on a regular basis. Most recently, 95% of survey respondents said that they share the weekly information with their networks, even if they didn’t attend the drop-in session that week.

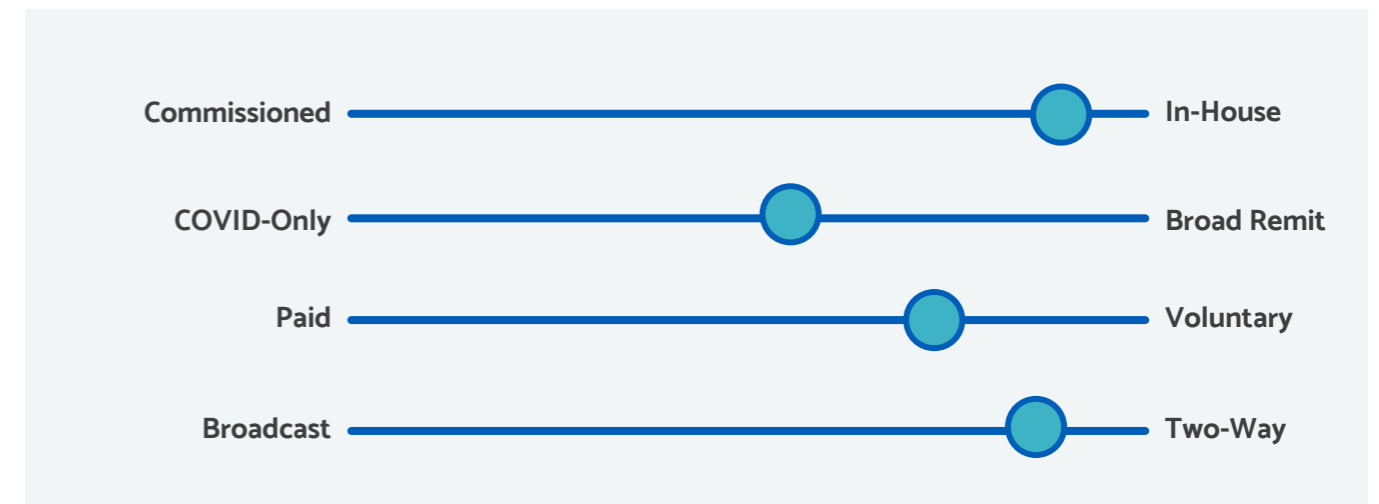
The Champions are also eager for more video-based resources, which are engaging and easy to share, and the council is working with a number of clinicians to make this a reality.

As one Champion, Asha, relates: “You’re helping others, but you’re also helping yourself, especially for people like myself. As this scheme is multi-disciplinary, multi-age, multi-ethnic and it’s local, you can integrate effectively and direct efforts where there is greatest impact. What I like about the Champions is you get very good communications from the council, and you can feed back your concerns and ideas including effectiveness of rules and guidance. Sharing information with my church group, other voluntary groups, friends and family is a pivotal role appreciated by many.”

Looking Forward

Merton has evolved the Champions as they have moved through the pandemic, to keep the programme relevant and to listen to the Champions about how they want it to work. It has provided strong foundations to build upon as communities learn to live safely with COVID-19, and the public health team will ensure that the ongoing dialogue will continue.

“This has really brought us closer to our communities in co-creation and ongoing dialogue, and I think it’s been fabulous to inform our response about how we connect people with services, and that’s why we’re going to continue the network.”



Newham

“Our job was to get information to people that they can share with their communities, because they are trusted more than us. And we needed to connect to people in a way that works for them.”

“Whereas previous Champions programmes had been narrow and deep, working with a small number of passionate community members to support peer education and advocacy, the pandemic response needed to be much wider and therefore initially shallower; we need to reach our communities across a large population of more than 350,000 and hundreds of communities.”

“What should be happening is that systems trust people. And then people grow their trust in systems, rather than systems mistrusting people, and people having to prove why they’re trustworthy. And I am proud that this programme has helped catalyse that.”

Formation and Format

Newham’s commitment to more direct collaboration with residents was underway when COVID-19 took hold, with a Health Champions programme already in place. But when Newham was very severely hit in the first wave of the pandemic, it knew it needed to reach more deeply into communities. Informed by experiences from other tragedies, including New Orleans in the wake of Hurricane Katrina and the more recent experiences after the Grenfell Tower Fire Disaster in 2017, the council knew it needed to put information and knowledge into the hands of residents, as trusted voices, so they could share with their friends, family and communities, and be a conduit to hear community concerns.

Work began in May 2020; by mid-June the programme was launched, setting the framework for COVID-19 Champions programmes across the country. The use of WhatsApp with JPEG infographics that Champions could share as they wanted was particularly new to public sector community engagement.

More than 500 COVID-19 Health Champions signed up to receive information via WhatsApp and email. Around 100 also joined a WhatsApp group, and a smaller group of around 30-40 came to weekly Zoom calls. Champions were offered a one-hour induction to explain the programme and their role. Later, a subset of Champions trained as vaccine peer supporters, available for one-to-one conversations via a referral and matching process.

The programme is managed by a coordinator, reporting to the Director of Public Health. The coordinator provides both day-to-day and strategic management, including fielding questions from Champions and creating 50+ infographics with the help of a designer. The coordinator also actively influenced and shaped COVID-19 responses in Newham using the feedback from the Champions.

Activities and Success Stories

The programme has had a profound impact on how Newham responds to challenges. In COVID-19 it helped inform the community outreach elements of the COVID-19 vaccine programme (including vaccine peer supporters, public Q and A sessions and community pop-up clinics, all of which Newham pioneered. And within a core group of Champions, the programme has formed a new community that wouldn’t have existed otherwise. The Champions held a celebration event in October 2021, which was attended by over 100 people. More details on activities are described in this article: <https://www.kingsfund.org.uk/blog/2020/12/newham-health-champions-community-covid-19>

Newham’s programme also had a significant impact on the rest of the country, with representatives from more than 70 locations taking part in training sessions led by the Newham coordinator and then joining a national network. London’s health leaders commissioned the coordinator to run a pan-London action learning

programme for other coordinators in the city.

Monitoring, Evaluation and Lessons Learned

Locally, Newham made an explicit decision not to collect data on their Champions or their activities – for example, the demographics of individual Champions or tracking what Champions did with the information provided. This was to avoid a dynamic where people might feel that they were being monitored instead of trusted to do what they know best – engage with their community.

In 2021, the programme commissioned a learning report, combining focus groups, online surveys, one-to-one interviews with Champions and public health officials, observations of Champions’ WhatsApp and drop-in meeting interactions, and data extracted from WhatsApp. This report can be found here: <https://www.newham.gov.uk/coronavirus-covid-19/community-health-champions>

Looking Forward

Champions have helped reframe how the Newham Public Health team undertakes its work, in particular how it partners with communities and community organisations to build access, relevance and trust (ART) to improve health and reduce health inequalities. Champions programmes now exist for the council’s response to the Ukraine Crisis (Welcome Newham Champions) and the cost of living crisis. Moreover they are a crucial part of the evolving concept of the “village” responding to health and health needs collectively.

Beyond the specifics of COVID-19, the programme has demonstrated at a system level how working differently with residents can be impactful. And that is translating into other areas of Newham and beyond.

“My time and knowledge has been genuinely valued... For example, I asked for a weekly dashboard, they listened and acted. The relationship between the Champions and the public health team became something else over time that was unexpected - it became a genuine caring and supportive space. If someone is not feeling great we come together to support them. We share our fears, worries and triumphs, the trust has built up.”



“At present, it’s a signposting service. But it’s reactive to the engagement that our engagement officers are feeding back on. And now we are starting to make it more interactive and invite people into events. For example, for mental health week we’re out on the streets in the community inviting people to talk to us. We’re also taking to clinical partners about hosting seminars, but that’s a phase two.”

“We saw some really good results in those pop-up clinics, which culminated in a massive event in Valentine’s Park where we vaccinated over 500 people in the day, and we did it in the middle of a fun fair. It worked very well, and it was via word of mouth.”

Formation and Format

Redbridge Champions started by getting a WhatsApp group set up in September 2020, using a sign-up form on the main website, promoted through the authorities’ traditional communications channels. Between 100 and 200 people signed up to receive regular updates as the pandemic situation continued to change rapidly.

A decision was made to build on that momentum and integrate Champions with other community networks into a cohesive initiative. The scope was widened from COVID Ambassadors to Community Health Champions, and the programme began collecting basic demographic, geographic and preference information so that news could be more targeted. Concerted recruiting as part of the vaccine door-knocking campaign, along with social media advertising, drove rapid growth in new sign-ups, and now over 3,000 residents are part of the network.

Alongside the broadcast network for information-sharing via WhatsApp and email, the council has a team of five to ten health buddies, five to ten door-knockers, and three dedicated engagement officers. These individuals focus on deep, in-person engagement, and provide a critical feedback loop into the programme, to help ensure the information disseminated works for Redbridge communities.

The programme is managed by public health, and partners with CCG GP colleagues. It reports via the borough’s COVID Board and Health and Wellbeing Board.

Activities and Success Stories

Redbridge saw consistent increase of vaccine uptake in areas targeted via Champions and the associated initiatives. They would combine community-centred locations (via pop-ups or the vaccine bus) with door-knocking, geo-targeted social media advertising, and Champions communications.

The wider Champions network has proven to be an effective route into the community. For example, when the ICB did a recent study on blood pressure, advertising through the Champions network drove high levels of participation.

The community engagement officers in Redbridge have placed considerable focus on building relationships and trust with the Gypsy, Roma and Traveller communities. This long-term investment of time has resulted in recent successes, like members of the Roma community offering to drive families into vaccination clinics.

Monitoring, Evaluation and Lessons Learned

On a daily basis, the programme team can monitor how many engagements have happened, and what people are telling them.

One of the key takeaways has been how the data around COVID told a very different story to the conversations on the ground, especially when working with seldom-heard communities.

“It can be a bit of a Pandora’s Box. We go to talk about COVID and come back with horrendous stories about housing. It’s our duty as public servants to address that, but we need to do it in the right way, because we’re trying to build trust. If people are living in HMOs, they’ll tell you their issues, but they won’t want you to directly do something about it because you might lose them their home. At the same time, it can’t be a one-way conversation where they’re telling us stuff, and we’re not doing anything about it, but keep coming back to talk about an injection that people don’t want. That’s a tough one. We’re working to equip our officers to deal with that properly. And it’s something we’re still working through.”

The team is also working from feedback to make content more interesting and engaging, particularly as COVID fatigue sets in. They are working to target conversations more around health information relevant to the individual (like healthy start vouchers for children), and through interactive elements like contests (to win a gym membership by participating in a survey).

Looking Forward

The work will continue as part of the health inequalities funding that’s recently been approved, with many of the interventions applying for a continuation and expansion of the Champions and associated community engagement activities.

“It’s effective because it’s opt-in, and these are people who have made the effort to say they want to be a part of something. They’ve made a conscious decision to help. So it’s the right type of people to reach out to. And I think that’s powerful.”



Richmond upon Thames

“You can’t recruit from behind a desk.”

Richmond and Wandsworth have been jointly operating a mobile outreach vehicle to target areas of the boroughs that are underserved or with lower uptake of the COVID-19 vaccine. Collaborating with partners has been key to the success of this public health programme, joined-up with partners in the ICB, primary care and voluntary sector. In addition to delivering the COVID vaccine, the bus offers blood pressure checks, NHS Health Checks, diabetes prevention and smoking cessation information. It has also been joined by fuel poverty charity Thinking Works and local food banks. The outreach was promoted to residents via letter drops, through press releases and on social media.

Formation and Format

Richmond COVID Champions started in 2021 as a simple communications platform with about 60 Champions. Using DLUHC CVC funding, the borough brought in a dedicated coordinator, who has since developed a strategic plan for the programme and grown the network to over 116 individuals.

As part of this restructuring, the Champions decided to change their name to Community Health Champions and broadened their perspective to encompass larger issues of health and wellbeing, for example children’s health and food poverty.

The model and approach combined the Public Health Community Action Model with a communications delivery approach, based on Richmond and Wandsworth’s Public Health Community Action Model. The initial objectives of the project centre on recruiting Champions, targeting engagement with ethnic minorities and elderly residents, promoting vaccine confidence, increasing the uptake of vaccines and encouraging conversations around general health and wellbeing.

Each person who signs up to be a Champion is welcomed personally by the coordinator. The network has a WhatsApp group with about 45 active participants, a newsletter, and a resource toolkit that is reviewed and co-designed by the Champions.

Activities and Success Stories

The Champions programme in Richmond has helped make previously “invisible” communities within Richmond more visible and engaged in borough and public health initiatives. With minorities comprising just 16% of the population, it’s been a breakthrough to show that they are there, and very much want to be involved.

Recruiting has happened through both programmatic and organic campaigns, paid and free, in particular by getting out to GP surgeries, libraries, train stations, colleges, and events – even standing in the street and handing out leaflets. At every local event and voluntary group, the coordinator attends and puts up the Champions banner to attract attention.

The coordinator also developed and provided a wide range of Community Health Champions Assets and Resources to support the Champions and stakeholders. The Stakeholders’ toolkit and newsletter were found to be extremely useful and their uptake remarkably high. Other assets include posters and leaflets, pull-up banners and Champions videos.

As a result, the borough has seen an increase in vaccine uptake in the targeted wards – proof the programme has had impact. The programme supported eight pop-up clinics with 625 vaccinations given, and delivered two training courses to the Champions.

Monitoring, Evaluation and Lessons Learned

The Champions held a celebration event in April 2022, which was well-attended. This was also an opportunity to facilitate conversations and feedback about the programme and plans for moving forward.

Champions highlighted that trust continues to be an issue in the community, alongside confidence in individuals’ abilities to influence other people and make a difference. There is also widespread COVID fatigue.

Partner organisations could provide information in a more timely manner in order to maximise the opportunity for awareness and engagement.

It’s also been difficult to recruit men and groups who do not typically engage with the council.

Looking Forward

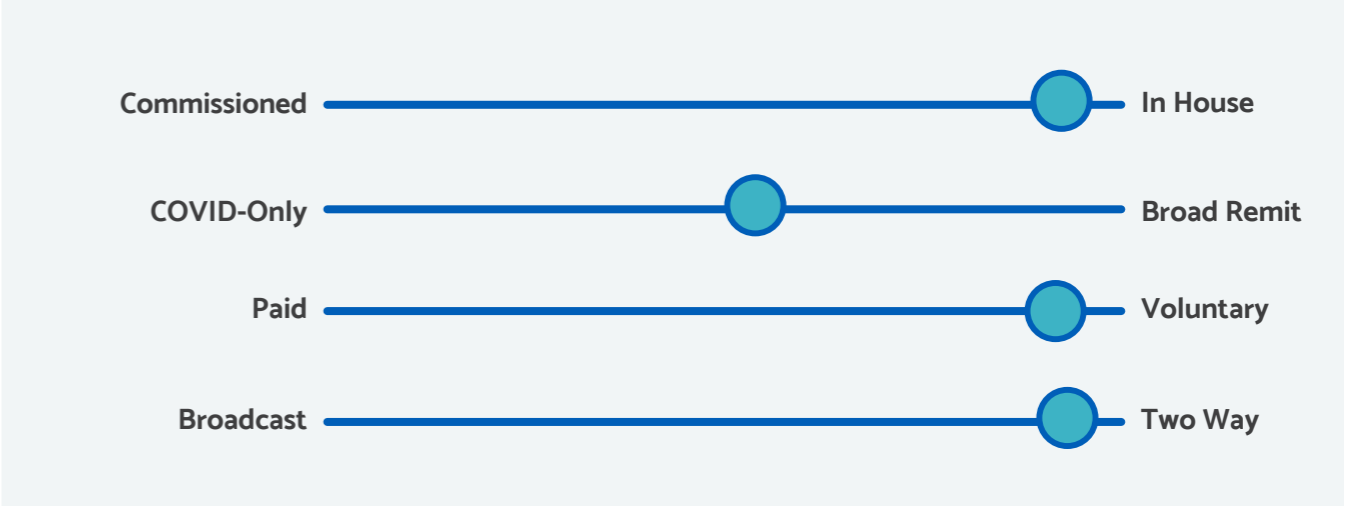
There is a desire to have one name, one brand, and a consolidated programme across the council and NHS, integrating concepts such as Ambassadors, Connectors, and Champions into a cohesive network.

In particular, there is demand for more training and skill development, in order to better shape the Champions network into a resource for the council, the voluntary sector and for the Champions themselves.

This will require a central management and coordination point with dedicated personnel and a mission to reduce health inequalities, co-produce health strategies and rebuild trust in communities.

“We need to continue building this bridge, because we can’t build a bridge and burn it after we use it. Those bridges need to be there. And they need to be maintained. And they need to be looked after.”

“The messenger is as important as the message.”



“They’ve done amazing stuff, that I think has made a difference at a very local level. The Ambassador programme has genuinely been a success in that it’s been very well recognised what they have done. For our councillors to recognise quite how much is being done by this volunteer group. That’s demonstrated by them putting plans in place to keep the network going next year. That’s really validated the work and helped the Ambassadors to see the impact they’ve made as well.”

Formation and Format

Southwark Community Health Ambassadors formed in October 2020, as part of a larger strand of work around COVID prevention. Recruitment started with VCS organisations in the area, and the network quickly expanded to about 133 ambassadors with varying degrees of engagement. More than 50% of Ambassadors identify as BAME, about 80% are involved in the voluntary sector, and around 50% are involved in faith organisations.

DLUHC CVC funding was used to extend the coordination of the network for a longer period of time, provide more training, and provide some paid opportunities for Ambassadors (for example, attending pop up events to answer questions). Alongside Ambassadors, Southwark also ran three rounds of grants to local organisations around COVID prevention, vaccine hesitancy and underserved communities.

Ambassadors are offered induction training and access to a Google Drive of information resources, and are kept up to date via WhatsApp. There is no specific “ask” of Ambassadors, but they are invited to monthly network meetings around topics of interest (mental health, food security, financial wellbeing, etc) and offered wider opportunities for training, including MECC, mental health first aid, suicide prevention, and positive mental wellbeing.

The Ambassadors are managed via Healthwatch Southwark. Public health partners advise on content, attend the network meetings, collaborate on projects, and help monitor the WhatsApp group to answer questions.

Activities and Success Stories

Ambassadors particularly tackled the topic of vaccine misinformation, with many making videos of themselves being vaccinated and holding challenging conversations with their communities. The programme has also created a number of connections across the network and into the statutory system, which wouldn’t have previously existed.

Outreach grants have proven effective. For example, a Christian ministry hosted a series of webinars for black women that showed substantial shifts in attitude before and after participation. The Southwark Travellers Action Group introduced information on vaccination into their existing activities, including youth groups and one-to-one support, and they have reached high numbers of people. Another successful collaborative project with the Latin American community in Southwark brought Spanish speakers into vaccination clinics and conducted research into their needs, for example around GP registration.

Monitoring, Evaluation and Lessons Learned

Ambassador activity is monitored through regular surveys which are also used to identify priorities and topics for training and webinars. Mental health has proven to be the most pressing concern. Each round of grants has also included an evaluation phase and reporting. <insert links to reports here?>

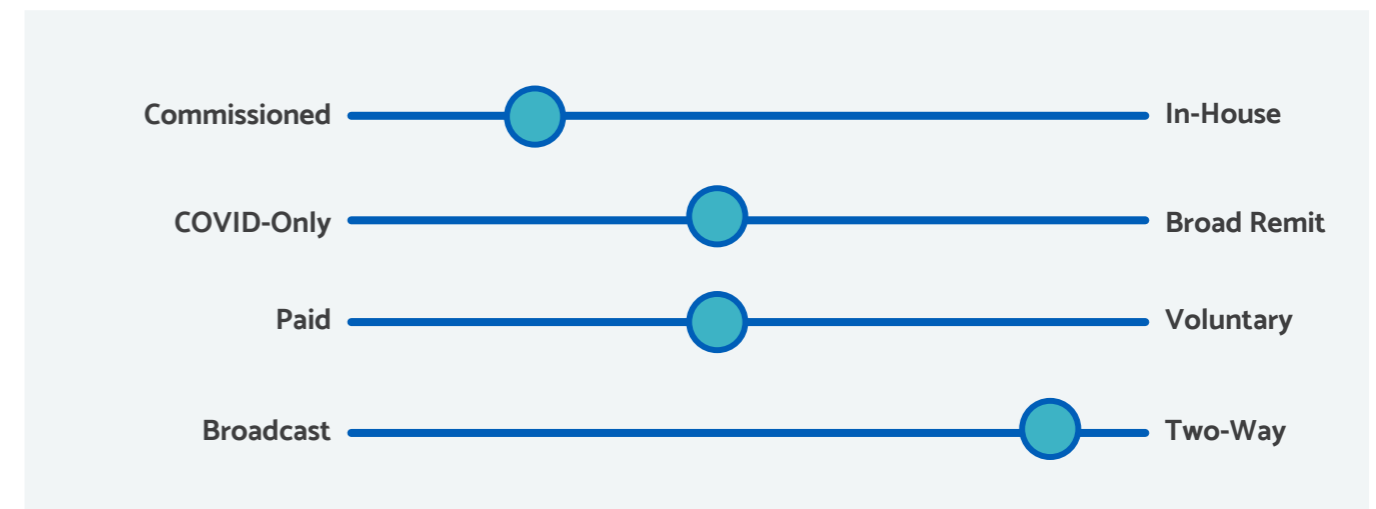
There is a sense that COVID has brought pre-existing inequalities into sharper focus and turned co-production and collaborative working from theory into a tangible reality. In particular, the Ambassadors’ programme has been informed by a wider Southwark programme: Southwark Stand Together, which was developed in response to George Floyd and BLM.

“We made sure it was always a two-way conversation. Not us telling people what to do. But asking, ‘What are you hearing? What can we help you with? What can we be doing differently or better?’ Sometimes public health work gets quite separated from what’s happening on the ground. It’s meant being much closer to what’s happening. And to really hear quite shocking things at times. To really hear the detail of why that isn’t working. Or why that isn’t acceptable messaging. I think, if it wasn’t for the pandemic, we might not have known that some of that work was even happening. I think there will always be a closer relationship with that network of volunteers. That would be my hope.”

Looking Forward

The programme is keen to broaden its focus and provide more training: in particular, training and paid, structured work opportunities that can lead to employment opportunities for those who are interested. It is hoped that the programme can create a pathway to new opportunities, including collaborations with the NHS and apprenticeship schemes.

“We have had a couple of people that have gone on to apply for jobs on the back of being Ambassadors, which is great. One of our Ambassadors has gone on to coordinate a network of volunteers in another borough, having been really active in our network. That’s really good. So, looking forward, more of the same, but with a wider focus and more opportunities.”



“You need to follow through. If I say I’m going to call back, I have to call back. If I have their number, I need to call and check in and let them know where I’ve been. Because they already don’t trust the system. If we let them down, that’s it. The door is shut in our face”

“The key ingredient is utilising the passion and energy of the Champions themselves. They know the community and what they need. And almost slowing down the system, knowing that this will take time. That gives us the information and momentum we need to move away from bureaucratic approaches to the things that feel right. How do we make these communities more resilient and sustainable? And it’s working, it’s going from strength to strength.”

Formation and Format

Sutton Health Champions started by developing a catalogue of the community assets in each of the 18 borough wards (for example, children’s centres, churches, councillors, voluntary organisations) and reaching out to them to coordinate COVID response and vaccination outreach in each ward, based on the data. There are now more than 75 committed Champions, with a reach of over 170,000 residents.

“I could tell where we had low vaccination rates. I’d reach out and people would volunteer to distribute leaflets and other promotional material to local shops, pharmacists and other places within their ward. We connected with the connectors. They’ve all got reach. Some people used Facebook. Others had WhatsApp groups. Some had email newsletters or offered to knock on the neighbour’s door. I could get something sent out to thousands of people within minutes.”

From there, it grew organically, into bi-weekly information sharing meetings. In addition to receiving key messages and spreading the word, Champions would report back on community concerns.

The programme is managed by NHS Sutton, part of the south west London Integrated Care System.

Activities and Success Stories

Many of the Champions are from volunteer organisations, and benefit from the extra training and networking opportunities the programme provides. The programme also actively tries to network individuals with jobs, and create business opportunities for people in the communities, especially those in the housing estates.

Another key success has been with the Traveller and homeless communities: for example, reaching 85% vaccination rate within the local Traveller community. That started by working with connectors, and then showing up consistently with the same person each time, to develop trust and rapport. After several months of consistency, more difficult topics like vaccination and bringing GPs out for health checks could be introduced.

The programme continues to take a targeted approach to neighbourhoods, understanding it takes six to nine months to start the conversation, build trust, and develop relationships by connecting and listening: for example, listening to residents on a local housing estate’s desire for physical exercise, but also understanding that there are high levels of obesity and disability, so chair exercise was organised. Or attending existing coffee meetings rather than planning a stand-alone health event.

Monitoring, Evaluation and Lessons Learned

There is a continual, conversational approach to monitoring and evaluation. The coordinator regularly asks at monthly meetings where people want to go, what things need to improve, how often people want to meet, and then gives personal follow-up via phone calls to provide one-to-one support.

“I pick up the phone and say, ‘You know what, you were great in the meeting yesterday. I love your ideas.’ Or I make sure to bring in senior management to meet them. Really make them feel that their voice matters. Because without that relationship, we don’t have anything.”

Sutton feedback also highlights the important of not confusing residents with too many labels, boxes, and objectives from within the system.

Looking Forward

Three years into it, the Champions still meet monthly. They’ve continued to grow organically and connect into more settings, like the NHS primary care network and integrated neighbourhood meetings.

Sutton has formed a Community Voice Group, as a next step or “tier” of the Champions, to represent communities with protected characteristics in decision-making. This includes the blind, mothers, the LGBTQ+ community, the elderly, people with learning difficulties, people with experience of domestic violence, and other communities that weren’t strongly represented in the original Champions response.

These efforts are feeding up into the health inequalities programme in Sutton, bringing together the NHS, public health, and community voices as one team, with two of the Community Champions sitting on the governance board.

“People get very confused with the different terms. They come to meetings and have no idea how it relates to themselves. These are volunteers, they don’t get paid. It’s our job to make the system and the journey easy for them. What benefits are they getting out of it? This isn’t just about our work.”



Tower Hamlets

“Most of the Champions are local residents, and now they see each other out on the street, and it’s lovely. We’ve advertised a lot of different opportunities within the group, whether it’s training, events or job opportunities. Champions have also had the opportunity to shadow Ambassadors to see what it is they do. And some of the Ambassadors have actually helped the Champion’s family members get their vaccine. So that was a really lovely outcome.”

“Someone described it a bit like a marriage. We love each other. But we may not always get on, and we might not always agree. But we’re always there for each other and are able to work through our problems.”

Formation and Format

In October 2020, a coordinator was brought into to develop Tower Hamlets COVID Champions, with the aim to help residents understand and share key messages related to COVID-19 with their friends, neighbours, and relatives. There is now a network of about 450 Champions across the borough. The programme centres on Tuesday evening meetings, which include a view of local and national COVID data, alongside discussion, questions, and presentations on different topics of interest. Over time, Champions also started an informal Friday morning “cuppa” session for social connection, and monthly meetings specifically on mental health, with professional support from a local talking therapies service. There is also a weekly newsletter, and direct access via email and phone.

Alongside the Champions, Tower Hamlets has paid COVID Ambassadors and funded a series of targeted community outreach grants. The Ambassadors are out on the street, talking to residents and signposting in more formal ways. The Ambassadors and representatives from funded voluntary sector projects often attend the Champions meeting, creating relationships and cross-pollination across the networks. The programme reports its activity into the Health Protection Board within public health, and also into the Local Engagement Board, chaired by the mayor. The Director of Public Health regularly attends the Champions meetings and participates in discussions.

Activities and Success Stories

Champions provided invaluable feedback throughout COVID, including identifying locations for vaccination sites and mobile testing units. They reported issues like banners with out-of-date information in local parks and identifying elements of messaging that weren’t quite right. Now, Champions are known as an established group across the authority. New services or programmes ask to attend the Champions meeting and share information for them to pass on, or to get ideas about how the service should be developed, or for communications campaigns.

The Champions held a celebration event and frequently run into each other in the community. “We all had dinner together to celebrate the commitment, work and enthusiasm the team had given throughout the pandemic. We were joined by the mayor and directors from the council. We had music, balloons and photo booth props. I often just bump into the Champions or Ambassadors when I’m in the borough or I’ll hear my name being called and turn round to see a Champion there.”

Monitoring, Evaluation and Lessons Learned

The team hasn’t had the resources to conduct formal evaluation but is beginning to plan for the future and reference the meeting recordings as an archive and testament to what has happened.

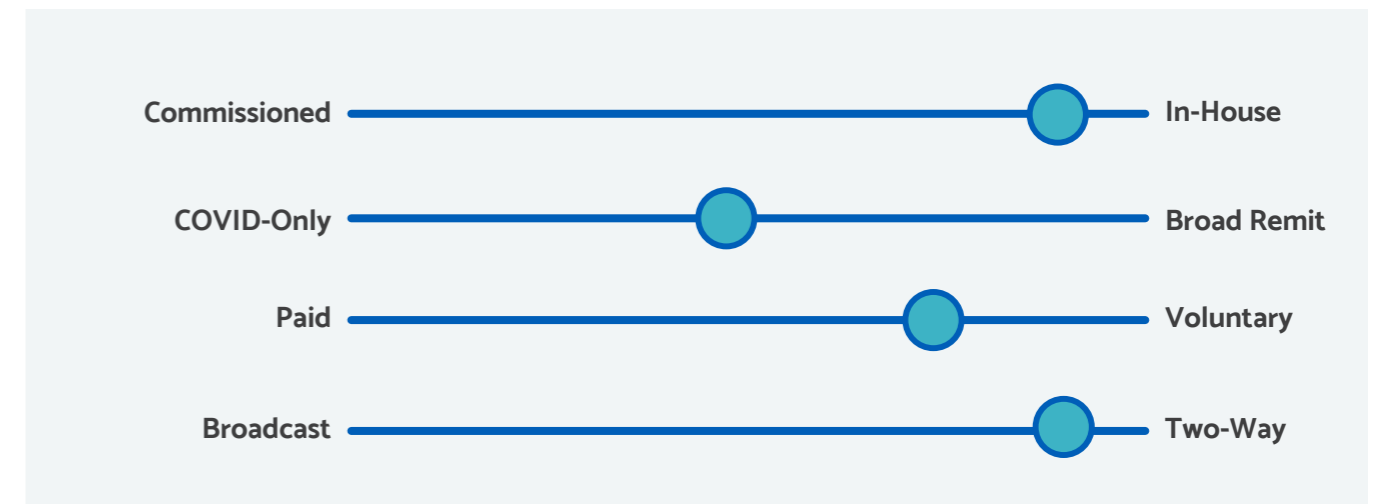
Throughout the programme, it’s been important to continuously make space and time for the conversations that Champions want to have, and let those spaces grow organically. They also found that in times of acute stress, it was important to include positive news and connections. They now start sessions by sharing nice things that have happened since the last meeting. “It’s helped us connect in a different way. We hear about grandchildren, or other volunteer work. People ask about my new nephew and my family in Blackpool. We make the connection on a personal level, as opposed to just business and work.”

The programme had to discontinue its WhatsApp group, as community moderation was becoming a full-time job, and the dynamic was counterproductive. “We facilitated discussions between members, and carried out mediations within the group, people agreed to follow guidelines they developed themselves. But then in practice there were still challenges, so we made the difficult decision to stop. Champions still have my number in case of any issues or anything they’d like to raise. We still meet weekly. They have the Champions email address. And people who are friends as a result of the group have set up their own WhatsApp group. So there are still lots of ways we can all communicate with each other.”

Looking Forward

The Director of Public Health is keen on using the model developed during COVID over the long term. Both Champions and Ambassador programmes are being developed into a broader health and wellbeing remit based on feedback and insights from the community and local stakeholders, with the focus evolving organically and supported by sustainable budgeting. It’s being held up as a model within the council, with other teams looking at using a similar approach.

“Now that things are more back to normal, we still have this group of people who are very dedicated, and very passionate. I’ve been involved in other groups, but we’ve never had such regular contact. This model is different, because we’re always there, not just when we want something. We hear what they need, as opposed to us telling them what we want them to hear. That makes it special.”



Waltham Forest

“My background is community engagement, and you’ve got to get out there. You need to knock on doors. You need get to where the community is. You can’t just stand stagnant inside the council buildings.”

“She’s literally coming forward with so many ideas, she’s now prepared to help us with the polio vaccine. And I think that’s just come from having that one-to-one relationship. She knows if she’s got an idea, she’ll call the community organiser that works in the area. And it’s been great. Building up those relationships and gaining an insight into things that we’ve never really thought about before.”

Formation and Format

Waltham Forest initially drove COVID community engagement through a team of paid test operatives and community organisers, focused on getting people out into high footfall areas to give out masks and test kits.

Later, from April to October 2022, the borough used DLUHC CVC funding to create a Vaccine Champions Programme. The programme started by recruiting resident volunteers, but discovered this was difficult in the “living with COVID-19 phase” of engagement. Instead, they focused on community organisational leads and faith leaders who already had strong connections with the targeted cohorts.

Relationships were built on a one-to-one basis by four Community Organisers who each focused on the lowest uptake areas within specific wards. Based on feedback, targeted engagements including “Tea, Talk and COVID” events, leafleting and drop-in sessions took place. They used weekly and monthly review meetings to identify what’s been more or less successful, and adapt their activities in response: connecting to the right people, to have the right conversations, in the right way, and building relationships with leaders within the community.

Activities and Success Stories

Early community engagement activities drove a large increase in testing, with Waltham Forest leading the region in terms of numbers of people both testing and reporting their results. The team also went to schools, including a three-day event with about 400 college students. Another focus was on the food industry, which has plants in the area. The engagement teams conducted a two-day information tour with employees, but also provided targeted support to the business owners, to help them understand what they should do, how to best support employees, and how to get financial support for the business.

Waltham Forest then hosted weekly pop-up clinics in different spaces suitable for the targeted cohort. The best results were seen in locations where the leaders had the strongest connections to the community, including mosques and churches. For example, a recent event held at a centre supporting vulnerable people with drug and alcohol addiction resulted in 18 people being vaccinated, which is a significant success, considering that uptake is so low and people attending and having conversations with the team started from firmly “anti-vax” positions.

For another event, a South Asian radio station advertised pop-up clinics targeted at the South Asian communities before and during a clinic held in a community centre in a prime location in the borough. This event also drew attention from other cohorts, who were able to gain information on upcoming boosters, while parents took the opportunity to get their children vaccinated.

Another key success has been with a reverend from the Black Methodist Church, who has particular insight into rough sleepers. This relationship is informing an event around holistic support for rough sleepers, and having proven that the council is listening, the Champion is now bringing ever more ideas to the table.

Monitoring, Evaluation and Lessons Learned

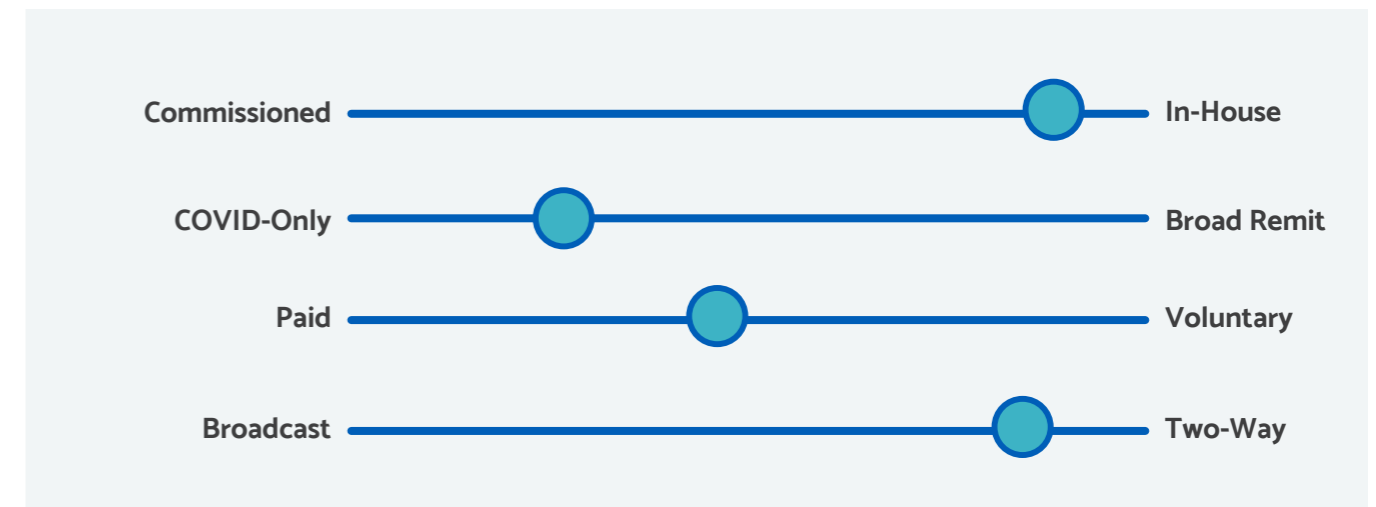
An interesting insight was that clear communication wasn’t just about translating into local languages, but also adapting for different levels of literacy, including with English. The Champions responded by working with leaders of community groups to identify pockets of illiteracy, helping people feel comfortable with the fact their reading may not be the best, and speaking to them in activity-led sessions.

For the Vaccine Champions organisers, the question of how to measure success was a challenge. Is it about how many people are reached? Or how many are vaccinated? Ultimately, they decided to focus on the week-by-week successes and failures in a continuous learning loop. Each week, they’ll meet and talk through who they are speaking with, and how to apply learnings from one ward to another. For example, they found that wearing a Waltham Forest lanyard could negatively impact a conversation, and that ultimately, the most important factor was simply prioritising the time to make the connections and have repeated conversations.

Looking Forward

Feedback from people out in the community is that they feel like they’ve built up strong relationships and trust. So, although the formal Vaccine Champions programme is ending, there is a strong desire to evolve it in such a way to maintain those connections, which have proven difficult, historically, to create. The team is now supporting public health around polio and flu vaccinations, and hosting ongoing events for immigrants, rough sleepers and other hard-to-reach groups.

“Even in English, we had a massive issue in terms of literacy, particularly for clinically complex information. We had to show people how it worked instead. We started doing animations and realised that the visual elements were just as important as the written. That’s changed how we communicate.”



Wandsworth

”People initially resisted the Champions label. They didn’t want to be told what they were, but acknowledged for the leadership roles they were already playing. This is a crucial element before enabling, equipping and empowering residents to scale up what they already do. Then they can recognise themselves as Champions and use their social capital to communicate.”

Richmond and Wandsworth have been jointly operating a mobile outreach vehicle to target areas of the boroughs that are underserved or with lower uptake of the COVID-19 vaccine. Collaborating with partners has been key to the success of this public health programme, joined-up with partners in the ICB, primary care and voluntary sector. In addition to delivering the COVID vaccine, the bus offers blood pressure checks, NHS Health Checks, diabetes prevention and smoking cessation information. It has also been joined by fuel poverty charity Thinking Works and local food banks. The outreach was promoted to residents via letter drops, through press releases and on social media.

Formation and Format

Wandsworth has taken a hyperlocal approach to COVID community engagement and Champions, working within wards and specific communities to target groups with the highest levels of health inequalities, but also with strong, existing grassroots organisations already working to address health and wellbeing concerns.

At the beginning of the pandemic, a community action group was pulled together across Richmond and Wandsworth, bringing together leaders across the councils, NHS and community organisations to coordinate resources and build capability to address COVID-19. From this, targeted outreach with faith leaders and community groups, for example, at local mosques and the Somali Women’s Group, took place.

With the introduction of DLUHC CVC funding in 2022, work catalysed around four project workstreams, focused on data, capacity building, training, and communications. Programmes were jointly delivered by the community engagement and public health teams.

Activities and Success Stories

A centrepiece of Wandsworth’s Champions programme was a community film-making project, made on the Doddington and Rollo Estate in Battersea. Rather than directly engaging with residents who were vaccine hesitant, the programme focused on organisations and community leaders who were already positively inclined towards vaccination, across different demographics and age groups.

The three-month project kicked off with a community workshop, which used food to bring people to the table via a collaboration with Waste Not Want Not, a Battersea-based food sharing organisation. The council brought clinical experts and information resources on the vaccine, but the conversation was driven by participants’ own experiences of COVID, Long COVID, lockdowns, and the impact of the pandemic on daily life. It included role play around having difficult conversations about the vaccine without jeopardising relationships.

Footage captured during the event was turned into a nine-minute film by a local film-maker, launched at the end of July 2022, with over 100 people in attendance. The event included a pop-up vaccination site and inspired a number of people to commit to being Champions in the future. The film is available at <https://www.facebook.com/watch/?v=121775839010509>.

In parallel, the Fuel Poverty team in Wandsworth delivered a successful campaign, which combined COVID vaccine messaging with information on energy and water savings measures. Four fuel poverty staff members were trained on vaccine messaging, and this messaging was included in mail-outs, email campaigns, phone conversations with service users, and six curated events with 131 attendees. Additional Champions were recruited via these activities.

Communities that were initially distrustful took time to understand their role and build relationships with the council, but eventually transformed into confident leaders and co-creators. What started as a slow mobilisation has turned into a groundswell over time. Food played an essential role as a motivator, connector and enabler for conversations in the community about COVID-19 and being a Community Health Champion.

Monitoring, Evaluation and Lessons Learned

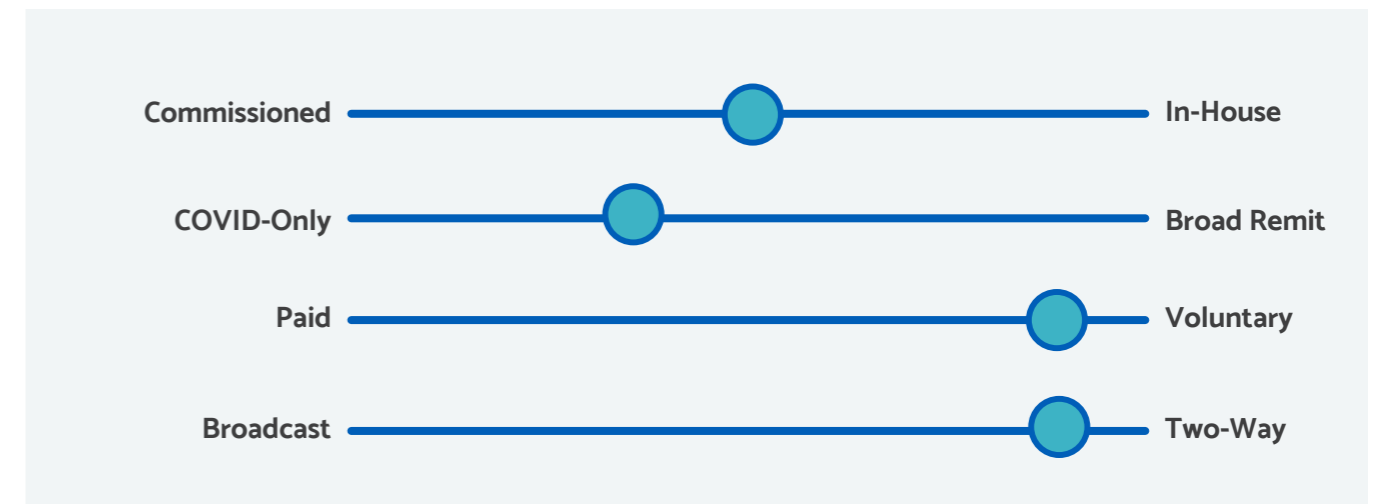
Intercepting existing organisations and advocates working in the community enabled Wandsworth to work at pace, and within the places and groups residents already identify with. One consequence of this hyperlocal approach was an oversaturation of messaging to certain populations, as they received both targeted and general communications at multiple touchpoints.

A key learning from this was that communications could be more responsive and positive to the progress already made. Communities don’t just want to continuously hear that uptake is low; they want to hear about the small, incremental positive impact that their efforts are making over time. This makes the conversation more two-way and builds trust and engagement over time. Another learning centred around the power of video communications. Much of the ”anti-vax misinformation” travels on video via social media, and so the counter-message must as well.

Looking Forward

Building from the learnings across the pandemic, Wandsworth is now transitioning the Champions they’ve identified and the relationships developed into an ongoing Community Health Champions programme. This will include sharing key coordination resources across Richmond and Wandsworth and collaborating strategically with the ICB.

”We wanted a different type of narrative. The day was about creating a safe environment to talk about what is following COVID. And we were very much focused on the lockdown. What it was like for people? What does normal mean to them? How did people come out of the lockdown? What helped them? What impacted them? So in terms of young people, you can see on the screen, the audience, it was about children, young people, sixth formers who were about to sit exams, what it was like for them.”



Supporting References

Key Acronyms

ADPH	The Association of Directors of Public Health
BAME	Black, Asian and Minority Ethnic
BLM	Black Lives Matter
CCG	Clinical Commissioning Group
CCG GP	Clinical Commissioning Group General Practitioner
COM-B	Capability, Opportunity, Motivation, Behaviour
CVC	Community Vaccine Champions
CVS	Council for Voluntary Services
DLUHC CVC	Department of Levelling Up Community Vaccine Champions
EVA	Enfield Voluntary Action
ESOL	English to Speakers of Other Languages
FAQ	Frequently Asked Questions
GDPR	General Data Protection Regulation
GP	General Practitioner
HCVS	Hackney Community and Voluntary Sector
HMO	House in Multiple Occupation
ICB	Integrated Care Board
ICS	Integrated Care System
IDS	The Institute of Development Studies
JSNA	Joint Strategic Needs Assessment
LGBTQ+	Lesbian, Gay, Bisexual, Transgender, Queer+
MECC	Making Every Contact/Conversation Count
MEOC	Make Every Opportunity Count
NHS	National Health Service
QandA	Question and Answer
RBG	Ruth Bader Ginsburg
RSPH	Royal Society for Public Health
VCH	Volunteer Centre Hackney
VCS	Voluntary and Community Sector
WRAP	Waste and Resources Action Programme

DLUHC CVC Grants

Authority	Phase 1	Phase 2
Barking and Dagenham		£485,000
Barnet		£461,500
Bexley		
Brent	£733,333	£185,000
Camden		£485,000
Croydon		£485,000
Ealing		£485,000
Enfield		£485,000
Greenwich	£720,000	£185,000
Hackney	£288,654	£185,000
Hammersmith and Fulham		£485,000
Haringey	£294,100	£185,000
Harrow	£495,000	£185,000
Havering		
Islington		484,689
Kensington and Chelsea		£485,000
Kingston upon Thames		£485,000
Lambeth		£485,000
Lewisham	£275,917	£185,000
Merton		£485,000
Newham		£485,000
Redbridge		£485,000
Richmond upon Thames		£485,000
Southwark		£485,000
Sutton		
Tower Hamlets		£485,000
Waltham Forest		£485,000
Wandsworth		£485,000
Westminster		£485,000
London Total	£2,807,004	£10,971,500

<https://www.gov.uk/government/news/community-champions-to-give-covid-19-vaccine-advice-and-boost-take-up>

<https://www.gov.uk/government/news/national-effort-to-vaccinate-vulnerable-communities-receives-funding-boost>



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