September 2021 Impact Evaluation of the Coronavirus Comunity Support Fund

Final Report

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Impact Evaluation of the Coronavirus Community Support Fund: Executive Summary September 2021

Introduction

The CCSF was targeted at small and medium sized community organisations delivering activities and support to people affected by the COVID-19 crisis. A total of £199m was allocated to the CCSF and £187m was distributed after administration and evaluation costs had been deducted. It was funded through the Department for Digital, Culture, Media and Sport (DCMS) and The National Lottery Community Fund (The Fund) was appointed to manage and distribute the funding.

Ipsos MORI, in partnership with New Philanthropy Capital (NPC) and The Tavistock Institute of Human Relations (TIHR), was commissioned to undertake an evaluation of the Coronavirus Community Support Fund (CCSF). This document summarises the findings from an assessment of the impact the CCSF had on the people and communities that were supported, the organisations that were funded, and the volunteers involved.

The CCSF had two primary objectives to:

- Increase community support to vulnerable people affected by the COVID-19 crisis, through the work of civil society organisations.
- Reduce temporary closures of essential charities and social enterprises, ensuring services for vulnerable people impacted by COVID-19 had the financial resources to operate.

The CCSF was distributed via The Fund's existing products – **Simple** (grants up to and including £10k) and **Standard** (grants over £10k). Grants were awarded between **June and November 2020** and grantholders had up to six months to spend their grant.

A Theory of Change for the CCSF was developed, which set out the intended outcomes for the following groups:





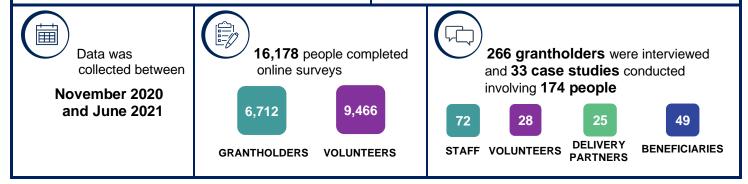


PEOPLE and COMMUNITIES ANTHOLDERS and STAFF

The evaluation was designed to test a set of **hypotheses** using **contribution analysis** to assess the extent to which the CCSF contributed to its intended outcomes for these groups. The evaluation used an interlinked research design, with **multiple data collection strands**, which were purposefully and iteratively designed to gather complementary evidence to inform the evaluation.

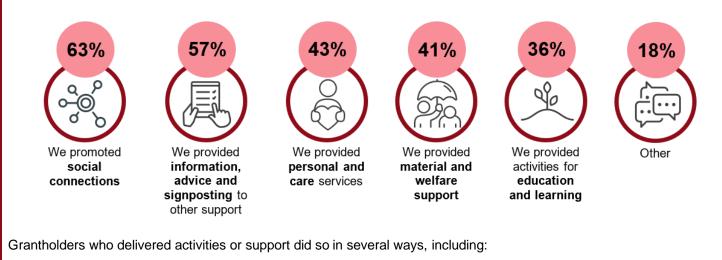
Data was collected through two **online surveys** with grantholders and volunteers, **online interviews** with grantholders and **case studies** involving interviews with grantholder **staff**, **volunteers**, **delivery partners and beneficiaries**.

The full set of evaluation reports can be downloaded here.



Overview

The Fund distributed **8,247 CCSF grants**¹. Most grantholders (82%) used the funding to **adapt new (59%) and/or existing (55%) activities**. Around half used the grant to **continue to operate (48%), and/or to respond to increased demand (44%)**. Most used their grant to meet **more than one of these needs**. Those who used the funding to respond to increased or changed demand used their grant for a wide range of purposes, as shown below.



- Widespread reliance on **phone** (68%) and **online** (65%) delivery methods.
- Most (58%) carrying out some face-to-face delivery despite the COVID-19 restrictions that were in place throughout the CCSF funding period.
- Extensive use of other forms of communication, including messaging by text, email or WhatsApp (55%); written advice or materials (50%); and social media (49%).

Across delivery modes, **one-to-one support** was the most common approach, and most grantholders engaged beneficiaries for **three months or more**, with relatively few delivering one-off activities.

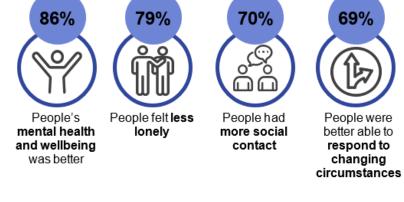
) People and Communities

Grantholders reported working with a median of **140 beneficiaries** each. Extrapolating the survey results up to the fund as a whole suggests that an estimated **6.58 million people**² were reached by CCSF grantholders.

Grantholders delivered support to a wide range of beneficiaries. The most common groups were people with **mental health conditions** (40%), people with a **long-standing illnesses or disability** (39%), **children and young people** (39%), and people **facing financial hardship** (36%). Most grantholders (70%) supported **more than one beneficiary group** and over a third (39%) supported **four or more groups**.

Grantholders reported a **wide range of positive outcomes** for beneficiaries as a result of the support delivered through CCSF. Nearly all (95%) said their beneficiaries had experienced **more than one** positive outcome and the majority (81%) thought their beneficiaries had experienced **four or more** positive outcomes.





¹ This figure slightly differs from the total no of grantholders that were eligible to take part in the grantholder survey (8,171), as the latter takes

into account a small number of award withdrawals and missing data that prohibited the dissemination of the survey.

² This figure is likely to include some double counting of individual beneficiaries that were supported by more than one of the grantholders.

Beneficiaries who participated in case study interviews talked about how the support received had made them **feel less lonely and isolated** during the pandemic.

Around half of grantholders reported that their activities had helped **reduce or prevent the need for public services** (53%) and / or **supplement the use of public services** amongst their beneficiaries (51%). A range of examples were provided of how the support they delivered had impacted on demand for public services, with the most frequently cited being those relating to **reduced demand for health services**.

Some of the support delivered by CCSF grantholders, such as signposting to other sources of support, could have contributed to an **increase in demand for public services** in the short term. However, this could be expected to contribute to reduced demand in the longer term through **early intervention**. Grantholders also reported **increased resilience in beneficiaries** through the development of better skills, strengths and assets than they would have without the support. This was also expected to contribute to a reduction in demand for public services in the **longer term** as they are better able to deal with challenges.

angle Grantholders and Staff

The CCSF contributed to ensuring an estimated **3,900 grantholders** had the **financial resources to continue to operate** during the pandemic.

One in five grantholders (19%) used their CCSF grant to bring back or prevent staff from going on furlough. In total, CCSF grantholders **brought back or prevented an estimated 6,210 employees** from furlough (a median of two staff per organisation).

The CCSF supported an estimated **7,380** grantholders to respond to increased and/or changed demand. Grantholders used the funding to adapt to online delivery (58%), reach new beneficiaries (56%), increase capacity to deliver existing activities (46%), begin new activities (42%) and adapt face-to-face activities (40%). Without CCSF, grantholders would have...



To meet demand, grantholders used their CCSF grant to adapt their staff resourcing in one or multiple ways:

- Almost half (46%) increased staff hours, totalling an estimated 107,200 additional hours/week.
- One in four (24%) recruited staff, totalling an estimated **4,240 new employees.**

Combined with those brought back or prevented from furlough, an estimated **10,450 staff were retained/recruited** through the CCSF.

)) Volunteers

The majority (81%) of grantholders worked with volunteers during their CCSF grant. An estimated **183,200³ volunteers** were involved with activities funded through the CCSF, with (an estimated) **47,200⁴** of these (just over a quarter) being **new volunteers that grantholders had not worked with previously**. Those who were new to volunteering were more likely to be younger, in work and / or from an ethnic minority background than those who had volunteered before.

The CCSF contributed to an estimated **4,420 grantholders** being able to adapt their volunteer resource to meet an increase or change in demand, which was achieved through:

- More than half (60%) increasing their volunteer hours, totalling an estimated 170,320 additional hours per week (median of 13 additional hours per organisation).
- Two in five (39%) recruiting new volunteers, totalling an estimated **47,240⁵ new volunteers**.

The CCSF enabled (both directly and indirectly) some grantholders to maintain or increase their volunteer hours. **Grantholders reported having avoided reducing volunteer support** by using their grant to:

- Provide training and IT equipment to enable volunteers to deliver activities and support virtually.
- Cover equipment costs to enable volunteers to continue to deliver activities and services face-to-face, (for example, PPE).
- Increase staff hours or recruit a volunteer coordinator in order to manage volunteer resource.

Grantholders also adapted the types of activities volunteers delivered in response to changed demand from people and communicated impacted by the pandemic. Volunteers reported undertaking new activities in response to pandemic-related circumstances. For example, more volunteers helped people access food and essential items.

Almost all (99%) of those who volunteered for an organisation funded by the CCSF reported at least one positive **benefit** to themselves as a result of this experience.

The most notable positive benefits reported by volunteers were:

- Greater sense of connection to the local community (56%).
- Improved mental health and wellbeing (48%).
- Reduced loneliness and social isolation (32%).
- Skills development (39%) and increased confidence (31%).

A range of examples of the positive benefits experienced by volunteers were provided by those who participated in case study interviews.

The majority (92%) of volunteers said they would volunteer again in the future.

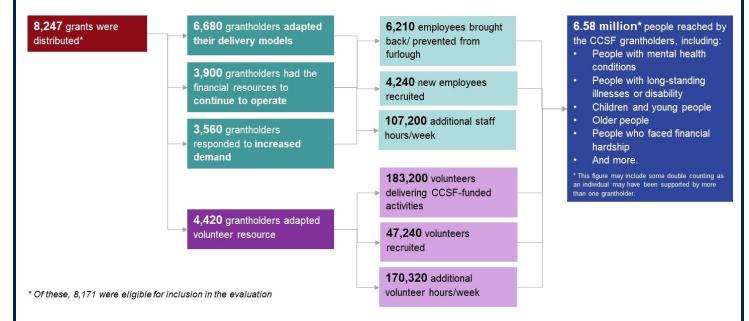
³ Please note that this figure may include some double counting, as it is based on an extrapolation of the findings reported by individual organisations in the grantholder survey, and volunteers may have worked with more than one grantholder.

⁴ This figure may also include double counting for the same reasons as noted above.

⁵ This figure may include some double counting as volunteers may have provided support to more than one grantholder.

Conclusions

The figure below summarises how the CCSF grants were used. These figures, with the exception of the total number of grants distributed, are estimates based on an extrapolation of the grantholder survey results.



The evidence suggests that CCSF achieved its first objective to **increase community support to vulnerable people affected by the COVID-19 crisis**, through the work of civil society organisations. CCSF grantholders were successful in **reaching people and communities disproportionately affected by COVID-19** and most organisations reported they would have delivered fewer services without their CCSF grant.

The evaluation also found **promising evidence in support of the CCSF's second objective to reduce temporary closures** of essential charities and social enterprises, though this was less notable for larger organisations. Overall, the CCSF was found to have helped ensure that organisations had financial resources to operate and continue to provide their support.

However, the **evidence was less clear regarding the impact on public services**. In some cases, the support delivered through CCSF may have **reduced demand** for public services amongst beneficiaries in the short or longer term. At the same time, grantholders provided advice, guidance and signposting, which could potentially have **increased demand** for public services the short term.

It is important to situate the evidence within the wider context of factors that also appeared to influence some of the outcomes observed. For example, other funding sources also contributed to grantholders' ability to remain financially viable and/or continue delivery. Grantholders also acknowledged that there were other potential sources of support available to beneficiaries, and that these could also have contributed to positive outcomes. Certainly, in some cases, the CCSF plus other necessary factors, such as additional funding for grantholder organisations, worked in complementary ways to result in positive change. Despite this, the evidence demonstrated that the CCSF was among the most important financial contributors to the achievement of outcomes – and for some the singular most important contribution.

The evaluation has also contributed to **an evidence base for evaluating emergency funding programmes** and identified learning for designing future evaluations.



Ipsos MORI, in partnership with New Philanthropy Capital (NPC) and The Tavistock Institute of Human Relations (TIHR), was commissioned to undertake an evaluation of the Coronavirus Community Support Fund (CCSF). The CCSF was targeted at small and medium sized community organisations delivering activities and support to people affected by the COVID-19 crisis.

1.1 Context and background to the CCSF emergency funding

COVID-19 and the associated lockdown enforced by the UK Government in late March 2020 disproportionately affected some people and communities. Widespread recognition of these challenges led Voluntary, Community and Social Enterprise (VCSE) sector representatives to voice their concerns about the financial health, limited resource and ability of VCSE organisations to meet the increased and often changed nature of demand in the absence of Government intervention. A total of £199m was allocated to CCSF and £187m was distributed after administration and evaluation costs had been deducted. It was funded through the Department for Digital, Culture, Media and Sport (DCMS) and The National Lottery Community Fund (The Fund) was appointed to manage and distribute the funding.

The CCSF had two primary objectives:

- To increase community support to vulnerable people affected by the COVID-19 crisis, through the work of civil society organisations.
- To reduce temporary closures of essential charities and social enterprises, ensuring services for vulnerable people impacted by COVID-19 have the financial resources to operate, and so reduce the burden on public services.

CCSF funding was distributed via existing products offered by The Fund:

- Simple product: grants up to and including £10k delivered via National Lottery Awards for All.
- Standard product: grants over £10k.

All those awarded funding (*hereafter referred to as grantholders*) had up to 6 months to spend their grant⁶. During the period the CCSF grants were used by grantholders, the context continued to change

⁶ This was a condition of the CCSF given the emergency nature of the funding, which was intended to provide short term financial support to charities to enable them to continue to operate and deliver support to people and communities in need during the pandemic. Further detail on the nature of the funding and the processes for distributing this is provided in the CCSF Process Evaluation Report.

for people and communities, and for the organisations that received grant funding. There were further England-wide lockdowns, as well as a variety of local and tiered restrictions applied in different places. In addition to the effect these changing restrictions had on people and communities, there were further challenges for organisations, their staff and volunteers in delivering the activities and support funded by CCSF. It is important to consider this changing context when interpreting the findings from the evaluation.

1.2 Aims and objectives of the evaluation and this report

The evaluation was made up of three inter-related strands of work:

- An **impact strand** to assess the difference the CCSF has made to the organisations that are funded, the people and communities that are supported, the volunteers and wider society.
- A process strand to understand how the funding process has worked⁷.
- A value for money strand (VfM) to assess the value to the public purse that the funding achieves.

A fourth strand of work was also commissioned, which aimed to generate a range of **real-time learning** opportunities and outputs throughout the life of the programme for the benefit of grantholders.

The results of each of the four strands of work have been summarised in distinct reports, which are available to read and download on the <u>Insights page of The Fund's website</u>. The key messages from these are summarised below.

- Process evaluation: The CCSF was found to be an effective route to distributing emergency
 response funding. The funding reached the intended organisations as set out in the funding
 criteria, with the majority going to small or medium sized organisations working with people and
 communities disproportionately impacted by the pandemic. Lessons were learned that will be
 available should a similar response be required in future.
- Value for money: Overall the CCSF appears to have provided value for money. The value of the grants per beneficiary and the cost of the key outputs (retaining and recruitment of volunteers and staff) were similar to what would be expected under typical circumstances. There is no indication the grants were excessive. A cost benefit analysis tentatively suggests the CCSF created £1.86 in benefits for every £1 spent, although this is a central estimate within a wide range. There were a number of challenges faced in delivering an economic evaluation of the CCSF and the aim was to produce the most credible estimates possible given the unprecedented context and resultant limitations in the data and evidence available.
- Learning hub: The aim of the learning hub was to create opportunities for grantholders to build new connections and share learning on the ways they addressed the challenges of working through COVID-19. Feedback from grantholders who engaged in Learning Hub activities was consistently very positive, but challenges were faced in maintaining and broadening engagement. The report identifies a number of lessons learned from delivery of the learning hub.

⁷ The Final Process Evaluation Report is available here <u>https://www.tnlcommunityfund.org.uk/insights/covid-19-resources/responding-to-covid-19/ccsf-grantholder-evaluation</u>

This report sets out the findings from an assessment of the impact CCSF has made to the organisations that were funded, the people and communities that were supported, the volunteers involved, and wider society.

1.3 Theory of change and evaluation hypotheses

The Theory of Change (ToC) sets out how the programme's inputs and activities were expected to result in the intended outcomes and impacts, which informed the design of the evaluation and act as the foundation against which we have assessed the success of the programme. A number of key stakeholders were involved in shaping and refining the ToC for the CCSF. Following an initial draft developed to inform the evaluation proposal, a series of familiarisation consultations and a desk-based review of programme documentation and wider literature were conducted to inform the second iteration of the ToC. Feedback was collected from The Fund and DCMS stakeholders during a workshop, as well as from our Evaluation Expert Advisory Group⁸. From here, an iterative approach to incorporate feedback was applied to inform the design of the ToC.

The ToC was based around the four main groups that were most likely to be affected by CCSF funding:

- Grantholders: This refers to community support organisations that were awarded CCSF funding. • Grantholder organisations encompass two groups described below: staff and volunteers.
- Staff: This includes individuals who were directly employed by the grantholder as either full-time or part-time staff, including those furloughed due to the pandemic – who were specifically retained, redeployed or recruited to deliver activities/support funded by the CCSF.
- **Volunteers:** This includes individuals who either (1) gave unpaid help through a group, club or organisation (formal volunteering) or (2) provided unpaid help as an individual to people who were not a relative (informal volunteers)⁹, and were specifically redeployed or recruited to deliver activities/support as part of the CCSF. Insights from informal volunteers were perceived to be harder to establish because these volunteers may not provide their contact details to the organisations or they may not self-identify as a volunteer, for example, viewing this as 'neighbourliness'. The analysis therefore focuses on formal volunteers.
- **People and communities:** This includes people and communities who received support from grantholder organisations as a result of the funding. It was anticipated that this would include those disproportionately affected by the COVID-19 pandemic.

Each of these four main groups was associated with its own anticipated outcomes as a result of the funding. The funding was distributed directly to grantholders with immediate implications for staff and volunteers. Subsequently, people and communities were supported by the grantholders, staff and volunteers through activities made possible by the CCSF. This support for people and communities was the primary purpose of the funding, with the grantholder acting as an intermediary. As such, the evaluation defined outcomes for people and communities as indirect compared with the direct outcomes for grantholders, staff and volunteers.

⁸ The Evaluation Expert Advisory Group for the impact and VfM strands of the evaluation comprised of: Geoff White, an associate of Ipsos MORI with over 30 years' experience of advising UK Government departments and agencies on policy and programme evaluations and appraisals; George Barrett, an associate of Ipsos MORI who was the Chief Economist and Research Director for the Ecorys Group for over 20 years; Dan Corry, the Chief Executive of NPC; and Professor John Mohan, the Director of the Third Sector Research Centre.

⁹ Using international definitions of formal and informal volunteering.

Figure 1.1 overleaf depicts the logic model for the CCSF, which is a diagrammatic representation of the ToC. The logic model shows the key inputs, activities, outputs and outcomes for each of the four main groups, as well as for The Fund. The arrows in the diagram represent the anticipated pathways whereby activities were expected to lead to outputs and then outcomes, providing a set of causal chains to be assessed by the evaluation.

The causal chains in the ToC – describing how the programme intended to achieve its aims – have been framed as a set of hypotheses that were

What is the purpose of evaluation hypotheses?

Evaluation hypotheses form the basis upon which we are able to develop a Theory of Change. They should ideally:

- Be framed by a set of contextual and programme related assumptions
- Include all the primary theories you wish to assess/test
- Be as specific as possible
- Be manageable in number

It's also important to note that hypotheses do not need to be mutually exclusive.

tested by the evaluation. The overarching programme hypothesis (see Box 1.1) aligns with the two objectives of CCSF set out above (see Section 1.1).

Box 1.1: Overarching programme hypothesis

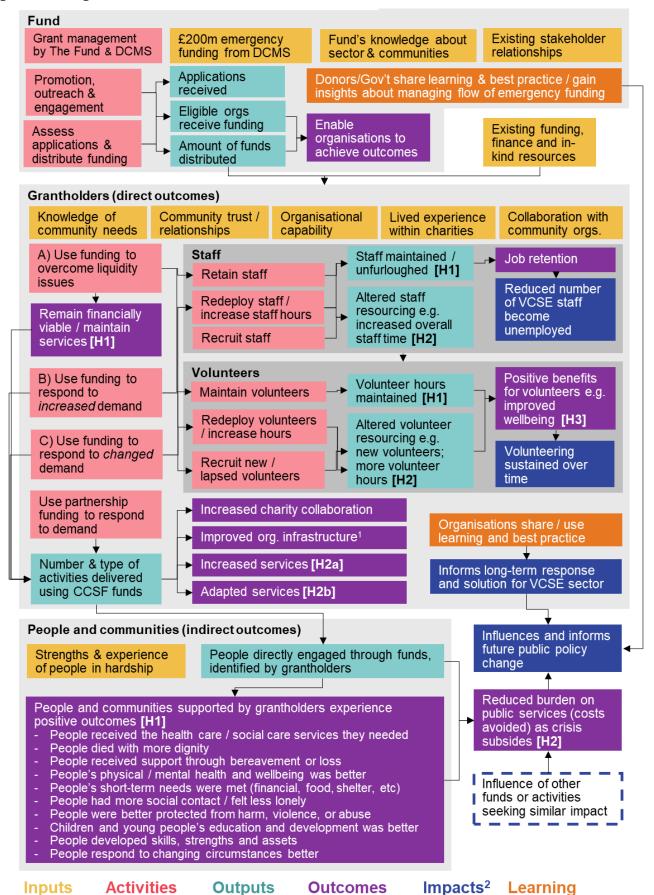
CCSF funding has been provided to organisations that have identified and worked with the individuals and communities who have been disproportionately affected by COVID-19. These organisations have funded activities that have assessed immediate needs, delivered appropriate support/activities and achieved positive outcomes for individuals and communities. By funding this work, the CCSF has also contributed to the financial health, capacity and capability of some organisations.

Specific hypotheses for grantholders, staff, volunteers and people and communities sit under this overarching hypothesis, and these are labelled in the logic model using the shorthand [H1], [H2], etc. By collecting evidence against each of these underpinning hypotheses, the evaluation sought to aggregate the evidence to test the overarching hypothesis. Further details of the hypotheses set out in the ToC for each of the four main groups are included in the relevant chapters setting out the evidence that forms the basis of this report (see Chapters 3-5).

All hypotheses were framed to provide a statement of intent that would not have been possible in the absence of the CCSF. It was anticipated that there would be strong associations between hypotheses and it is important to note that they are not mutually exclusive. Additionally, the hypotheses were developed to reflect the short-term nature of the grant period, and hypotheses about the longer-term outcomes and impacts fall outside the scope of this evaluation.

The aim of this report is to provide an assessment of the extent to which the findings are supportive of these hypotheses. Further details of the analytical approach and data informing this report are described below.

Figure 1.1: Logic model for the CCSF



¹ Organisational infrastructure is specific to the Fund's COVID-19 Emergency Response programme. ² Given the limited evaluation timeframe, only indicative evidence will be available to extrapolate longer term effects using existing evidence, where possible.

1.4 Analytical approach

Overarching analytical approach

The impact evaluation is grounded in contribution analysis in the absence of a quantitative counterfactual which proved an unfeasible approach within the emergency context.

Contribution analysis provides a framework to assess **whether an intervention contributed to a set of hypothesised outcomes**, and how and why the intervention made a difference. For the impact strand of the CCSF evaluation, the primary aim was to examine the extent to which there was evidence that supported (or conflicted with) the claims made in the **overarching hypothesis** about the CCSF's contribution.

This assessment was undertaken using an **'interlinked research design'** (Koleros, A., Taylor, B., & Ton, G., 2018), with **multiple data collection strands**, that were each purposefully



Contribution analysis does not answer impact questions with a yes/no answer, but rather by a series of logical steps, each 'increasing our confidence that the intervention had an impact' (Befani and Mayne 2014: 17).



and iteratively designed to gather complementary evidence to inform the evaluation. The resultant primary and secondary data collection (see methodology section) enabled the **triangulation of several sources of evidence** against each of the underpinning hypotheses set out in the CCSF ToC. The analysis was undertaken at three levels that examined evidence (1) *within* singular data sources and (2) *across* data sources for each underpinning hypothesis, and ultimately examined the evidence (3) across underpinning-hypotheses to assess the overarching hypothesis.

The selection of key variables for analysis was largely guided by the evaluation taxonomy developed during the scoping study (see Annex C) with some additional analysis undertaken using supplementary variables in cases where further exploration of the data improved understanding of the evidence in support of the hypotheses.

Importantly, using contribution analysis acknowledges that **the CCSF took place in a complex system**. This included other emergency funding and grants being distributed around a similar time (of varying scale) and wider contextual influences due to changing COVID-19 guidance and restrictions. The evaluation prioritised looking at **'alternative explanations'** that may have meant the anticipated outcomes would have occurred without the CCSF, for example, through other emergency funding for grantholders or through non-CCSF-funded delivery for beneficiaries.

Chapters 3-5 of the report provides detailed assessments of the underpinning hypotheses. These are set out using the following convention for each hypothesis and include a **rating for the degree of confidence** (using a 3-point scale), which takes into account whether the evidence relies heavily on data that was **direct or indirect** (e.g. grantholder reported outcomes for beneficiaries) and whether the evidence is weakened by **alternative explanations**.

STEP ONE: SUMMARY ASSESSMENT

• Boxed summary assessment of (1) the extent to which there was evidence to support or refute the hypothesis and (2) the primary alternative explanations that have been identified

STEP TWO: UNDERPINNING EVIDENCE

•Explanation of the underpinning quantitative and qualitative evidence that was triangulated to form the basis of the summary assessment

Cluster-based analysis

The evaluation also explored the feasibility of developing a cluster-based analysis to provide a richer narrative about the relationships between grantholders that shared common properties. The results of this exercise highlighted the inherent challenges associated with 'segmenting' a programme that was not designed to fund a specific type of activity or support a specific beneficiary group, but instead was intended to flexibly fund activities and support that met diverse, local need. For reasons of brevity, the output of this work forms the basis of a distinct spotlight findings paper which can be read in conjunction with this report.

1.5 Methodology and interpretation of the data

Data used for analysis

<u>Underlying research tools iteratively designed</u>

to inform the contribution analysis

In addition to contextual information from The Fund's Grant Management System (GMS), which contained data gathered as part of the CCSF application process, the analysis is based on the following:

- Grantholder survey findings in this report are based on a total of 6,712 responses received from 8,171 eligible grantholders¹⁰ who were invited to take part in the online survey in the sixth month of their grant. This was a response rate of 82%.
 - Volunteer survey findings in this report are based on 9,466 volunteers who took part in the online survey. The survey was distributed by grantholders, who were asked to send survey links to their networks of volunteers. This means that it is not possible to calculate a response rate for the survey, as there is no record of how many people were invited to participate.
 - Qualitative research findings in this report are based on 266 interviews with grantholders, and a further 33 case studies, both of which were purposefully sampled. The case studies involved 174 participants in addition to the grantholder interview that informed them (72 staff, 25 partner organisations, 28 volunteers and 49 beneficiaries). Hard and soft quotas were identified at the outset and tracked throughout the fieldwork period to ensure a good cross-section of grantholders were sampled and interviewed and subsequent case studies were undertaken.

¹⁰ This figure slightly differs from the total no of awards that were originally distributed by The Fund (8,247), as those eligible to take part in the grantholder survey (8,171) take into account a small number of award withdrawals and missing data that prohibited the dissemination of the survey.

Strength and quality of the evaluation evidence

The data collection methods employed by the evaluation, successfully captured large-scale and broadly representative quantitative and qualitative evidence, that provided logical and generally consistent findings across the sequential waves of research that were delivered. Furthermore, the iterative contribution analysis undertaken, which involved regular analysis of the cumulative evidence base, also demonstrated the complementarity of findings between the individual data sources. Taken in the round, this suggests that we can place a high degree of confidence in the accuracy of the evidence collected, with the exception of a few notable limitations which are described below.

Interpreting the grantholder survey data

All survey findings are subject to a margin of error, and confidence intervals are used to express the degree to which any given answer might differ from that observed in the population of interest. For the purposes of this study, when talking about confidence intervals, we refer to 95% confidence around the survey estimate, i.e. that we can be 95% confident that the figure lies between +/- x%.

Given the large sample size relative to the population for the grantholder survey the confidence intervals for this element of the study are small: +/- 0.5% at a baseline of 50% (where tests of confidence are most sensitive). This means that there is a 95% likelihood that the true population value is +/- 0.5% of the figure reported in the survey.

There are specific elements of the grantholder survey where more caution should be taken when interpreting the figures reported. At several points in the survey grantholders were asked to estimate key numeric data (for example, the number of beneficiaries supported with the grant received, the number of volunteers worked with during the time period of the grant, and the number of staff recruited). Extraneous data was internally validated by the evaluation team and The Fund¹¹ (details of the approach taken and the resultant outcomes can be found in Table 1.1, Annex B), but despite this a small number of outliers remain that skew survey figures. As a result, such data should be treated with a degree of caution. Where applicable we have used medians to describe numeric data since this calculation is less prone to being skewed by a small proportion of extremely large or extremely small figures¹².

It should also be noted that findings from the grantholder survey:

- May be subject to positive bias and do not take into account any substitution or displacement effects that may have taken place (i.e. they are self-reported gross figures as opposed to net figures).
- That relate specifically to volunteers are based on those grantholders who worked with volunteers (see Chapter 5 for further details).

Interpreting the volunteer survey data

For the volunteer survey it is not possible to calculate confidence intervals as this is a non-random selfselecting sample. However, it is important to note that the survey may have been completed by more engaged volunteers given the way in which the survey was administered (i.e. via grantholders).

¹¹ Verifying the figures with grantholders was beyond the scope of the evaluation.

¹² The median is the middle number, found by ranking all data points and selecting the one in the middle (or if there are two middle numbers, taking the mean of those two numbers).

Interpreting the qualitative data

Qualitative research is designed to be exploratory and provide insight into people's perceptions, feelings and behaviours. The findings are therefore not intended to be representative of the views of all people who may share similar characteristics and cannot provide a basis for generalisation in the same way that surveys can. However, the relatively high volume of qualitative research that was undertaken to inform the evaluation and the approach taken to sampling (based on hard and soft quotas) means that in this case we can be relatively confident that the findings represent a good cross-section of CCSF grantholders. The high degree of consistency in key messages and themes emerging from across the qualitative research also provides confidence that saturation was reached through this element of the evaluation.

Outcomes experienced by people and communities

The evaluation did not include extensive primary research with beneficiaries, although a small number of beneficiaries were included in the qualitative case studies. It was decided that conducting further research with beneficiaries would have placed too much of a burden on grantholders, who would have had to have systems and processes in place to enable them to record beneficiary profile, store contact details securely and collect appropriate permissions for these to be shared with a third party. It would also have placed additional burden on those people who were being supported by grantholders, many of whom were already facing significant challenges. As a result, an indirect account of the outcomes experienced by the people and communities supported through CCSF-related activities was collected as part of the grantholder survey, which for clarity are described as 'grantholder-reported outcomes' throughout the report.

Reporting conventions

Findings from the grantholder survey have been extrapolated to estimate the overall figures among all grantholders¹³. This assumes that the findings among those who did not respond to the survey would have been replicated proportionally among those grantholders that did respond to the survey. The high survey response rate and the similarity between the profiles of grantholder survey respondents and all grantholders suggests this is a reasonable assumption (see Table 1.2 in Annex B).

Percentage results from the survey have been provided alongside estimated (numeric) extrapolated data throughout the report. Where figures do not add up to 100% this is the result of computer rounding or multiple responses. An asterisk (*) indicates a score of less than 0.5% but greater than zero.

Data tables setting out more detailed survey findings are included in Annex B. These are referenced in the appropriate sections throughout the report.

For the qualitative research, summary narrative has been provided on the key messages arising from the thematic analysis of the data collected and evidence is provided through verbatim quotes as examples of findings. To protect participant anonymity, quotations have not been attributed.

The impact assessment contained within this report is based on the evidence gathered and subsequent interpretation of this by the experienced Ipsos MORI evaluation team. Ipsos MORI did not predict or assume any particular substantive results of the evaluation in advance, nor do they accept any liability

¹³ The extrapolations have been calculated assuming that the numeric figures would increase proportionately for the grantholders that did not respond to the survey (i.e. by dividing the key numeric figures by the response rate and multiplying by 100). The upper and lower bounds of each survey response have been provided in Table 1.3, Annex B.

for (i) Client's interpretation of Ipsos MORI's reports or data produced as part of the evaluation, or (ii) any inaccuracies caused by errors in the data provided to Ipsos MORI.

1.6 Structure of document

The remainder of the document is structured as follows:

- Chapter 2 summarises how the CCSF grants were used, including the types of activity funded, the beneficiaries reached, the outcomes achieved, and the role of volunteers; details of the segmentation are also included.
- **Chapter 3** presents an assessment of the impact the CCSF had on the people and communities that were supported by grantholders.
- Chapter 4 presents an assessment of the impact the CCSF had on its grantholders, including staff.
- **Chapter 5** presents an assessment of the impact the CCSF had on the volunteers involved in delivering the relevant activities of the grantholders.
- **Chapter 6** sets out a summary of the evidence that has been collected in support of the individual hypotheses.

The report is also accompanied by a series of Annexes that can be found in a stand-alone document for reasons of brevity. This includes the following:

- Annex A sets out more detail on the approach used to undertake the evaluation.
- Annex B presents a comprehensive set of data tables that are referenced at the relevant points of the report.
- Annex C sets out the evaluation taxonomy that was developed during the scoping stage, which
 has been used to underpin the analysis presented in this report.

2 Overview of the CCSF

A lot of our work revolves around trying to work with people who are at risk of loneliness and isolation, and suddenly everybody's isolated, everybody's stuck at home." – Grantholder

Key findings

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- The majority (82%) of grantholders used the funding to enable them to adapt to deliver new (59%) and/or existing (55%) activities. Around half used the grant to continue to operate (48%), and/or to respond to increased demand (44%). Most used the grant to meet more than one of these needs (54%).
- Grantholders that delivered support did so in several ways. There was widespread reliance on phone (68%) and online (65%) delivery, although most also carried out some delivery face-toface (58%). Across all activities, one-to-one support delivered for three months or more was the typical approach.
- A wide range of beneficiaries received support. The most common groups were people with mental health conditions (40%), people with a long-standing illnesses or disability (39%), children and young people (39%), and people who faced financial hardship (36%). Over two thirds of grantholders (70%) supported more than one beneficiary group and two fifths (39%) supported four or more groups.
- Extrapolating the survey results up to the funding programme as a whole suggests that an estimated 6.58 million beneficiaries¹⁴ were reached by CCSF grantholders.
- Grantholders reported a wide range of positive outcomes for beneficiaries as a result of the CCSF. Nearly all (95%) said their beneficiaries had experienced more than one positive outcome and the majority (81%) thought their beneficiaries experienced four or more positive outcomes, although these were often interlinked such as increased social contact and reduced loneliness.
- The most common outcomes reported by grantholders were that people had better mental health and wellbeing (86%); felt less lonely (79%); had more social contact (70%); and were better able to respond to changing circumstances (69%).
- An estimated 183,200¹⁵ volunteers were involved with activities funded through the CCSF, with (an estimated) 47,200¹⁶ of these (just over a quarter) being **new volunteers** that grantholders had not worked with previously. Those who were new to volunteering were more likely to be younger, in work and / or from an ethnic minority background.

¹⁴ This figure is likely to include some double counting of individual beneficiaries that were supported by more than one of the grantholders. ¹⁵ Please note that this figure may include some double counting, as it is based on an extrapolation of the findings reported by individual organisations in the grantholder survey, and volunteers may have worked with more than one grantholder.

¹⁶ This figure may also include double counting for the same reasons as noted above.

2.1 Introduction

This chapter summarises how the CCSF funding was used, the types of activities that were funded, the beneficiaries reached, and the involvement of volunteers that gave unpaid time to grantholders during the pandemic. It also sets out the outcomes achieved for people and communities from the perspective of grantholders.

An assessment of the evidence for each of the underpinning evaluation hypotheses follows in Chapters 3-5.

2.2 How were the CCSF grants used?

More than four in five (82%) grantholders reported using the CCSF grant to adapt their delivery models to deliver new activities (59%) and/or to continue to deliver existing activities (55%). Just under half said they had used the CCSF grant to continue to operate (48%) and/or to respond to increased demand (44%).

In addition, most grantholders (54%) reported using the CCSF grant to meet more than one need (see Figure 2.1 below).

To ensure my organisation had the financial resources to continue to operate during the COVID-19 pandemic (1a and 1b) 8% Underlined = only selected one category (523) 3% 17% (172) (1,122) To help my organisation adapt To help my organisation its delivery models to deliver 21% respond to an increase in new activities or continue to demand for its activities during (1,383)deliver existing activities during the COVID-19 pandemic the COVID-19 pandemic (2a) 6% 30% (2b) 14% (398)(2.016) (967) 2% (Other) Base: all CCSF grantholder survey respondents (6,712) Note that percentages do not sum to 100% due to rounding. (131)

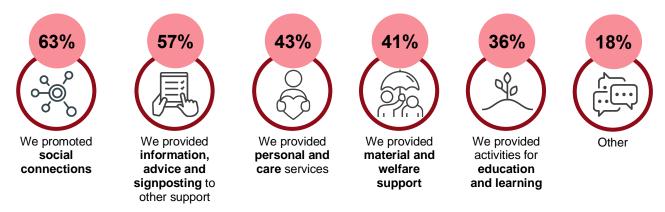
Figure 2.1: Overall use of CCSF grants

This overall assessment of how CCSF grants have been used has informed the approach to analysis that is presented throughout this report, which is structured around the following two groups:

- All grantholders who responded to the survey to reflect the non-discrete nature of most of the data, with most grantholders falling into more than one category in terms of the use of their grant.
- The 'mutually exclusive' sub-groups that are those shown in Figure 2.1 as falling into a single category rather than multiple. Where presented, these are referred to as grantholders who used the funding 'exclusively' to continue to operate / respond to an increase in demand / adapt existing or new services.

2.3 What activities were delivered as a result of the CCSF grants?

As set out in Section 2.2, the majority of grantholders (90%) used the CCSF funding to adapt their activities, develop new ones, or respond to increased demand during the COVID-19 pandemic. Among these grantholders¹⁷, two thirds (63%) used the funding to **promote social connections** and just under three in five (57%) reported providing **information**, advice and signposting to other support. Around two in five **provided personal and care services** (43%) or **material and welfare support** (41%). Just over a third provided **activities and support for education and learning** (36%).



Base: Grantholder survey respondents who used their grant to adapt existing services, develop new services or respond to an increase in demand (6.058)

Across all CCSF activities, most grantholders engaged beneficiaries for three months or more, with relatively few delivering one-off activities (see Annex B: Table 2.1).

Grantholders that delivered activities or support did so in several different ways. This included:

- Widespread reliance on **phone** (68%) and **online** (65%) delivery.
- Most carrying out some face-to-face delivery (58%), despite the COVID-19 restrictions that were in place (at different levels) throughout the CCSF funding period.
- Extensive use of other forms of communication, including **messaging** by text, email or WhatsApp (55%); written advice or materials, including on websites (50%); and social media (49%).

Across delivery modes, **one-to-one support** was the most common approach, with group or family support less prevalent (see Annex B: Table 2.2). The intensity and frequency of the support provided through CCSF grants is explored in more detail in Chapter 3.

2.4 Who were the ultimate beneficiaries of CCSF-related activities?

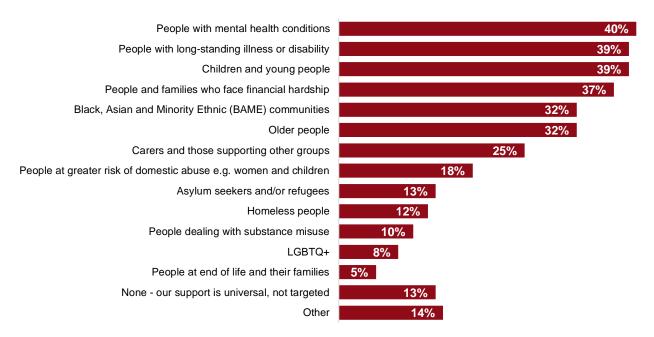
Grantholders reported **supporting a range of beneficiary types** as a result of the CCSF funding (see Figure 2.2):

 The majority had supported multiple beneficiary target groups, with over two thirds (70%) saying they had supported more than one group and two fifths (39%) saying they had supported four or more groups.

¹⁷ This includes all grantholder survey respondents who used the funding to adapt to existing services, develop new services, or respond to an increase in demand during the COVID-19 pandemic (6,058). The remaining grantholders used the CCSF grant to continue to operate or for other reasons.

- The most common beneficiary groups were people with **mental health conditions** (40%), people with **a long-standing illnesses or disability** (39%), children and young people (39%), and people who faced **financial hardship** (36%).
- An estimated **2,600** grantholders targeted **Black**, Asian or Minority Ethnic¹⁸ communities (32%).
- Around one third (32%) targeted **older people** and a quarter (25%) supported **carers and those supporting other groups**.

Figure 2.2: Types of people supported by grantholder organisations in receipt of funding from the CCSF



Base: All CCSF grantholder survey respondents (6,712) Source: Ipsos MORI Grantholder Survey

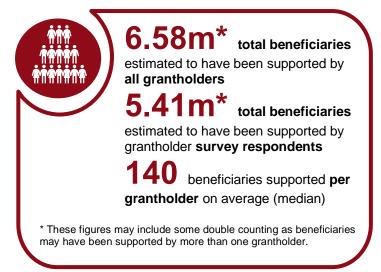
Grantholders were asked to report the specific number of beneficiaries they had supported and 91% of those responding to the survey were able to do so. A further 7% were able to estimate the number supported within a range. As noted in Chapter 1, beneficiary numbers need to be treated with some caution given that they were self-reported by grantholders. There is also a risk of some double counting given that individuals could have accessed support from multiple grantholders – there was one example from the qualitative research of where a group of CCSF grantholders in a local area had formed a group and were cross-referring beneficiaries to each other for support.

Grantholders reported working with a **median of 140 beneficiaries**¹⁹ as a result of the CCSF grant. This included significant variation in the number of beneficiaries reported **by size of organisation and size of grant** received. As might be expected, **larger organisations** (with a higher annual income) and / or those in receipt of a **larger grant value** reported working with the highest number of beneficiaries (see Annex B: Table 2.3). This suggests that those operating at a larger scale in terms of organisational size or funding, were able to engage and deliver support to larger numbers of people.

¹⁸ We recognise there are issues with this term as it emphasises certain ethnic minorities and excludes others. However, it has been used here as that is the name of the field that captured this data in the Grantholder Survey.

¹⁹ As noted in Chapter 1, all mean and median figures should be treated with caution and as gross output/outcomes that do not take into account any potential positive reporting bias, double counting, substitution or displacement effects.

A simple sum of the self-reported beneficiary numbers reported in the survey suggests that an estimated 5.41 million beneficiaries²⁰ were supported by the CCSF funding awarded through these grants. It is possible to estimate the total number of beneficiaries associated with the CCSF funding in scope for this evaluation, based on the assumption that a similar number of beneficiaries were supported by the other grantholders who did not complete the grantholder survey. On this basis, the selfreported beneficiary numbers suggest that the funding in scope for the evaluation could have supported an estimated **6.58 million beneficiaries**²¹.



Beneficiary numbers varied by type of support delivered. Grantholders that offered **material and welfare support** (such as support accessing household items, food, or emergency accommodation) **reported supporting the highest number of beneficiaries** – a **median of 210** (see Annex B: Table 2.4). In contrast, those who **offered personal or care services** (such as mentoring, counselling, or psychological support) **reported supporting the fewest beneficiaries** – a **median of 120**.

The majority (84%) of CCSF grantholders **had supported some new beneficiaries**²². This translated into these grantholders supporting a **median of 53 new beneficiaries** as a result of the CCSF grant (see Annex B: Table 2.5). As with all beneficiaries reached, those grantholders in receipt of larger grants and with higher organisational incomes reported working with the highest number of new beneficiaries.

2.5 What outcomes did grantholders report for beneficiaries?

Grantholders said their beneficiaries had experienced a wide range of positive outcomes as a result of CCSF-related activities and support (see Figure 2.3):

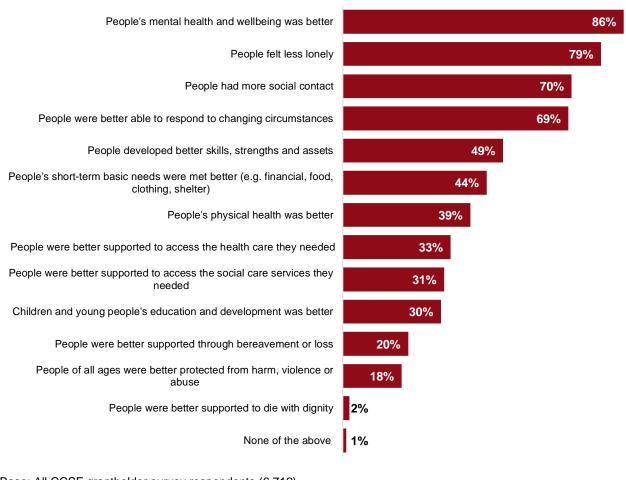
- Nearly all grantholders (95%) reported that some of their beneficiaries had experienced more than one positive outcome and four in five (81%) said some of their beneficiaries had experienced four or more positive outcomes. These were often interlinked, for example most of those who reported that people had more social contact also reported that people felt less lonely.
- The most common outcomes were that people's mental health and wellbeing was better (86%); people felt less lonely (79%); people had more social contact (70%); and people were better able to respond to changing circumstances (69%).
- Approximately half also reported that some of their beneficiaries had developed better skills, strengths and assets (49%) as a result of the CCSF grant and for some had their short-term basic needs had been better met (44%).

 ²⁰ This figure is likely to include some double counting of individual beneficiaries that were supported by more than one of the grantholders.
 ²¹ This figure is likely to include some double counting for the same reasons as described above.

²² This proportion increases to 95% if the 'don't know' category is removed. The 84% total is made up of 74% who supported both new <u>and</u> existing beneficiaries and 10% who <u>only</u> supported new beneficiaries.

Grantholders were asked to estimate what proportion of their beneficiaries had experienced the outcomes reported. The findings from analysis of the responses to this are discussed in Chapter 3.

Figure 2.3: Grantholder reported outcomes achieved by CCSF beneficiaries



Base: All CCSF grantholder survey respondents (6,712) Source: Ipsos MORI Grantholder Survey

2.6 What role did volunteers play in the CCSF?

Eight in ten **(81%)** grantholders **reported having worked with volunteers** during their CCSF grant, and these grantholders worked with an estimated **183,200**²³ volunteers in total. The average number of volunteers reported per organisation **increased in line with annual income and / or grant value** (see Annex B: Tables 2.6 and 2.7), reflecting the fact that such organisations tended to operate at a larger scale, reporting a higher number of beneficiaries and / or staff.

A third (31%) of grantholders reported using the grant received to **recruit new volunteers**, with an estimated total of **47,200**²⁴ recruited (26% of the volunteers reported overall).

Among those who worked with volunteers, three in five (60%) reported using the grant received to **increase volunteer hours** at their organisation, with an estimated total of **170,300** additional hours made available as a result of the funding. The average number of volunteers recruited per organisation,

²³ Please note that this figure may include some double counting, as it is based on an extrapolation of the findings reported by individual organisations in the grantholder survey, and volunteers may have worked with more than one grantholder.

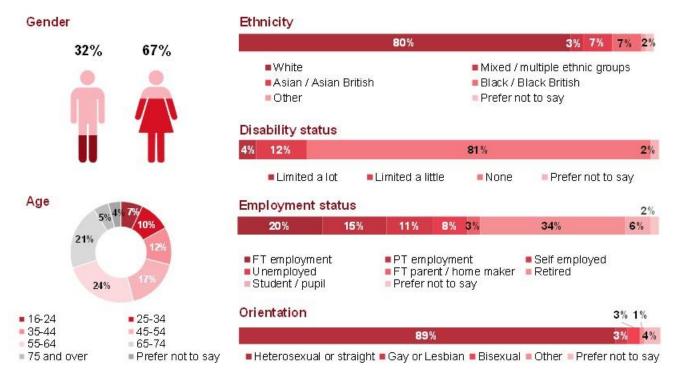
²⁴ This figure may also include double counting for the same reasons as noted above.

and additional volunteer hours made available, **increased in line with annual income and / or grant value** (see Annex B: Tables 2.8 and 2.9)

The majority of those who volunteered during the pandemic had done so before. Nine in ten (87%) had **prior experience of volunteering**, either for the grantholder organisation, or another community group or charity. Of this group, six in ten (62%) offered unpaid help to another community group or charity whilst also volunteering for the grantholder during the COVID-19 pandemic (33% of volunteers overall).

Seven in ten (68%) of those who volunteered were female while three in ten (31%) were male. The average (median) age of a volunteer was 55, and just under half (46%) were in work. The proportion of volunteers that identified as an ethnic minority (17%) was above national statistics (at present 13% of the UK population identify as an ethnic minority).

Figure 2.4: Demographic profile of those volunteered for an organisation funded by the CCSF during the time period of their grant



Base: Volunteer survey respondents (9,466) Source: Ipsos MORI Volunteer Survey

Comparisons with the Community Life Survey 2019 / 20 show that those who volunteered through CCSF were **more likely to be female** (68% relative to 56% amongst those who volunteered during the year before the pandemic) and **aged 50 or over** (59% relative to 53% in the year before). Volunteers for organisations funded by the CCSF were also more likely to be from **an ethnic minority background** when compared against the profile of those who had taken part in formal volunteering prior to the pandemic (**17%** and **9%** respectively).

3 Impact on People and Communities

We speak every week. We're like friends now. I don't get out hardly, I can't get out. It's nice to speak to someone. She makes sure that I'm alright. I suffer with anxiety and depression, so just to have her there, it makes me feel better." – Beneficiary

Key findings

People and Communities Hypothesis 1: Grantholders working with people and communities who have been disproportionately affected by COVID-19 were enabled to maintain / increase / adapt activities to identify, reach and deliver appropriate support / activities, which result in positive outcomes for individuals and communities (e.g. more social contact than they would otherwise have had during the crisis). CCSF grantholders were found to have been successful in reaching people and communities disproportionately affected by COVID-19. This included people with mental health conditions, children and young people, people with longstanding illnesses or disabilities and those facing financial hardship. The CCSF funding enabled them to maintain, increase and / or adapt their activities to deliver appropriate

support to meet the needs of different groups of beneficiaries during the pandemic.

Grantholders were confident that the support delivered through CCSF had contributed to a range of positive outcomes for beneficiaries, with most reporting that those supported had better mental health and wellbeing, felt less lonely and increased social contact. This was substantiated by those beneficiaries who participated in case study research, several of whom said they felt less lonely as a result of the support provided.

Grantholders acknowledged that there were other potential sources of support available to beneficiaries, including other local and statutory services, that could also have contributed to positive outcomes. For some short-term outcomes (such as basic needs being met) the contribution of CCSF is clear, whilst for others (such as improved mental health) it is more speculative in the absence of direct measurement and there are likely to have been other contributing factors.

People and Communities Hypothesis 2: Grantholders deliver activities to support beneficiaries that can (a) result in a range of positive outcomes for individuals that reduce the need for public services e.g. supporting children and young people, (b) strengthen the skills and assets of people and communities, and/or (c) supplement public services e.g. social care support. Together, this can reduce demand on public services. The majority of grantholders reported that their activities had taken the place of, reduced need for, or supplemented the use of public services. Those interviewed provided examples to illustrate this, demonstrating potential impact across a wide range of public services. It is also possible that some of the support delivered through CCSF could have increased demand for public services in the short term, with more than half of grantholders delivering information, advice and signposting to other sources of support.

3.1 Introduction

This chapter presents an assessment of the extent to which the CCSF contributed to improving the anticipated outcomes for the people and communities that grantholders supported. The assessment is based on analysis of grantholder survey data and qualitative research to understand the extent to which the evidence is in support of the people and communities hypotheses developed during the scoping stage.

3.2 People and communities hypotheses

The CCSF was expected to contribute to **positive outcomes** for those people and communities disproportionately impacted by COVID-19. These positive outcomes were expected to contribute to wider benefits for society, including a **reduction in the demand for public services** amongst beneficiaries. The evaluation looked at the impact of the funding within the context of the six-month grant period, which means that outcomes for people and communities and the potential impact of these on the demand for public services were considered in the short-term.

People and Communities Hypothesis 1: Grantholders working with people and communities who have been disproportionately affected by COVID-19 were enabled to maintain / increase / adapt activities to identify, reach and deliver appropriate support / activities, which result in positive outcomes for individuals and communities (e.g. more social contact than they would otherwise have had during the crisis).

HYPOTHESIS ASSESSMENT



CCSF grantholders were successful in reaching people and communities disproportionately affected by COVID-19. They were found to have maintained, increased and / or adapted their activities to deliver appropriate support to different groups of beneficiaries and were confident that this had contributed to a range of positive outcomes for people and communities



Supporting evidence includes:

- The most common beneficiary groups were people with mental health conditions, people with longstanding illnesses or disabilities, children and young people, and people and families facing financial hardship.
- Grantholders used a range of approaches to deliver activities and support to beneficiaries, with an estimated 6,400 offering multiple methods of engagement to beneficiaries including phone, video call and face-to-face.
- Most grantholders reported some of their beneficiaries had increased social contact, better mental health and wellbeing and felt less lonely.
- Outcomes relating to reduced loneliness and isolation were referenced by beneficiaries who participated in case studies.

ALTERNATIVE EXPLANATIONS



Grantholders acknowledged that there were other potential sources of support available to beneficiaries, including other local and statutory services, and that these could also have contributed to positive outcomes. For some short-term outcomes, such as basic needs being met, the contribution of CCSF is clear. For others, the contribution of CCSF is more speculative in the absence of direct measurement and there are likely to have been other contributing factors.

3.3 Outcomes for people and communities

The first people and communities hypothesis is intrinsically linked to the grantholder hypotheses (discussed in detail in Chapter 4), as it sets out the expected consequences of grantholders maintaining / increasing / adapting their activity on the individuals they were able to support as a result of the CCSF funding. It can be broken down into three component parts:

- 1. Grantholders were able to **identify and reach** people and communities disproportionately affected by COVID-19.
- 2. Grantholders delivered appropriate support / activities to the identified individuals / groups.
- 3. The support/activity delivered resulted in **positive outcomes** for the relevant individuals.

Assessment of the extent to which the evidence supports these three expectations is therefore based on analysis of the **profile** of beneficiaries supported by CCSF grantholders, the **types of support** / **activities** delivered to them, and the **outcomes** reported to have been achieved as a result. The remainder of this section looks at the evidence for each of these in turn.

Grantholders were found to have been successful in identifying and reaching people and communities disproportionately affected by the pandemic.

The majority (**84%**) of grantholders **worked with some new beneficiaries**. As reported in Chapter 2, grantholders were found to have targeted those people and communities identified at the scoping stage of the evaluation as being particularly at risk of the adverse effects of the pandemic. This included, most commonly, people with mental health conditions, children and young people, people with longstanding illnesses or disabilities and those facing financial hardship. Around a third of grantholders also targeted older people or those from Black, Asian or Minority Ethnic (BAME) communities²⁵.

Grantholders often had staff and / or volunteers **based within local communities** who were able to identify and reach those in need. However, a key challenge faced by many grantholders in reaching target communities was the **shift to online / remote working**, which meant that many no longer had a physical presence within local communities. In these cases, grantholders used a range of other channels, including local newspapers and online methods, to raise awareness of the support. Most also had established links to partner organisations, including statutory services and other community organisations, who identified and referred people for support.



We've been in the local press quite a bit. People get their vouchers through the doctor or the school or Citizens Advice or whatever, and they bring the voucher to us, and then they get their food. We still find people who just have no idea what to do, and they're just desperate, so I think it's very difficult to make sure you get in touch with everybody who is in need, but we try our best and, hopefully, that's pretty good.

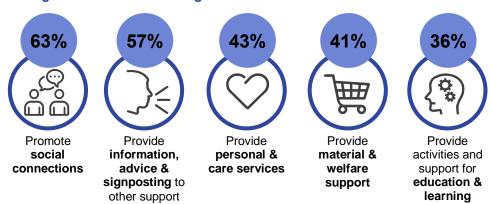


²⁵ We recognise that there are issues with this term as it emphasises certain ethnic minorities and excludes others. However, it has been used here as that is the name of the field that captured this data in the Grantholder Survey.

CCSF grantholders delivered a wide range of support to meet the needs of different beneficiary groups.

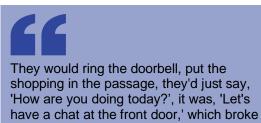
Of those grantholders who used their grant to adapt existing services, develop new services or respond to an increase in demand, 4,620 (63%) were estimated to have used their grant to promote social connections. This increases to almost three quarters for those targeting people with a





Base: Grantholder survey respondents who used their grant to adapt existing services, develop new services or respond to an increase in demand (6,058)

long-standing illness or disability, carers or those supporting people disproportionately impacted by COVID-19 (see Annex B: Table 3.7).



'How are you doing today?', it was, 'Let's have a chat at the front door,' which broke the monotony of the day. I wasn't seeing anybody, so it was really lovely to know somebody was coming.



The promotion of social connections was sometimes a secondary activity for grantholders in addition to their core support. Those delivering material and welfare support or personal and care services often also provided a form of social connection for beneficiaries, particularly those who were shielding. Grantholders delivering these types of services and support would typically build in provision for delivery staff or volunteers to check on beneficiaries' wellbeing. This social contact was often as highly valued by beneficiaries as the core service or activity being provided.

Some grantholders had beneficiaries who were

dependent on them for social contact prior to the pandemic. Grantholders working with older people or those with a long-standing illness or disability said that many of their beneficiaries had been lonely and isolated prior to the pandemic and dependent on them for social contact. This was further

exacerbated during lockdown as many had to stay at home on their own. Grantholders were found to have used the CCSF funding to develop new ways to maintain contact with those who were isolated, such as telephone and video calls, and to provide resources and activity packs to keep them occupied, such as books and puzzles.

It is estimated that a total of 4,240 CCSF grantholders (57%) used the grant to deliver information, advice and signposting to other support²⁶. This increases to over two thirds (69%) for We set up a traffic light system. The green ones had family support and they were fine. The amber ones, we could signpost to a local COVID group and they would help them with practical things, like their shopping and getting bits for prescriptions and things like that. The ones who were red, they were signposted to the [local authority] COVID hub, so that saved all those people going through that hub initially to be assessed.



²⁶ Based on those who used the funding to adapt existing services, develop new services, or respond to an increase in demand during the Coronavirus pandemic and have supported some new beneficiaries (6,058)

those targeting asylum seekers and / or refugees, LGBTQ+ people or those at greater risk domestic abuse, such as women and children.

Signposting typically involved an initial needs assessment to determine what existing support they had in place and what else they might need. In some cases, a consistent and systematic approach was taken to this (such as a triage system or needs assessment form) and in others the approach was less formal. Following assessment, grantholders then provided advice and guidance on which services were available and how to access these. This included statutory services, COVID-related support being delivered by other local organisations or hubs and other types of support depending on their needs and circumstances. Grantholders signposted to a broad range of services, with those providing support for housing, welfare benefits and health the most frequently referenced.

Most grantholders who provided signposting also directly delivered support. For example, staff within food banks often collected information on beneficiaries' needs and circumstances and provided information on where they could go to access additional support. In some cases, grantholders went beyond the provision of information about sources of support to directly helping beneficiaries to access these, for example by making appointments on their behalf or providing translation services.

Looking at the other types of support delivered by CCSF grantholders:

- An estimated 3,190 grantholders (43%) delivered personal and care services. This increases to 64% for those providing support to people at end of life and their families, 59% for those supporting people dealing with substance misuse and 56% for those supporting people at greater risk of domestic abuse or with mental health conditions.
- An estimated 3,050 grantholders (41%) delivered material and welfare support. This was higher amongst those grantholders supporting homeless people (74%), asylum seekers and / or refugees (63%) and people and families facing financial hardship (61%).
- An estimated 2,630 grantholders (36%) delivered activities and support for education and learning. This increases to 49% for those supporting children and young people and 42% for those supporting asylum seekers and/or refugees.

This analysis highlights the broad range and types of support delivered by grantholders to different groups of beneficiaries. It suggests that the type of activities and support delivered was appropriate to individual needs and circumstances.

The intensity and frequency of activities and support delivered to beneficiaries is presented at an aggregate level in Chapter 2. It shows that activities delivered using CCSF funding were most commonly delivered as **one-to-one activities over a period of three months or more**. This was confirmed through interviews with grantholders, the majority of whom delivered ongoing support to individuals with group work not always appropriate or feasible particularly given lockdown restrictions. Notable exceptions to this include those delivering online education and learning or exercise classes, who were more likely to report group delivery than one-to-one support. These types of activities lend themselves to group work as they are general rather than tailored to individual needs and circumstances.

The majority of grantholders offered support to beneficiaries via remote methods, with phone calls and video calls being the most frequently cited mode of delivery. However, more than half also offered face-to-face support despite lockdown restrictions.

CCSF grantholders used a range of approaches to deliver activities and support to beneficiaries, with most (87%) offering **multiple methods of engagement** (see Annex B: Table 3.8). A lot of grantholders had to adapt their operating models in order to deliver activities and support remotely following the COVID-19 outbreak and some used their CCSF grant to do this (discussed in more detail in Chapter 4). This included providing staff, volunteers, and in some cases beneficiaries, with equipment and training. However, despite this notable shift to online / digital methods, more than half of grantholders continued to offer face-to-face support.

- Phone calls were the most frequently cited mode of delivery across all beneficiary groups (estimated to be used by 5,030 grantholders or 68%)²⁷, with the exception of support provided to homeless people (which was most commonly delivered face-toface) and children and young people (who typically received support via video calls / meetings).
- Video calls / meetings were offered by an estimated 4,800 grantholders (65%). The types of activities typically delivered via video calls included counselling and bereavement support, exercise classes and education and learning.
- Face-to-face support continued to

CCSF grantholders offered support to beneficiaries via...



Base: Grantholder survey respondents who used their grant to adapt existing services, develop new services or respond to an increase in demand (6,058)



Our operating model that we used for 80 years centres around a face-to-face service, either drop-in or appointment, and obviously that stopped. Whereas it had been face-to-face with some telephone and web chat on top, it became a service that was delivered entirely by web chat, phone and email, and no face-to-face. It was a fundamental change in how we delivered our service.



be offered by an estimated 4,290 grantholders (58%) despite the shift by many to online and remote methods. Some services could not be delivered remotely, such as transport to attend medical appointments or delivery of food. Face-to-face was also found to be important for homeless people, those dealing with substance misuse and asylum seekers and / or refugees – groups who were less able to access support online or whose support needs did not lend themselves to remote delivery.

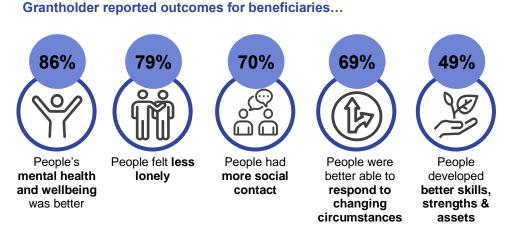
Messaging was the next most common mode of delivery used by an estimated 4,030 grantholders (55%), most commonly by those delivering support to asylum seekers and / or refugees and LGBTQ+ people. Around half of grantholders delivered support via social media (an estimated

²⁷ Of those grantholder survey respondents who used their grant to adapt existing services, develop new services or respond to an increase in demand (6,058)

3,590 or 49% of grantholders) or through **written advice or materials**, including on websites (an estimated 3,690 or 50% of grantholders).

Most grantholders reported they had contributed to the majority of their beneficiaries having better mental health and wellbeing, feeling less lonely and having more social contact.

Grantholders reported a wide range of outcomes for beneficiaries from the support they delivered through CCSF. The most frequently cited were those relating to better mental health, reduced loneliness and isolation. The majority also thought the people they supported were better able to respond to changing circumstances (see Annex B: Table 3.6).



Base: All CCSF grantholder survey respondents (6,712)

Grantholders were asked to estimate what proportion of their beneficiaries had experienced each of the outcomes reported and the key findings were that:

- Of the estimated 7,010 grantholders (86%) who said the activities and support they delivered contributed to better mental health and wellbeing, around half (47% or an estimated 3,300) thought that all or almost all of their beneficiaries had achieved this as a result of the support they delivered.
- Of the estimated 6,420 grantholders (79%) who said the activities and support they delivered contributed to **people feeling less lonely**, an estimated 3,340 (52%) thought that all or almost all of their beneficiaries **felt less lonely**.
- Of the estimated 5,730 grantholders (70%) who said the activities and support they delivered contributed to people having more social contact, an estimated 3,560 (62% of this subgroup) thought that all or almost all of their beneficiaries had experienced more social contact as a result of the support.

As noted in Chapter 1, some caution needs be taken in the interpretation of this data given that it is self-reported by grantholders. However, these findings were substantiated by those beneficiaries interviewed as part of the case study research, several of whom said they felt less lonely and had improved mental health as a result of the support received.

"

It was an enormous difference. I was here alone, and being alone with a baby, already struggling. Already I feel lonely when I am by myself, but I was feeling super lonely also with my baby. Every Friday I could meet someone else, it was a lifesaver.

Beneficiary



Almost all grantholders interviewed were confident that the support they delivered through their CCSF grant had contributed to positive outcomes for beneficiaries. Around a third of grantholders interviewed had some form of mechanism for gathering feedback from beneficiaries on the benefits of the support delivered, such as surveys or informal feedback. For others, this was mainly based on their own perceptions and / or feedback from delivery staff and volunteers. When asked what would have

They would have hit crisis, without a doubt, a lot of them would have hit a crisis. They would have felt more isolated, anxious, their mental health would have been poorer through that. There weren't the services out there for them.

Grantholder

happened in the absence of the support delivered through CCSF, most thought that beneficiaries would have struggled to access this elsewhere due to the pressure on statutory services as a result of COVID-19 and a lot of services and support being inaccessible due to lockdown restrictions. Several grantholders felt that without the support, many beneficiaries would have found themselves in crisis due to mental or physical health conditions or unable to have their basic needs met.

Feedback from grantholders was mixed in terms of whether they thought beneficiaries could have accessed support elsewhere. Around a third of grantholders interviewed referenced other services available in the local area that beneficiaries could have accessed should the CCSF funding not have been available. However, the consensus was that these were very stretched and so this would have placed additional pressure on the system. They may have therefore had to go on a waiting list to receive support, which would have been detrimental to those requiring immediate support.

Taken in the round, the evidence suggests that the CCSF made a positive contribution to the first two components of the hypothesis that grantholders were able to reach people and communities disproportionately affected by COVID-19 and deliver appropriate support and activities. Survey and qualitative research showed that:

- A diverse range of people were supported by the grants provided by CCSF funding, with those groups identified during the scoping stage as most vulnerable to the adverse effects of a pandemic most likely to be reported as beneficiaries of the support and activity delivered.
- CCSF grantholders delivered a wide range of support to address the needs of different types of beneficiary groups, which had often been tailored to ensure it could continue to be delivered during the pandemic.

Grantholders were confident that this support had contributed to a wide range of positive outcomes for beneficiaries. However, as noted, this was **mainly based on perceptions** and has not been validated with those who received the support. Grantholders acknowledged that beneficiaries could have accessed **other sources of support** during the period of the CCSF grant, which could also have contributed to positive outcomes. For those outcomes which were **direct and immediate** (such as basic needs being met), there can be more confidence in grantholder perceptions of the contribution of their support. However, for those that are **less tangible** (such as being better able to respond to changing circumstances or having better skills, strengths and assets), the contribution of CCSF is more speculative. As such, there is only partial evidence in support of the third element of this hypothesis.

3.4 Impact on the use of public services

People and Communities Hypothesis 2: Grantholders deliver activities to support beneficiaries that can (a) result in a range of positive outcomes for individuals that reduce the need for public services e.g. supporting children and young people, (b) strengthen the skills and assets of people and communities, and/or (c) supplement public services e.g. social care support. Together, this can reduce demand on public services.

HYPOTHESIS ASSESSMENT

Degree of confidence

Grantholders were confident that the activities they delivered contributed to positive outcomes for beneficiaries, which may have reduced demand for public services in the short or longer term.

Supporting evidence includes:



- Around half of grantholders reported that their activities had helped reduce or prevent the need for public services and / or supplement the use of public services amongst their beneficiaries.
- A range of examples were provided of how the support they delivered had impacted on the demand for public services, with the most frequently cited being those relating to reduced demand for health services.
- Grantholders also reported increased resilience in beneficiaries, and said that many had developed better skills, strengths and assets than they would have without the support. This was also expected to contribute to a reduction in demand for public services in the longer term as they were better able to deal with challenges.

ALTERNATIVE EXPLANATIONS



Grantholders acknowledged that there were other potential sources of support available to beneficiaries, which could also have contributed to positive outcomes and a reduction in demand for public services during the pandemic.

More than half of grantholders provided advice, guidance and signposting, including to public services. This could potentially have **increased demand** for public services in the short term, and in turn may have contributed to reduced demand in the longer term through early intervention and prevention.

The second people and communities hypothesis relates to the contribution of CCSF to **reducing the burden on public services during the pandemic**. This section assesses the evidence in support of this based on analysis of grantholder survey results and qualitative research.

Most CCSF grantholders thought the activities they delivered had reduced, prevented and / or supplemented the use of public services.

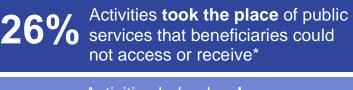
Grantholders were asked how they thought the activities delivered through their CCSF grant related to the use of public services amongst their beneficiaries. Around half reported that their activities had helped **reduce or prevent** the need for public services (53%) and/or **supplement** the use of public services (51%) amongst their beneficiaries (see Annex B: Table 3.10)²⁸.

Grantholders interviewed provided a range of examples as to how they thought the support they delivered had impacted on the demand for public services. The most frequently cited example related to **reduced demand for health services**, which included GPs, psychological and counselling services and A&E, which was perceived to have **reduced the burden on the NHS** during the pandemic. Several grantholders had established partnerships with NHS trusts and GPs who were referring people for support.

Other examples provided include a reduction in demand for:

- Housing services as grantholders provided support to beneficiaries to access housing and in some cases provided temporary accommodation.
- Jobcentre Plus through the provision of job search support and advice and guidance on access to welfare benefits.
- Local authorities support for families was felt by some grantholders to have reduced pressure on a wide range of local authority services, including education and social services.

Which of the following statements best describe how the funded activities related to the use of public services (e.g. health, social care, or education services) by beneficiaries'?



Activities helped **reduce or prevent** the need for public services by beneficiaries

51% Activities **supplemented** the use of public services by beneficiaries

26% Activities were not related to use of public services by beneficiaries

*Grantholders were made aware as part of their Terms and Conditions that funding should not be used to cover what should be statutory provision and to substitute for where public services should be provided. Due to the emergency nature of the pandemic, some grantholders reported their activities may have taken the place of public services, this is likely to be due to the emergency nature of the pandemic.

Our support via the workers particularly will have stopped people within homelessness services accessing social care and temporary accommodation from local authorities. It will have prevented those with mental health issues accessing secondary care and prevented things like accessing A&E, for example.



 Social care – the provision of support to older people was reported by some grantholders to have mitigated the need for some to be admitted to care homes and relieved pressure on care services.

²⁸ Grantholders were made aware as part of their Terms and Conditions that funding should not be used to cover what should be statutory provision and to substitute for where public services should be provided. Due to the emergency nature of the pandemic, some grantholders reported their activities may have taken the place of public services, this is likely to be due to the emergency nature of the pandemic.

It is possible that some of the support delivered by CCSF grantholders contributed to an **increase in demand for public services** in the short term. As noted earlier in this chapter, more than half of CCSF grantholders provided information, advice and signposting to other sources of support. This often involved raising awareness amongst beneficiaries of the support available to them and facilitating access to this, which included public services. Whilst this does not directly support the hypothesis around reduction in demand for public services, it does mean that more individuals were able to access the support they needed.

There were no notable differences on this measure by the types of activity delivered by grantholders. The only differences identified were by grant type (simple vs standard grants) and organisational income, which indicated that grantholders with larger grants and higher incomes were more likely to report that the activities delivered through the grant had reduced, prevented and/or supplemented the use of public services. Grantholders who used their grant exclusively to continue to operate were less likely to report that the activities they delivered had an impact on the use of public services.

4 Impact on Grantholders and Staff

We couldn't have done it without it, it's as simple as that... We may have been able to do something, but nothing as professional, nothing as widespread as it is... Having had £10,000 of that from the grant has made a huge difference... Without it, it probably would have been a very different service." - Grantholder

Key findings

Grantholder Hypothesis 1: Grantholders who have experienced losses in funding due to COVID-19 are able to (a) remain financially viable and for some (b) maintain activities, enabling them to continue to support their communities

Closely linked to this, **Staff Hypothesis 1** posited that: Grantholders who have had to (or would have had to in the absence of funding) reduce employee numbers as a result of COVID-19 are enabled to retain jobs, including furloughed staff, to remain financially viable/maintain activities, enabling them to continue to support their communities.

The evidence demonstrates that the CCSF contributed to a reduction in temporary closures of some essential charities and social enterprises, which was one of the two primary objectives of the programme.

Supporting evidence includes: (1) the CCSF contributed to ensuring around half of grantholders (48%, estimated total of 3,900 grantholders) had the financial resources to continue to operate during the pandemic, thereby reducing their risk of closure; and (2) the CCSF helped the majority of

grantholders to continue to deliver their existing activities and support for people and communities.

Grantholder Hypothesis 2a: Grantholders who experience an increase in demand for their activities (a) increase the breadth, availability and/or intensity of their services, and/or (b) support an increased number of people.

Grantholder Hypothesis 2b: Grantholders whose models of delivery are inconsistent with COVID-19 restrictions are supported to adapt and remove barriers to access them to reach (a) their existing service users and/or (b) new service users

Staff Hypothesis 2: Grantholders who experience an increase or change in demand for their activities as a result of COVID-19 are enabled to adapt their staff resource to meet this need by (a) increasing the number of hours of existing staff (b) redeploying/adapting staff activities (c) unfurloughing staff and/or (d) recruiting staff. The evidence shows that the CCSF supported almost all grantholders to respond to increased and/or changed demand during the COVID-19 pandemic, thereby enabling them to provide support to individuals and communities that had been disproportionately affected (the second primary objectives of the programme).

Supporting evidence includes: (1) the CCSF supported almost all grantholders (90%, an estimated 7,380 grantholders) to respond to increased and/or changed demand; and (2) more than half of grantholders (58%, an estimated 4,760 grantholders) used their CCSF grant to adapt their staff resourcing in one or multiple ways.

As part of the contribution analysis, the evaluation

explored potential alternative explanations for the observed outcomes relevant to grantholder and staff hypotheses. This demonstrated that for some grantholders, other funding sources also contributed to their ability to remain financially viable and/or continue delivery. Despite this, the timing of the CCSF and the ability to use it for core costs meant it was instrumental for many grantholders.

4.1 Introduction

This chapter presents an assessment of the extent to which the CCSF contributed to improving the anticipated outcomes for grantholders and their staff. This includes individuals – who were directly employed by the grantholder as either full-time or part-time staff, including those furloughed due to the pandemic – who had been specifically retained, redeployed or recruited to deliver activities/support funded by the CCSF. The assessment is based on analysis of grantholder survey, GMS and Companies House data and the qualitative research to understand the extent to which the evidence is in support of the grantholder and staff hypotheses developed during the scoping stage.

4.2 Grantholder and staff hypotheses

Reflecting the two primary **objectives** of the CCSF (see Chapter 1), it was expected that grantholders would use the funding to:

- Provide support to individuals and communities disproportionately affected by the COVID-19 crisis, and/or
- Provide essential liquidity to avoid the temporary closure of their organisation.

These objectives were translated into key hypotheses to be tested by the evaluation (see sections 4.3 and 4.4).

4.3 CCSF's impact on grantholders' liquidity and ability to continue delivery

Grantholder Hypothesis 1: Grantholders who have experienced losses in funding due to COVID-19 are able to (a) remain financially viable and for some (b) maintain activities, enabling them to continue to support their communities

Closely linked to this, **Staff Hypothesis 1** posited that: Grantholders who have had to (or would have had to in the absence of funding) reduce employee numbers as a result of COVID-19 are enabled to retain jobs, including furloughed staff, to remain financially viable/maintain activities, enabling them to continue to support their communities.

HYPOTHESIS ASSESSMENT

Degree of confidence

The evidence demonstrates that the CCSF contributed to a reduction in temporary closures of some essential charities and social enterprises, which was one of the two primary objectives of the programme.

Supporting evidence includes:

- The CCSF contributed to ensuring an estimated 3,900 grantholders had the financial resources to continue to operate during the COVID-19 pandemic, thereby reducing their risk of closure suggesting about half of all grantholders benefitted in this way.
- The CCSF helped the majority of grantholders to continue to deliver their existing activities and support for people and communities.

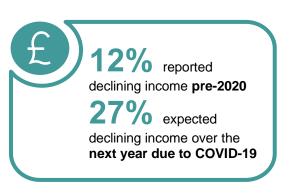
ALTERNATIVE EXPLANATIONS



For some grantholders, other funding sources also contributed to their ability to remain financially viable and/or continue delivery. Despite this, the timing of the CCSF and the ability to use it for core costs meant it was instrumental for many grantholders.

Most grantholders did not report being in financial hardship prior to 2020, but a substantial minority forecast an increase in financial hardship as a result of the COVID-19 pandemic.

When reflecting on their organisation's income prior to 2020, grantholders were most likely to report that their income was either **growing steadily** (37%) or had **remained broadly the same with occasional fluctuations (26%)** (see Annex B: Table 4.1). Looking to the future, a substantial minority of grantholders felt **pessimistic about the financial health of their organisation**, with more than one in four expecting to see their income decline steadily as a result of the COVID-19 pandemic compared with around one in eight prior to 2020.



All our income dried up completely in a day. We have a charity shop here, so that was closed. Our community centre life all just disappeared overnight ... There was a financial concern but there was also a concern about the people who were normally here on a day to day basis or who came in regularly and used us, particularly elderly and vulnerable ones ... that's why when we saw this grant opportunity we thought, this is just what we need.



Financial concerns were evident among grantholders interviewed. Many described the immediate effect COVID-19 had on their normal income routes and typical delivery models. For example, fundraising campaigns and events were not possible, expected grants were no longer available, and income from charity shops, community cafes, or hiring community centres stopped when they closed.

These findings are reflective of the situation faced by many organisations in the VCSE sector, that are experiencing financial uncertainty as a result of the protracted nature of the pandemic.

Nearly half of the grantholders used their CCSF grant to ensure their organisation had the financial resources to continue to operate and one in five stated they would have had to close or stop services altogether without the CCSF grant.

As detailed in Chapter 2, around half (48%) of grantholders reported using their CCSF grant to **continue to operate** (an estimated total of **3,900** grantholders), including about one in ten (8%, or an estimated 640) who used the grant **exclusively** for this purpose. A clear theme when speaking with grantholders was the value of being able to use their CCSF grant to **cover core costs**, for example, staff salaries and office rent. Using the funding in this way helped grantholders who experienced financial losses because their typical fundraising routes had been significantly impacted.

Liquidity issues appeared to be particularly significant for nearly one in five (17%) grantholders who reported that they would have had to **close or stop services altogether** without their CCSF grant. This rose to nearly one in three (31%) for the small sub-group of grantholders who used the funding exclusively to continue to operate (see Annex B: Table 4.2).

We would be gone within 6 months. And that would have caused 3 families to lose income, just from staff, and of course a vast impact. We've got 1,500 beneficiaries a day. In a day. So, [if] we're not there, where do those 1,500 people go? And that really scares me.



Analysis of Companies House data that compared successful and unsuccessful applicants of the CCSF found lower rates of closure²⁹ between July 2020 and July 2021 amongst CCSF grantholders compared to unsuccessful applicants (1.5%³⁰ vs 2.8%, which was a statistically significant difference). Notably, closure rates were higher amongst the smallest organisations (less than £100,000 annual turnover), and there was a statistically significant difference in closure rates between the smallest CCSF grantholders, 2.4%, compared to 5.3% of equivalently sized organisations that were unsuccessful in applying for CCSF funding. Further analysis of charitable reserves for the larger charities (£500,000+) found no differences between successful and unsuccessful applicants, which suggested that the CCSF was unlikely to have had a significant impact on the financial health of larger charities. This, alongside the survey finding that 17% of grantholders would have had to close or stop services without the CCSF funding, and around a third of those interviewed stating they may have needed to close, is evidence to support the hypothesis that the fund contributed to organisational survival, especially smaller organisations.

The majority of grantholders reported that the CCSF grant supported their ability to deliver their existing activities and would have otherwise delivered fewer services than usual.

In addition to helping grantholders with liquidity issues, the CCSF grant contributed to their ability to **maintain activities and services**. Without CCSF, only a very small proportion of grantholders would have delivered a similar level of service as the prior six months. Most grantholders (77%) reported that they would have delivered **significantly or slightly fewer services**.



Base: All CCSF grantholder survey respondents (6,712)

It is likely that most of these additional services (compared with what would have happened without CCSF) were grantholders' being **enabled to continue delivering their existing activities and support**, which was reported as the impact of the CCSF grant by two thirds (67%) of grantholders. This was even more notable for grantholders who exclusively used their grant to continue to operate (85%) compared with those who exclusively used it to respond to increased demand (57%) or to adapt delivery (49%) (see Annex B: Table 4.3).

²⁹ Closure has been defined as an organisation going into liquidation, with a proposal to strike it off the company register or having been removed from the register between July 2020 and July 2021.

³⁰ Figure calculated based on 72 of the 4654 grantholders registered as companies in July 2020 having either since been removed from the register (33) or there is a 'proposal to strike them off' (39).

The interviewed grantholders clearly linked their use of the CCSF grant to ensure they had the financial resources to continue to operate with their ability to continue providing support to people and communities. Paying for staff salaries and other core running costs was the route by which they were able to respond to the needs within their community, even if this was sometimes on a reduced scale to their usual delivery.

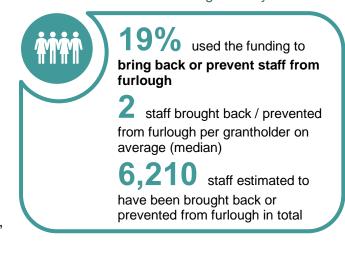
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The main purpose, if I'm being completely honest, was survival for us, because our main expenditure is salary for our support staff, and the grant provided 6 months' salary costs of 4 support workers, and 6 months' of our counselling costs as well, as well as the support staff, our Coordinator and Services Manager. We were able to ensure that they didn't go on furlough, and that our service users had that support that they could turn to.



The avoidance of (temporary) closures and grantholders' ability to continue delivering had important implications for staff. Using the CCSF grant to bring back or prevent staff from going on furlough appeared particularly important to ensure grantholders could continue their existing delivery.

Two in five (41%) grantholders used the **UK Government Furlough Scheme** and reported putting a median of four staff on furlough per organisation. Based on responses, grantholders put an estimated total of **39,610** employees on furlough. Of those, nearly half (46%) used their CCSF grant to bring back or prevent staff from going on furlough – this represents one in five (19%) of all grantholders. An estimated total of **6,210** employees were brought back or prevented from being put on furlough using the CCSF grants, with a median of **two staff per organisation**.



Compared with all grantholders, those who used the funding exclusively to continue to operate were more likely to have used the furlough scheme (54%) and were also more likely to use the CCSF grant to bring back or prevent staff from furlough (31%). Using the grant to adapt staff resourcing, especially bringing back or preventing staff from furlough, appeared to have an important impact on organisations' ability to continue to deliver existing activities and support – the majority of grantholders who used the CCSF grant to bring back staff from furlough (75%), increase staff hours (67%) or recruit staff (63%) reported that they were able to continue their existing delivery (see Annex B: Table 4.4).

[Without the CCSF grant] we could have placed some of our fundraising staff on furlough or made them redundant, and that then would have limited and reduced our capacity to raise funds, which would have had a knock on effect and so on.

Grantholder

When asked what would have happened to staff resources without the CCSF grant, around a third of grantholders interviewed said they **may have needed to furlough more staff.** While grantholders were grateful of the option to furlough, this was avoided if at all possible, to minimise any impacts on their ability to deliver support and activities, as well as to avoid longer-term consequences on the health of the organisation. Among those who described that their organisation may have been at risk of closing without the CCSF grant, they noted that this avoided staff losing their jobs or becoming redundant during the pandemic. Use of the furlough scheme was greater among those with standard grants (compared with smaller simple grants), as well as among organisations with a **higher annual income** (compared with smaller organisations) (see Annex B: Tables 4.5 and 4.6, and Figure 4.1). Similar trends were observed for those who used the CCSF grant to bring back or prevent staff from furlough, recruit staff, increase staff hours and/or deliver training for staff and volunteers. This is in line with expectations, as organisations with higher incomes tended to receive larger grants and were more likely to have larger numbers of staff, implying that they would make greater use of the furlough scheme and the staff-related benefits derived from the CCSF grant.

For some grantholders, other funding sources also contributed to their ability to remain financially viable and/or continue delivery.

Although all grantholders interviewed were positive about the benefits of their CCSF grant, there was variation regarding the extent to which the CCSF was the **sole factor** affecting their ability to continue to operate. According to the survey results, the majority of grantholders (78%) were successful in applying

But if we didn't have the financial support from [the CCSF], we're so committed to our organisation, we wouldn't have let it go down. We'd have sat outside with buckets for people to put [donations in]. We'd have had to have looked around for other grants. I can't say we would have closed. We wouldn't. We would have done other things to support. And, as I said, I think we'd have put those staff on furlough immediately.

Grantholder

for additional grant funding during the pandemic (see Annex B: Table 4.7). When asked how other funding related to the CCSF grant, responses varied from using the funding for separate purposes (usually complementary) to using the funding in similar ways to do more of the same activities. This included supporting grantholders to remain financially viable and continue to deliver their support and services. Furthermore, when asked what would have happened without the CCSF, most said they would have **applied for other funding, put staff**

on furlough and delivered fewer services. It is therefore clear that other factors also contributed to grantholders' ability to continue to operate (or could have). Despite this, the evidence supports the CCSF as being instrumental and a significant contributor.

4.4 CCSF's impact on grantholders' ability to respond to changes in demand

Grantholder Hypothesis 2a: Grantholders who experience an increase in demand for their activities (a) increase the breadth, availability and/or intensity of their services, and/or (b) support an increased number of people.

Grantholder Hypothesis 2b: Grantholders whose models of delivery are inconsistent with COVID-19 restrictions are supported to adapt and remove barriers to access them to reach (a) their existing service users and/or (b) new service users.

To support grantholders' response to increases of change in demand for their activities as a result of COVID-19, **Staff Hypothesis 2** anticipated that: Grantholders who experience an increase or change in demand for their activities as a result of COVID-19 are enabled to adapt their staff resource to meet this need by (a) increasing the number of hours of existing staff (b) redeploying/adapting staff activities (c) un-furloughing staff and/or (d) recruiting staff.

HYPOTHESIS ASSESSMENT



The evidence shows that the CCSF supported almost all grantholders to respond to increased and/or changed demand during the COVID-19 pandemic, thereby enabling them to provide support to individuals and communities that had been disproportionately affected (the second of the primary objectives of the programme).

Supporting evidence includes:



- The CCSF supported almost all (90%) grantholders, or an estimated 7,380 grantholders, to respond to increased and/or changed demand during the COVID-19 pandemic.
- More than half (58%) of grantholders, or an estimated 4,760 grantholders, used their CCSF grant to adapt their staff resourcing in one or multiple ways, for example, by increased staff hours or recruiting staff.
- On average, grantholders increased staff hours by a median of 16 hours per week (totalling an estimated 10,700 additional hours per week) and recruited a median of one new staff member (totalling an estimated 4,240 new staff members).

ALTERNATIVE EXPLANATIONS



As with Grantholder Hypothesis 1, other funding sources also contributed to grantholders' ability to respond to increased and/or changed demand. However, the evidence shows that the CCSF remained a key contributor to these outcomes. A substantial minority of grantholders used the CCSF grant to respond to an increase in demand for their activities and support and the CCSF supported more than half of the grantholders to undertake work to reach new beneficiaries.

More than two in five (44%) grantholders reported using the CCSF grant to respond to an increase in demand (an estimated total of **3,560** grantholders). A similar proportion (46%) said the CCSF helped them increase their capacity to do more of what they were already doing. This rose to nearly seven in ten (69%) for the sub-group of grantholders who used their grant exclusively to respond to an increase in demand (which was relatively higher than the other exclusive sub-groups; see Annex B: Table 4.8).

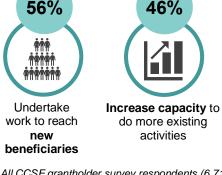
In addition, more than half (56%) of grantholders reported that the CCSF grant enabled them to undertake work to

reach new beneficiaries. Interviewed grantholders explained several ways in which they had adapted their support to reach new beneficiaries. For example, some grantholders had pivoted to delivering new activities (see below) such as dropping off food, medication and activity packs for people, which enabled them to reach many more beneficiaries than their typical activities and support.

These findings appear logical and reflect the influx of support requests experienced by the VCSE sector as a result of the emergency context, which formed part of the rationale for distributing CCSF grants.

The majority of grantholders reported using the CCSF grant to adapt their delivery models, which included adapting existing activities and/or introducing new activities.

More than four in five (82%) grantholders used the CCSF grant to adapt their delivery models (an estimated total of 6,680 grantholders). Unsurprisingly, the COVID-19 pandemic meant that grantholders typical ways of working were often no longer possible. The most common adaptations among interviewed grantholders related to switching to remote ways of working. This included staff working from home and remote management of staff and/or volunteers as well as shifting to telephone or virtual support for beneficiaries. The most common adaptation that more than half (58%) of grantholders



CCSF supported grantholders to...



That's really what spurred us on to apply for this funding because we wanted to continue to deliver comprehensive therapeutic support, but that just wasn't possible through telephone check-ins ... part of [the CCSF grant] was to help us implement an online case management system, which would enable us to be able to deliver our therapeutic work remotely, and for our therapists and counsellors to work off-site, but still be able to deliver their therapy counselling sessions in a safe and secure way. And to provide that consistent support for the children because for a lot of these children, this is the only positive, trusted relationship they have.



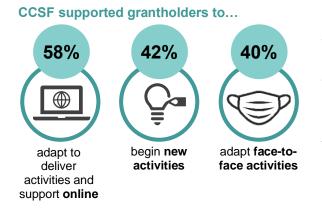
Grantholder

Base: All CCSF grantholder survey respondents (6,712)

The level of need rose very fast. Our understanding of what was required kept increasing. Mental health. Loads of issues. It very quickly became apparent we couldn't do this with volunteers alone and what we needed was to find a pre-experienced new member of staff to come straight in as a welfare support worker. That's what we went to the [CCSF] for. It was about a sudden step change to a place we haven't been. We've got really good staff but we'd have had to send them to training.

reported as being supported by the CCSF grants was **adapting activities and support to deliver them online.**

In addition, around two in five grantholders used the CCSF grant to **begin delivering new activities** (42%) or adapted activities and support so that they could **continue to happen face-to-face** (40%). This



Base: All CCSF grantholder survey respondents (6,712)

included, for example, purchasing equipment to make premises COVID-secure and PPE for staff and volunteers. As expected, these findings were even more pronounced for the sub-group of grantholders who used the CCSF grant exclusively to adapt activities, relative to the other exclusive sub-groups (see Annex B: Table 4.8). For example, half (51%) of this sub-group said they began new activities compared with 11% in the continue to operate subgroup and 26% in the increase in demand sub-group.

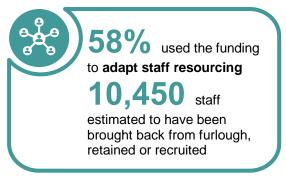
This finding is again in line with expectations, as wider evidence from the VCSE sector has shown that many

organisations found themselves in a position where the majority of their traditional delivery modes were no longer feasible in light of the emergency restrictions imposed.

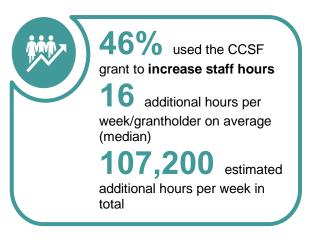
More than half of grantholders used their CCSF grant to adapt their staff resourcing in one or multiple ways, for example, by increased staff hours or recruiting staff. This was a key way in which grantholders used the CCSF grant to respond to increased and/or changed demand.

Three in five (58%) grantholders reported using their CCSF grant to **increase staff hours**, **bring back staff on furlough**, **and/or recruit staff**. Overall, grantholders used the funding to bring back from furlough, retain or recruit an estimated total of **10,450** staff members.

Almost half (46%) of grantholders used their CCSF grant to **increase their staff hours** and one in four (24%) used the funding to **recruit new staff**. On average, grantholders

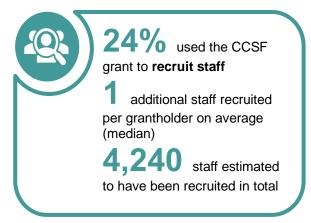


increased staff hours by a median of **16 hours per week** (totalling an estimated 107,200 additional staff hours per week) and recruited a median of one new staff member (totalling an estimated 4,240 new staff members).



The majority of grantholders who used the CCSF grant to recruit new staff or increase staff hours reported that the CCSF supported them to increase their capacity to do more of what they do already, reach new beneficiaries and/or adapt to deliver their activities and support online (see Annex B: Table 4.4). Approximately two in five (42%) grantholders used the CCSF grant to **train staff and/or volunteers**. For example, interviewed grantholders described training on IT skills for remote working, using PPE and following safety guidance, and specific skills such as Mental Health First Aid to help staff and volunteers respond to increased or new needs within their communities.

Taken in the round, the evidence shows that the CCSF contributed to supporting almost all grantholders to **respond to increased and/or changed demand** during the COVID-19 pandemic.



5 Impact on Volunteers

It is pleasing to know that we are able to help people who just need

vaccinations. Just that feeling that you're making a difference"

help, whether with the shopping or getting them to their

Key findings

– Volunteer

Volunteer Hypothesis 1: Grantholders who have experienced losses in funding due to COVID-19 are able to maintain their volume of volunteer hours to continue delivering activities and support to their communities.

The evidence demonstrates that the CCSF contributed to the maintenance/increase of volunteer hours/capacity for a majority of grantholders, which in turn will have been one of the factors that enabled them to continue to deliver activities and support to their communities.

Supporting evidence includes: (1) the CCSF supported the maintenance/increase of volunteer hours for an estimated 4,020 grantholders, which accounts for six in ten of the grantholders that were actively working with volunteers; and (2) grantholders that worked with volunteers increased their volunteer hours by a median of 13 hours per week, which amounted to an estimated 170,320 additional volunteer hours per week.

Alternative explanations explored to inform the contribution analysis demonstrated that some grantholders had maintained/increased their volunteer capacity independently of CCSF funding, whilst others had either been unable to maintain their capacity or had actively chosen to reduce it.

Volunteer Hypothesis 2: Grantholders who experience an increase or change in demand for their activities as a result of COVID-19 are enabled to adapt their volunteer resource to meet this need by (a) increasing the number of volunteer hours (b) redeploying/adapting volunteer activities and/or (c) recruit new or lapsed volunteers. The evidence shows that CCSF contributed to ensuring over half of all grantholders were able to adapt volunteer resource to meet an increase or change in demand for services as a result of the COVID-19 pandemic. This in turn will have been one of the factors that enabled them to provide support to individuals and communities that had been disproportionately affected (one of the primary objectives of the programme).

Supporting evidence includes: (1) The CCSF contributed to ensuring an estimated 4,420 grantholders were able to adapt volunteer resource to meet an increase or change in demand, which was achieved in a variety of ways, including increasing volunteer hours (60%, or an estimated 4020 grantholders), recruiting new volunteers (39%, or an estimated 2570 grantholders) and adapting the activities that volunteers delivered; and (3) grantholders that worked with volunteers increased their volunteer hours by

a median of 13 hours per week, which amounted to an estimated 170,320 additional volunteer hours per week.

As with the grantholder and staff hypotheses, alternative explanations that may have meant these outcomes would have occurred without the CCSF, include the high likelihood that other funding sources contributed to the ability of some grantholders to adapt their volunteer resource.

Volunteer Hypothesis 3: Volunteers, who are coordinated by grantholders to support those most affected by the crisis in their communities, experience positive benefits. These benefits may include feeling motivated and useful, developing social relationships or connections within their communities, and having a sense of purpose, all of which may improve their wellbeing. The evidence demonstrates that nearly all volunteers that supported CCSF-related activities experienced a variety of positive benefits as a result of their volunteering experience.

The supporting evidence for this hypothesis includes the wide range of positive benefits reported by volunteers who participated in the

survey, with the most common being a sense of connection to their local community, improved mental health and wellbeing, reduced loneliness and social isolation, and improved employability / skills development.

By enabling grantholders to continue delivery, the CCSF contributed to these positive benefits experienced by both existing and new volunteers. However, it is challenging to estimate the scale of the CCSF's contribution relative to other factors. For example, the context at the time saw an increase in volunteers coming forward, and those who volunteered for CCSF grantholders may have also volunteered at other organisations, delivering both CCSF and non-CCSF funded activities. As such, the positive benefits observed may not be solely due to the CCSF and were a result of one or multiple volunteering activities.

5.1 Introduction

This chapter presents an assessment of the extent to which the CCSF contributed to improving the anticipated outcomes for the volunteers giving unpaid help to grantholder organisations. This includes individuals who either: (1) give unpaid help through a group, club or organisation (formal volunteering); or (2) provide unpaid help as an individual to people who are not a relative (informal volunteers)³¹, and have been specifically redeployed or recruited to deliver activities/support as part of the CCSF funding³².



The assessment is based on analysis of 9,466 responses received to the volunteer survey, as well as data from the grantholder survey, GMS and qualitative research to understand the extent to which evidence is supportive of the volunteer hypotheses developed during the scoping stage. The hypotheses related to the impacts on volunteers were expected to fall broadly into two main uses of the funding and

³¹ Using international definitions of formal and informal volunteering.

³² It is anticipated that insights from informal volunteering activity will be harder to establish because these volunteers may not provide their contact details to the organisations or they may not self-identify as a volunteer, for example, viewing the unpaid help they give as 'neighbourliness'. The scope of this aspect of the evaluation is therefore likely to be limited to an assessment of formal volunteering.

understand the extent to which positive outcomes were derived as a result of the relevant volunteering exercises. These are summarised in sections 5.2, 5.3 and 5.4 of the chapter.

Our analysis includes comparative results from the DCMS Community Life 2019/20 survey, which provides Official Statistics on issues that are key to encouraging social action and empowering communities, including volunteering, charitable giving, community engagement, wellbeing, and loneliness.

5.2 Volunteer retention

Volunteer Hypothesis 1: Grantholders who have experienced losses in funding due to COVID-19 are able to maintain their volume of volunteer hours to continue delivering activities and support to their communities

HYPOTHESIS ASSESSMENT

Degree of confidence

The evidence demonstrates that the CCSF contributed to the maintenance/increase of volunteer hours for the majority of grantholders, which in turn will have been one of the factors that enabled them to continue to deliver activities and support to their communities.

Supporting evidence includes:

- The CCSF supported the maintenance/increase of volunteer hours for an estimated 4,020 grantholders. This accounts for six in ten of the grantholders that were actively working with volunteers.
- Grantholders that worked with volunteers increased their volunteer hours by a median of 13 hours per week, which amounted to an estimated 170,320 additional volunteer hours per week.

ALTERNATIVE EXPLANATIONS

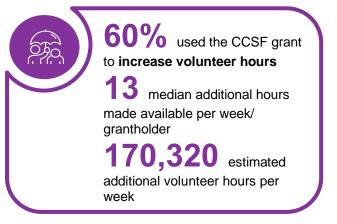


For some grantholders, other factors, alongside the CCSF grant, contributed to them being able to maintain/increase their volunteer capacity during the period of their CCSF grant. Using the CCSF grant was also not the only route by which grantholders maintained/increased their volunteer capacity. For example, some were able to do this independently of the CCSF funding and instead could use the funding for other purposes. It was not expected that all grantholders would use the CCSF grant for this purpose and there were also some examples of where grantholders had either been unable to maintain their volunteer capacity or had actively chosen to reduce it.

The CCSF enabled the majority of grantholders to increase volunteer hours at their organisation.

Six in ten (60%, or an estimate of **4,020**) grantholders that worked with volunteers reported using the grant received to **increase volunteer hours** at their organisation, which amounted to a median of **13 additional hours per**

week/grantholder (see Annex B, Table 5.1). This suggests that the CCSF had enabled the majority of grantholders to, at a minimum, maintain the volume of volunteer hours, and likely underestimates the prevalence of this output given the wording of the base question³³.



Evidence from the qualitative research suggested that the CCSF had enabled (both directly and indirectly) at least some grantholders to, at a minimum, maintain volunteer hours. Examples of this included grantholders that reported they had avoided having to temporarily or permanently reduce the support provided by volunteers as they had used the grant to:

"

The volume was there, but we couldn't work with [the volunteers]. We didn't have the capacity. We were still firefighting...there was a great mass of people wanting to do stuff. How are we going to service those people? The answer was the CCSF funded worker.

Grantholder

- Provide training to enable their volunteers to deliver activities virtually;
- Cover equipment costs to enable volunteers to continue to deliver activities and services face-to-face, for example, PPE or IT equipment;
- Increase staff hours or recruit a volunteer coordinator in order to manage existing volunteer resource; all of which would not have been possible in the absence of the CCSF grant.

That said, there were also grantholders who reported having **increased** (and therefore at a minimum maintained) volunteer hours at their organisation but had **not used the CCSF to do this**, and a small number of grantholders interviewed who had experienced a **reduction in volunteer hours** despite the funding. Reductions in volunteer hours tended to be caused by some volunteers needing to withdraw from their role as they were required to shield or to find paid employment after a partner or loved one became redundant, or by grantholders prioritising increases in staff as opposed to volunteer capacity.

Taken in the round, the evidence suggests that the CCSF contributed to the **maintenance / increase of volunteer hours / capacity for the majority of grantholders**, although for some grantholders there were other factors that contributed to them being able to do this. There were also examples of where grantholders were either unable to maintain their volunteer capacity or actively chose to reduce it.

³³ Grantholders were asked whether they had used the CCSF grant to increase volunteer hours at their organisation, as opposed to maintain their hours.

5.3 Adapting volunteer resource

Volunteer Hypothesis 2: Grantholders who experience an increase or change in demand for their activities as a result of COVID-19 are enabled to adapt their volunteer resource to meet this need by (a) increasing the number of volunteer hours (b) redeploying/adapting volunteer activities and/or (c) recruit new or lapsed volunteers.

HYPOTHESIS ASSESSMENT



The evidence shows that CCSF contributed to ensuring over half of all grantholders were able to adapt volunteer resource to meet an increase or change in demand for services as a result of the COVID-19 pandemic This in turn will have been one of the factors that enabled them to provide support to individuals and communities that had been disproportionately affected (one of the primary objectives of the programme).

Supporting evidence includes:



- The CCSF contributed to ensuring an estimated 4,420 grantholders were able to adapt volunteer resource to meet an increase or change in demand
- This was achieved in a variety of ways, including increasing volunteer hours (60%, 4,020 estimated grantholders), recruiting new volunteers (39%, 2570 estimated grantholders) and adapting the activities that volunteers delivered.

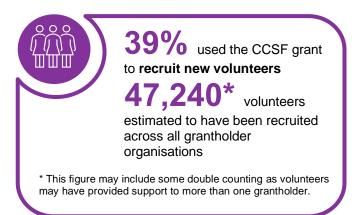
ALTERNATIVE EXPLANATIONS



As with the grantholder and staff hypotheses, there was evidence that some grantholders who used the CCSF to adapt their volunteer resource were enabled to do so for other reasons as well. This could include, for example, other sources of funding. The CCSF was therefore one successful route to achieving this outcome while also complementing other ways in which it was achieved.

The majority of grantholders used the CCSF to increase their volunteer capacity in one of two ways, (1) increasing the volume of volunteer hours, and (2) recruiting new volunteers.

As set out in the preceding section, six in ten (60%, or an estimate of 4,020) grantholders reported



using the grant received to **increase volunteer hours** at their organisation (see Annex B, Table 5.4). Those that used the funding exclusively to respond to an increase in demand for their services were most likely to report having used the grant in this way – two in three (63%) reported having done so. A similar proportion (59%) of those that used the funding exclusively to adapt to deliver new or existing services said they had used the grant to increase volunteer hours at their organisation. This provides evidence that those who experienced an

increase or change in demand for their services activated additional volunteer resource in order to meet that demand.

Capacity was also increased through the **recruitment of new volunteers**, where two in five (**39%**, or an estimate of **2,570**) reported using the CCSF in this way. Moreover, those that used the grant to increase volunteer hours at their organisation were more likely to report having used the grant in this way – **half** (**54%**) said they had recruited new volunteers with the grant. However, two in five (45%) did not use the grant in this way. The findings therefore suggest that those grantholders who used the grant to increase volunteer hours at their organisation **did so in multiple ways** – both through the recruitment of new volunteers, but also by increasing the hours of existing volunteers at their organisation. This is in line with expectations, as it is reasonable to assume that grantholders used all avenues available to them to increase their capacity to respond to the pandemic related rise in needs experienced by the people and communities they served.

Data from the qualitative research suggests that grantholders relied primarily on word of mouth and social media to recruit volunteers. Some reported more formal activity, such as leafletting and / or radio advertisements, some of which were funded by the CCSF grant (although others used other sources of grant funding to support this activity). Fewer used more formal approaches, such as advertising for volunteers through their local council or schools/universities.

The first couple of weeks were like 'Oh my god, we've got these meals to give out and it has taken us longer'. So we had to get more volunteers and staff involved with that...so we recruited about another 20 volunteers throughout the pandemic.

Taken in totality, an estimated **4,420** grantholders used the CCSF grant to **increase their volunteer capacity**, either through the recruitment of additional volunteers, and/or by increasing volunteer hours at their organisation (from either new or existing volunteers).

Volunteers reported undertaking new activities that helped respond to the pandemic-related circumstances, providing further supporting evidence that grantholders used their CCSF grant to adapt delivery to meet increased or changed demand

Those that volunteered for an organisation funded by the CCSF most often reported undertaking the following tasks on behalf of the grantholder organisation during the pandemic: helping people access food and other essential items (35%); giving information, advice and / or counselling (30%); supporting people to access services (29%); and ongoing mentoring and support for people (27%) (see Annex B, Table 5.5).

While those who reported that they had volunteered prior to the outbreak of the pandemic undertook many of the same types of unpaid help, there were some **notable changes in activities undertaken**. Helping people access food and essential items increased (from 23% to 35%), while organising or helping to run an activity or event decreased (42% to 26%). This suggests that grantholders had **adapted** volunteer activity in order to meet new or changing demand.

"

Quite a few volunteers offered their services as buddies to members, so that they got extra contact. When we were able to reopen for the short period before the last lockdown, volunteers were providing more hands-on support to members. We think the bond between members and volunteers is a lot stronger than it ever was before the coronavirus. I think they've all realised the value of face-toface contact.

Grantholder

Grantholder

5.4 Volunteer wellbeing

Volunteer Hypothesis 3: Volunteers, who are coordinated by grantholders to support those most affected by the crisis in their communities, experience positive benefits. These benefits may include feeling motivated and useful, developing social relationships or connections within their communities, and having a sense of purpose, all of which may improve their wellbeing.

HYPOTHESIS ASSESSMENT

The evidence demonstrates that nearly all volunteers that supported CCSF-related activities experienced a variety of positive benefits as a result of their volunteering experience.



Degree of

confidence

Supporting evidence includes:

• The most notable positive benefits reported as a sense of connection to their local community, improved mental health and wellbeing, reduced loneliness and social isolation, and improved employability / skills development.

ALTERNATIVE EXPLANATIONS

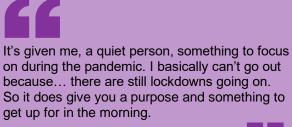


It is possible that some of those who volunteered for CCSF grantholders may have also volunteered for other organisations, delivering both CCSF and non-CCSF funded activities. The positive benefits experienced and reported by volunteers may therefore be the result of a wider range of factors other than just the CCSF.

Almost all (99%) of those who volunteered for an organisation funded by the CCSF reported **at least one positive benefit** to themselves as a result of their experience (see Annex B, Table 5.6). The main outcomes reported by volunteers can be categorised into four broad themes:

1. Improved mental health and wellbeing

Half (48%) of volunteers reported **improved mental health and wellbeing** as a result of their experience. They said it gave them something to do or somewhere to go during lockdown, which helped provide them with a healthy routine. Two in three (66%) reported that volunteering during the pandemic had given them a **sense of purpose and / or personal achievement** (67%), while a third (32%) said it helped to **reduce loneliness and isolation**. Eight in ten (84%) felt as if they were **making a difference**.





Such outcomes relate to existing evidence linking volunteering to improved well-being – particularly selfefficacy, social connectedness and sense of purpose³⁴. Those that volunteered for an organisation funded by the CCSF reported **higher rates of life satisfaction**, **happiness**, **and feeling as if the things they do are worthwhile** when compared against national statistics³⁵, providing further evidence of the positive impact that volunteering during the pandemic had on the mental health and wellbeing of those who took part.

2. A greater sense of connection to their local community



Six in ten (56%) said that offering unpaid help during the pandemic had given them a **stronger sense of connection to their local community**, enabling them to **meet new people** (47%) and **build relationships**.

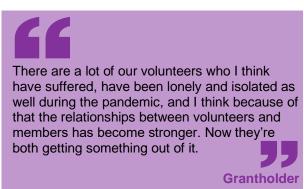
Volunteers were also more likely to report a **strong sense of belonging to their local community** when compared to national statistics³⁶ (76% and 63% respectively), providing evidence in support of the hypothesis that volunteering during the pandemic enabled people to build community connections.

3. Reduced loneliness and social isolation

A third (32%) of volunteers said that their experience had made them **feel less isolated**. This is logical, given for many volunteering provided them with the opportunity to meet new people and get outdoors (as evidence above) at a time when the population was encouraged to stay indoors.

For the minority of volunteers who were shielding during the pandemic, and therefore delivering activities and support without having to physically go outside (for example, by telephone or video calls), this connection to the outside world was seen as particularly important. Grantholders noted that relationships between volunteers and beneficiaries had become stronger, with **both groups achieving positive outcomes as a result**.

4. Skills development



5. The graphic sets out a quote from a CCSF grantholder as follows:For some volunteers the experience increased their **confidence** (31%) and gave them **new skills** (39%), for example, better listening, project management, or IT skills. On occasion this included formal accreditations such as Mental Health First Aid. Skills acquisition and improved confidence were most likely to be outcomes reported by **younger**

³⁴ Understanding the impact of volunteering on volunteers, NCVO, March 2018

https://www.ncvo.org.uk/images/documents/policy_and_research/Impactful-volunteering-understanding-the-impact-of-volunteering-on-volunteers.pdf

³⁵ Data from the ONS Opinions and Lifestyle Survey, fielded 9 – 13 June 2021

https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandwellbeing/bulletins/coronavirusandthesocialimpactsongreatbritain/18june2021

³⁶ Data from the Community Life Survey 2018/19, fielded April 2018 to March 2019 <u>https://www.gov.uk/government/statistics/community-life-</u> survey-2018-19

volunteers, typically those aged 16-24 or 25-34 (74% and 56%).

As noted in the introduction to this chapter, whilst we can feel confident that the CCSF contributed to the positive benefits experienced by volunteers, we are unable to estimate the scale of this contribution given the range of other factors that could potentially have influenced this.

A small minority of volunteers reported a negative outcome as a result of their experience

One in ten (10%) of those who had volunteered for an organisation funded by the CCSF reported a **negative outcome** as a result of their experience (see Annex B, Table 5.7). Looking at the nature of negative outcomes reported, 4% of volunteers said they felt at **higher risk of contracting COVID-19**, while 2% said they felt **unappreciated or out of pocket** (also 2%).

A majority of volunteers said they would volunteer again in the future

Nine in ten (92%) of those who had volunteered for an organisation funded by the CCSF said they were either certain to or very likely to **volunteer in the future** (see Annex B, Table 5.8). Positively eight in ten (83%) of those new to volunteering said they intended to volunteer again.

We recruited about 20 volunteers throughout the pandemic. Unfortunately, some of them were people on furlough and were called back to work. But we have recruited some additional volunteers that have stayed with us and will stay with us beyond.





Many people have carried on volunteering with us, which has been fantastic, and I think will continue volunteering for quite a long time after.

Grantholder

Those who said they were unlikely to continue to volunteer tended to report that this was because they were **no longer able to dedicate enough time to it.** However, just 12 volunteers reported this to be a factor, equating to less than 1% of survey respondents overall. Grantholders noted that while some volunteers returned to work when their time on furlough came to an end, they managed to retain a number of the volunteers they had recruited during the pandemic.

6 Conclusions

6.1 Introduction

The previous chapters set out the findings from an assessment of the impact the CCSF made to the **people and communities that were supported, the organisations that were funded, the volunteers involved, and wider society**. In line with the ToC and associated hypotheses developed during the evaluation scoping stage, the assessment was broken down to focus on how the CCSF contributed to the anticipated outcomes across four groups: (1) beneficiaries; (2) grantholders and (3) their staff; and (4) volunteers. The hypotheses were developed to **reflect the short-term nature of the grant period**, and longer-term outcomes and impacts were outside the scope of this evaluation. The impact evaluation adopted **contribution analysis** to guide the assessment of the extent to which there was evidence that supported (or conflicted with) the claims made about the CCSF's contribution.

This concluding chapter brings together the evidence to assess the overarching hypothesis and the two objectives of the CCSF programme. This is followed by a summary of the lessons learned from the design and delivery of the impact evaluation of the CCSF.

6.2 Summary assessment of the overarching hypothesis and the CCSF's aims

The CCSF had two primary objectives and the overarching hypothesis was developed to reflect these aims. The overarching hypothesis can be broken down into three parts, which broadly align with the objectives as shown on the next page. However, they are closely interlinked with one another.

CCSF objectives **Overarching hypothesis** A) The CCSF has funded organisations that have identified and worked with the individuals and 1) To increase community support to vulnerable people affected by the COVIDcommunities who have been disproportionately affected **19 crisis**, through the work of civil society by COVID-19. organisations B) These organisations have funded activities that have assessed immediate needs, delivered appropriate support/activities and achieved positive outcomes for individuals and communities. 2) To reduce temporary closures of essential charities and social enterprises, C) By funding this work, the CCSF has also contributed to ensuring services for vulnerable people the financial health, capacity and capability of some impacted by COVID-19 have the financial organisations. resources to operate, and so reduce the burden on public services.

The table below summarises the evidence relating to each of the three parts of the overarching hypothesis.

HYPOTHESIS ASSESSMENT	
A) The CCSF has funded organisations that have identified and worked with the individuals and communities who have been disproportionately affected by COVID-19.	The evidence detailed in Chapters 2 and 3 found that CCSF grantholders were successful in reaching people and communities disproportionately affected by COVID-19. This provides confidence that The Fund successfully distributed CCSF grants to organisations who were able to engage the intended groups of people and communities.
B) These organisations have funded activities that have assessed immediate needs, delivered appropriate support/activities and achieved positive outcomes for individuals and communities.	As detailed in Chapter 3, there was good evidence that CCSF grantholders delivered appropriate support to different groups of beneficiaries. Most grantholders offered multiple methods of engagement, including by phone, video call and/or face-to-face. Grantholders acted as an intermediary by delivering the CCSF-funded support to improve outcomes for people and communities. Most grantholders reported multiple ways in which their beneficiaries were better off than they may have otherwise been without the CCSF- funded support. The most commonly reported outcomes for beneficiaries included better mental health and wellbeing, feeling less lonely and increased social contact. However, the evidence on outcomes largely relies on grantholder reported outcomes and a small number of case study interviews with beneficiaries. For some short-term outcomes, such as basic needs being met, the contribution of the CCSF was clear. For others, the contribution of the CCSF was more speculative in the absence of direct measurement and there are likely to have been other contributing factors (see below).
C) By funding this work, the CCSF has also contributed to the financial health, capacity and capability of some organisations.	The funding was distributed directly to grantholders with immediate implications for staff and volunteers, which in turn enabled CCSF grantholders to deliver support to people and communities. As detailed in Chapters 4 and 5, this involved using the CCSF grants to maintain, increase or adapt their activities . This included using the funding to: bring back or prevent staff from furlough; recruit staff; increase staff hours; recruit volunteers; increase volunteer hours; and/or train staff/volunteers. The evidence suggested that the CCSF contributed to a reduction in temporary closures of some essential charities and social enterprises . As such, there was strong evidence that the CCSF contributed to the financial health, capacity and capability of organisations during the pandemic.

ALTERNATIVE EXPLANATIONS

It is important to situate the evidence supporting the overarching hypothesis within the wider system of factors that also appeared to influence at least some outcomes observed. For example, other funding sources also contributed to grantholders' ability to remain financially viable and/or continue delivery. Grantholders also acknowledged that there were other potential sources of support available to beneficiaries, including other local and statutory services, and that these could also have contributed to positive outcomes.

This more accurately demonstrates that the **CCSF was not alone in the complex configuration of factors** that influenced, for example, whether grantholders overcame liquidity issues or the wide array of outcomes for beneficiaries. Certainly, in some cases, the CCSF plus other necessary factors, such as additional funding for grantholder organisations, **worked in complementary ways to result in positive change**.

It was not possible within the scope of this evaluation to estimate the differential size of contribution of the CCSF relative to other factors. Despite this, the evidence demonstrated that the CCSF was among the most important financial contributors – and for some the singular most important – for the reported outcomes.

Bringing this back to the CCSF objectives, the assessment demonstrated that **the CCSF achieved its first objective to increase community support to vulnerable people affected by the COVID-19 crisis,** through the work of civil society organisations. Most organisations reported they would have delivered fewer services without their CCSF grant.

The assessment also provided **promising evidence in support of the CCSF's second objective to reduce temporary closures** of essential charities and social enterprises, though this was less notable for larger organisations. Overall, the CCSF was found to have helped ensure that organisations had financial resources to operate and continue to deliver activities and support. However, the **evidence was less clear regarding the impact on public services**. In some cases, supporting beneficiaries may have reduced demand for public services in the short or longer term. At the same time, grantholders provided advice, guidance and signposting, including to public services, which could potentially have increased demand for public services in the short term. Whilst this does not directly support the hypothesis around reduction in demand for public services, it does mean that more individuals were able to access the support they needed.

6.3 Lessons learned from the evaluation approach

Given the novel circumstances, there were a number of key lessons learned in relation to designing and delivering an impact evaluation of a large-scale emergency funding programme. These are outlined below to support the evidence base for evaluating similar programmes in the future.

- Given the emergency nature of the funding and its large scale, the evaluation necessitated a rapid and intensive scoping and set-up stage. This involved the development of the ToC, logic model, and hypotheses (including assumptions), which heavily informed the design of the evaluation and acted as the foundation against which we assessed the success of the programme. Reflecting on the triangulated evidence, the ToC and associated hypotheses remain an accurate representation of the CCSF and its contribution to key outcomes for people and communities (beneficiaries), grantholders and their staff, and volunteers. This confirms that the scoping stage successfully set out a suitable design and future evaluations of similar programmes may wish to follow a similar approach.
- A significant success of the evaluation was the large-scale and iterative data collection. Despite conducting research during a challenging time, often with time-constrained grantholders, the surveys reached the majority (82%) of grantholders and almost 9,500 volunteers. Such high response rates suggest that the early communication and requirement as part of the terms and conditions of the grant to take part worked well. Funders of future programmes should consider whether this would be suitable as a means to boost engagement in evaluation activity.

- Related to the point above, grantholders engaged positively as part of the qualitative research, contributing to interviews and the set-up of case studies. Many were enthusiastic to be involved and identified staff, volunteers, delivery partners and beneficiaries to support the evaluation. Most beneficiaries interviewed were happy to share their experiences and were grateful for the opportunity. While research with beneficiaries was specified as outside the scope of this evaluation to minimise burden on grantholders and beneficiaries, this experience encourages further consideration for future evaluations. For example, evaluators could incorporate a feasibility assessment during the scoping stage to determine whether it would be appropriate to conduct research with beneficiaries and the more suitable methods. This would further strengthen future evaluations given that a limitation of this evaluation was the absence of direct evidence from beneficiaries other than a relatively small number of case study interviews.
- The survey asked grantholders to estimate numeric data, for example the total number of beneficiaries supported or additional number of volunteer hours enabled by the CCSF funding. The data was internally validated but future funders and evaluators should consider ways to gather externally validated data. For example, there may be opportunities to introduce proportionate monitoring of grantholder reach, to help minimise self-reporting bias.
- The evaluation identified several other influencing factors that appeared to contribute to the intended outcomes, often complementary to the CCSF. To build on this work, future evaluations of similar programmes would benefit from casting a wider net to collect data from stakeholders within the sector. On a smaller scale, it would be valuable to conduct mapping exercises as part of case studies to support further understanding of the relative contribution of different factors and their interaction (e.g. is it the combination of factors that lead to success?).
- A number of key stakeholders were involved in shaping the evaluation, including stakeholders from The Fund, DCMS, the evaluation consortium and the Evaluation Expert Advisory Group. These collaborative stakeholder relationships ensure varied and constructive feedback throughout the evaluation lifecycle.

6.4 Concluding remarks

The findings of the evaluation demonstrate that the CCSF successfully reached organisations who engaged and supported people and communities disproportionately affected by COVID-19, and that the CCSF contributed to the financial health, capacity and capability of grantholders. Furthermore, it helped develop an evidence base for evaluating emergency funding programmes.

Our standards and accreditations

Ipsos MORI's standards and accreditations provide our clients with the peace of mind that they can always depend on us to deliver reliable, sustainable findings. Our focus on quality and continuous improvement means we have embedded a "right first time" approach throughout our organisation.



ISO 20252

This is the international market research specific standard that supersedes BS 7911/MRQSA and incorporates IQCS (Interviewer Quality Control Scheme). It covers the five stages of a Market Research project. Ipsos MORI was the first company in the world to gain this accreditation.



Market Research Society (MRS) Company Partnership

By being an MRS Company Partner, Ipsos MORI endorses and supports the core MRS brand values of professionalism, research excellence and business effectiveness, and commits to comply with the MRS Code of Conduct throughout the organisation. We were the first company to sign up to the requirements and self-regulation of the MRS Code. More than 350 companies have followed our lead.



ISO 9001

This is the international general company standard with a focus on continual improvement through quality management systems. In 1994, we became one of the early adopters of the ISO 9001 business standard.



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The UK General Data Protection Regulation (GDPR) and the UK Data Protection Act (DPA) 2018

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