

Devon Communities Together

COVID-19 Helpline

Supporting Devon Town & Parish Councils,
Village Halls & Community Buildings

End of Phase 1 Report

23 March - 23rd June 2020



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1.0 Introduction

As part of the remarkable responses to the global pandemic resulting in a lockdown in UK which began on 23rd March 2020, Devon County Council (DCC) commissioned Devon Communities Together (DCT) to deliver a Covid-19 Phase 1 emergency response support service for Town & Parish Councils and Village Halls & Community Buildings in Devon for a period of three months (from 23rd March to 23rd June 2020).

The main purpose of the service was for DCT to provide a county-wide COVID-19 emergency response helpline/email channel and web information, advice and support to Town and Parish Councils and the Devon Community Buildings and Village Hall Networks, in support of their local community and resilience activities. Key achievements are illustrated below, with further details in subsequent parts of this report.



672 community contacts



4 focus group meetings



Two Surveys with a total of 226 participants



12 CV-19 weekly reports on intelligence gathered



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Over the past three months, DCT has effectively provided support to our communities through diverse activities related to this project, as guided by the deliverables below.



Publicity, information and promotion of communication channels



Dedicated support from a DCT officer, telephone and email support
(signposting)



Locality based intelligence gathering and reporting

This report gives a detailed overview of the outputs of implementation of DCT's covid-19 community resilience activities per thematic area; Impact on the assigned cohort; and lessons learnt/recommendations.



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2.0 Delivery / Implementation

2.1 Publicity, information and promotion of communication channels

DCT has consistently ensured regular circulation of all relevant information, advice and opportunities to communities via our communication channels and platforms. This includes posting and distribution of relevant covid-19 related guidance and information via the DCT social media platforms (Facebook, twitter, Instagram), emailing platforms, and website.

One of the first pieces of promotional material made for the helpline and website, was an email signature graphic. This graphic featured the helpline number and its target audience. The signature graphic was sent to all members of DCT staff. Underneath this graphic was also a link to the coronavirus FAQ page.



Figure 1: Sample of DCT CV-19 email signature

Social Media Engagement and E-bulletins

The main image used within this graphic, was then featured within social media graphics. Each of these graphics clearly stated the helpline number and how we could assist our target audience in different ways.



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helping communities help themselves



These graphics were used across our 4 main social media platforms; Facebook, Twitter, LinkedIn and Instagram. The images featured alongside other e-posters which stated the coronavirus website address, information or helpline number.

As the pandemic developed and measures began to ease, the messages used for these images changed. We informed our audience that we could now support them, as restrictions eased.



Figure 2: Four different samples of DCT CV-19 e-posters/graphics



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When posted on Facebook, this image became one that our audience highly engaged with. More so, these graphics were also used to promote the helpline within our e-bulletins. We ensured each e-bulletin circulated featured the CV-19 graphics for further reach to our target audience. The images worked well to provide a strong, clear message of the service we were providing.

These were also used to create links to our website resource and information page. It was often identified within our data that these links were the most clicked links in our twice weekly e -bulletins.

The Covid -19 coronavirus resources & information website page and helpline was also consistently promoted within a number of DCT publications. One of those publications was our 2019 – 2020 Annual Impact Report ([link](#)). This impact report was promoted across social media, our website and e-bulletins. Promotion was also heavily featured in our Quarter 4 2019/20 Impact Report ([link](#)).

Furthermore, DCT's latest edition of LOVE Devon magazine ([link](#)), distributed this month, featured an article with case studies and DCT's response to the pandemic through our Covid-19 community support activities. Hard copies of the magazine are being sent out to partner and stakeholder organisations and DCT membership and networks. The digital publication is published on our website and also promoted across our social media platforms.

Throughout the early stages of our service, DCT conducted a range of publicity which moved away from our usual platforms. From the 16th – 31st March, two local radio interviews were conducted, and a press release was sent out which promoted the launch of our helpline. One interview took place on Radio Devon and another on ITV West Country news. This publicity was also promoted via Twitter, giving our audience and interested members of the public, an opportunity to find out more about our helpline and support activities.

Since March, it has been a priority to promote the helpline and website information and resources page. The DCT Marketing and Project Delivery team have produced between one and three e-bulletins each week throughout the twelve week delivery period (Final bulletin sent on 22nd June), with positive feedback from our target audience.

It has been noted that our bulletins have been further shared on community website pages and social media platforms, parish & community newsletters, which demonstrates its positive impact on our audience. DCT has been commended on the high quality of our Covid-19 emergency response communications by partners and stakeholders.



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On the 25th June, Martin Rich (DCT Community Engagement Officer) reported:

I've had a lot of very good feedback on the bulletins and circulars. They have been appreciated, enabled us to help a lot of communities and have even recruited new DCT members.'



31 e-bulletins

From the 13th March – 22nd June, a total number of 31 e-bulletins were sent out. Each bulletin was sent to an extensive network of community contacts related to Village Halls, Community Buildings and Town & Parish councils.

The first bulletin was sent to 337 recipients. As promotion and information increased, so did the number of recipients. The most recent bulletin was sent 2,606 recipients.

62 posts

Across Twitter, Facebook, LinkedIn and Instagram there have been a total of 62 coronavirus related posts (includes stories). The social media posts combined information about the website page and a strong call to action to ring the helpline.

Some pieces of information that were featured in the bulletins, were also promoted across social media.

The infographic below provide a summary of overall social media data.



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OVERALL SOCIAL MEDIA DATA: VIEWS, LIKES, SHARES & CLICKS

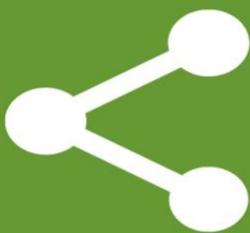
COMBINED DATA FROM 62
POSTS. TWITTER,
FACEBOOK,LINKEDIN &
INSTAGRAM WERE ALL USED



32,192 TOTAL VIEWS



240 LIKES



180 SHARES



453 CLICKS

Examples of social media posts on
Instagram

CALL OUR COVID-19
HELPLINE TODAY!



@devoncommstogether

NEED ADVICE AND
SUPPORT DURING THE
EASING OF
LOCKDOWN
MEASURES?



CALL OUR COVID19
HELPLINE TODAY!



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With regards to website development, the DCT Covid -19 coronavirus information and resources website page has been a consistent source of information for our audience. Much like the helpline, the website has been widely promoted across our social media platforms. Covid related development on the DCT website began in March and was consistently updated in correspondence to evolving national and local government guidance and information.

Originally, the website had a simple layout. The page featured 13 categories, which were each linked to single pages.

Contents:

- [1. What is Coronavirus?](#)
- [2. General Guidance](#)
- [3. Stay at Home Guidance](#)
- [4. Advice for Village Halls and Community Buildings](#)
- [5. Advice for Community Groups](#)
- [6. Protecting the Isolated and Vulnerable](#)
- [7. Community Messaging System](#)
- [8. Guidance for Community Transport](#)
- [9. Churches Meeting Community Needs](#)
- [10. Current Cyber Protect Advice from Devon & Cornwall Police](#)
- [11. Advice from the Charity Commission around charity governance](#)
- [12. Funding and Grants Available](#)
- [13. Frequently Asked Questions](#)

Figure 3: Example of initial website page layout (early stage – March)

As time went on, this was updated in light of the increasing amount of information and resources posted. From April, the website page layout was further developed. Rather than using single pages for each piece of information, text was presented on a number of pages which were then organised into ‘Sub-pages’. These sub-pages were still presented in the relevant categories, but this new format was easier to follow and more user friendly.

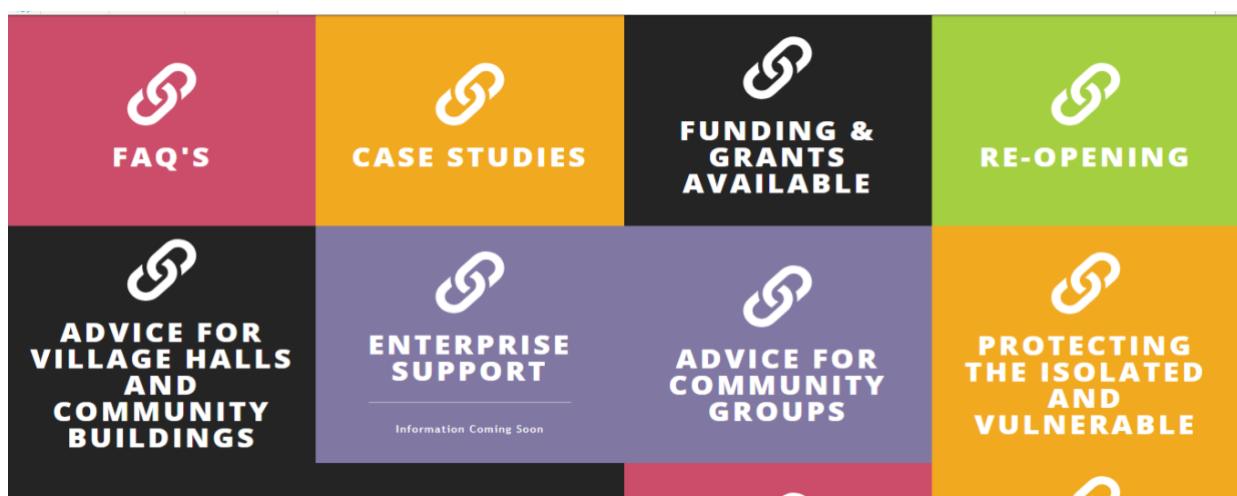


Figure 4: Example of updated website page layout



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The response to the new layout was positive and also complimented the vast amount of information that we had received/ sourced.

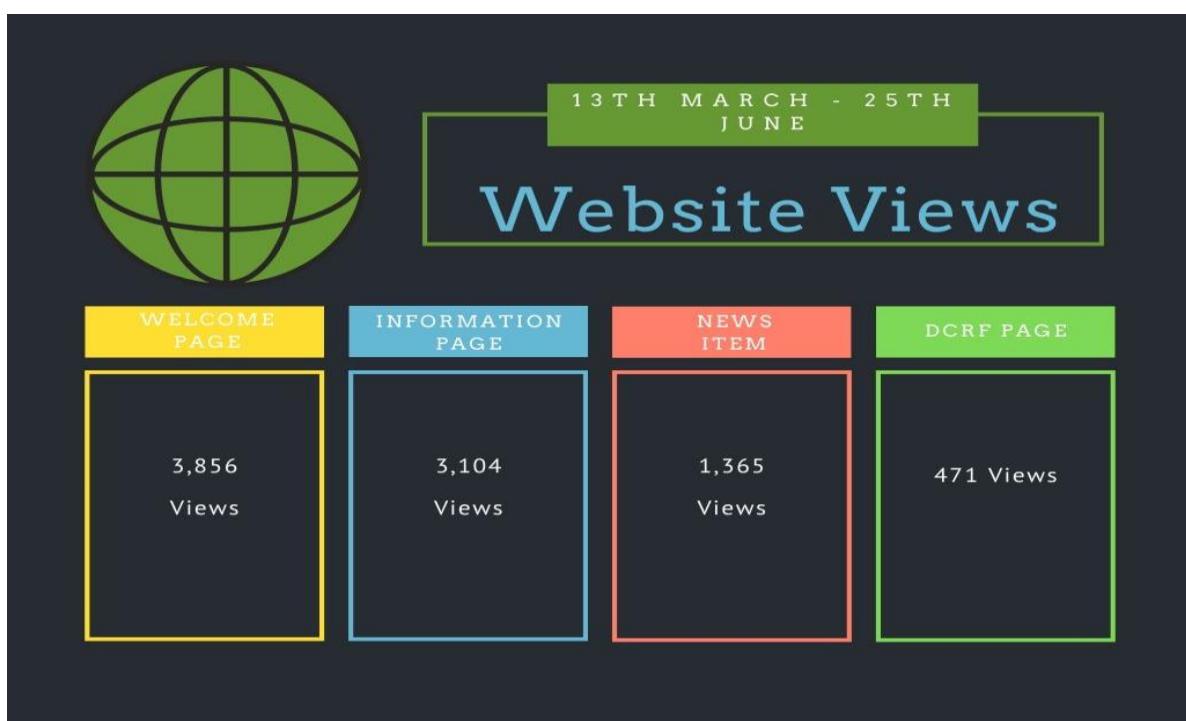
The main website page consistently featured four main links:

- NHS 111
- UK Government
- BBC News Coverage
- NHS England

As information about Covid-19 developed, we also promoted the Devon County Council website. Overall, the coronavirus information page and DCT website welcome page have featured insightful information about our response to covid-19.

The infographic below shows the number of views from the four main website pages:

- Coronavirus Information Page
- DCT Welcome Page (Featured a maximum of 4 links to info page and contained helpline info)
- Devon Community Resilience Forum (DCRF – Featured link to info page)
- Coronavirus Information news item (featured one link to info page)





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The subsequent infographic clearly shows that the 'Advice for Village Halls & Community Buildings' page has been the highest viewed subpage over the last four months. In total these subpages received 2312 views.

SUBPAGE VIEWS

Views for FAQs, Case Studies, Funding & Grants Available, Re-opening, Advice for Village Halls & Community Buildings, Advice for Community Groups, Protecting the Isolated and Vulnerable, General Guidance, Churches Meeting Community Needs, Advice from the Charity Commission Around Charity Governance and Cyber Protect Advice from Devon & Cornwall Police



ADVICE FROM THE CHARITY COMMISSION AROUND CHARITY GOVERNANCE

55





2.2 Dedicated support from a DCT officer, telephone and email support (signposting) – Helpline activities.

DCT has consistently provided support to strengthen the community capacity and resilience of its assigned cohort: Town/Parish councils, Devon Community Buildings and Village Hall Networks.

For the past three months, the CV-19 helpline has provided fast track advice and signposting of contacts to the appropriate service providers, as well as provision of direct support.

Our helpline staff provided advice and assistance on the following general issue categories per helpline contacts: Finance & Funding; Organisation & Management; Health and Social Care; Food (Access to and delivery of); Information Request/Dissemination; Regulation & Guidance; Transportation; and Other Essentials.

The helpline was operated by experienced DCT project delivery staff every Monday to Friday from 9am to 5pm. There was a total number of **672 community contacts** within the three months period.

The DCT CV-19 project delivery team continually explored ways and initiated activities to upgrade and expand its support efforts through all available means. This includes the roll out of two county-wide surveys; commencement and successful delivery of targeted interviews; and facilitation of virtual peer support.

The targeted interviews involved proactive contacting of various local councils, districts and community buildings. The team contacted Town/Parish Councils, Community buildings and Village halls, to gain a more detailed picture of their resilience and capacity to respond to the COVID-19 emergency.

Furthermore, DCT undertook virtual focus group meetings on zoom with clerks and councillors of local councils on the impact of Covid-19 on their activities, and also to ascertain their level of resilience. A total number of **4 focus group meetings** were held with **54 local leaders in total** participating.

As stated above, two surveys were conducted between 27th March to 23rd June 2020. These were targeted at Town/Parish Councils and Village halls respectively, to ascertain the impact of Covid-19 on them.

During this period also, DCT has worked collaboratively with other organisations, groups, and District Councils to ensure a well-coordinated and streamlined response service. This advanced understanding of stakeholders on the interconnectedness of their individual operations around COVID-19.



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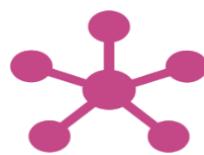


Total of 672 community contacts

4 focus group meetings with a total of 54 local leaders



Networking and collaboration with other stakeholders



Linkage with other DCT projects

Furthermore, identification of similarities and gap areas led to modification and update of support systems put in place by all stakeholders to enhance respective services being provided. Networking with other commissioned stakeholders such as ACRE and DALC also enhanced the opportunity to collectively find solutions and response to emerging issues.

DCT also identified interconnectedness of the COVID-19 project activities with other existing project activities. This was to buttress the gathering of more intelligence and advance support provision. An example of such projects is DCT's Devon "HIGHLIGHTS" project aimed to improve the quality of life and physical and mental wellbeing of older people (aged 55+) living in rural areas who are at risk of isolation and loneliness. In connection with our CV-19 activities, individuals, especially the elderly, who contacted the helpline with a case of loneliness were signposted to our experienced community officers for further support.



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2.3 Locality based intelligence gathering and reporting

Intelligence was gathered from all DCT's CV-19 delivery activities, through constant monitoring and recording of all data and local intelligence received. Intelligence gathered stemmed from daily helpline contacts; proactive contacts (thus, surveys, interviews, and focus group meetings), to build a picture of what is going on in communities.

DCT, without fail produced **12 weekly reports** within the project period, which clearly demonstrated periodical happenings, challenges, and impact of covid19 within communities, as well as communities' resilience, and response to the changing times of the pandemic/lockdown.

Below is a summary of results from surveys and focus group meetings undertaken with our cohort.

Town and Parish Council's survey

This survey ran from 27th March to 23rd June 2020 online using Survey Monkey. It was created to help understand the challenges faced by town and parish councils during the COVID-19 pandemic and related lockdown, and how we as a rural community council can support our town and parish during this time. The survey data was collected alongside data from four focus groups, and data collection and support phone calls to build a rich understanding of the impact of COVID-19 and lockdown on Devon's town and parish councils

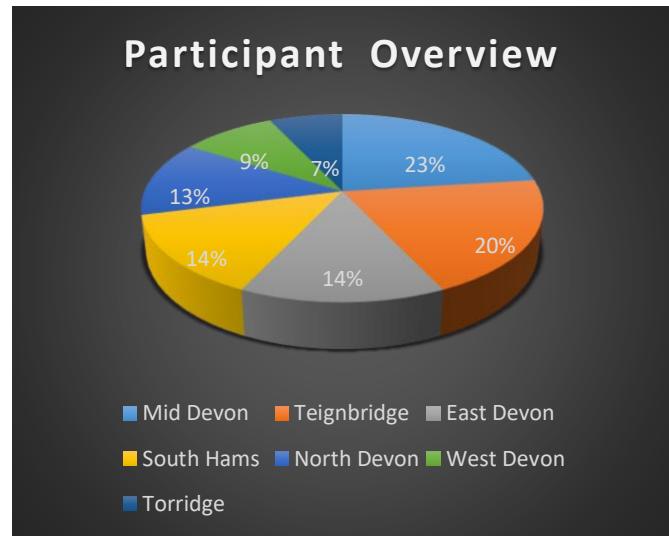


Participant overview

A total number of 121 participants took part in the survey covering the Devon District areas. Those who answered the question of their district are:



- 23% were from Mid Devon
- 20% were from Teignbridge
- 14% were from East Devon
- 14% were from the South Hams
- 13% were from North Devon
- 9% were from West Devon
- 7% were from Torridge



Community Emergency Planning

40% of respondents had a ratified community emergency plan. Those communities without a community emergency plan were advised within the survey how to access support in plan development through Devon Communities Together.

Participants that had activated their community emergency plan in response to the pandemic were asked whether this was useful. Of the 18 participants who responded, only five had activated their community emergency plan and three had partially used information from within the plan in their response.

Most commonly, the plan had provided ready access to local volunteers, and set a structure for working with these volunteers including insurance. For those with a plan who did not activate it, this was because either the plan was out of date, showing the importance of maintaining an up to date plan, or the plan was focused on flooding and therefore the community did not perceive a use for it in pandemic response.

However, when it came to planning for COVID-19, specific pandemic plans were rapidly developed with 72% of communities represented in the survey having developed a plan to support their COVID-19 and lockdown response.



COVID-19 and lockdown community response

Community COVID-19 response has prompted a range of new and strengthened existing community relationships between local government, local businesses, and not for profit organisations. Each local area differed in the organisation composition of COVID-19 support groups, including the extent to which town and parish councils were involved. Local organisations involved frequently included; health centres and GP surgeries, churches, schools, district councils, chambers of commerce, Age Concern, and in smaller communities, frequently community shops and pubs.

Within these multi-actor groups, or in some cases working alone; 92% have a strategy to support medical needs including transport to appointments and collection of medicine, 87% have a strategy to support confined residents, 75% had identified vulnerable people in the community, and 71% had developed a plan specifically to manage their COVID-19 community support.



Key Challenges

Respondents were asked about their key local challenges. This was often related to ageing populations (16% of respondents expressed this) and that this created vulnerabilities and need for support to ensure isolation. Relatedly, 14% of respondents expressed concern in not always being able to identify all vulnerable members of the community. Respondents noted that a key challenge was often around shopping for vulnerable people, including prescription collection.

Challenges here were often logistical, such as small rural community shops not always being able to access food as readily as supermarkets, and how to organize payment for shopping without compromising shielding.

The dispersed rural nature of some parishes raised additional challenges for 16% of respondents. Issues compounded by rurality include; lack of shops, public transport ceasing, difficulty in communicating, poor rural broadband, and the logistics of volunteers providing support across a large-low population density rural area.

9% of respondents stated that a key challenge was discouraging visitors. This included visitors travelling to exercise, and second homeowners. There was worry about such activities negatively impacting on local community resilience.



For 5% of respondents, a key challenge was around top down support. Problems here included confusing messaging, lack of engagement and support from higher tiers of government, and advice changing at a speed without ample time to respond at the local level.

Additional challenges noted by a smaller number of respondents include;

- Financially struggling members of the community (3%)
- Not enough volunteers or concerns about volunteer long term sustainability (3%)
- Managing uncertainty (2%)
- Working with a range of groups with different approaches (1%)
- Remotely coordinating the local response (1%)
- Lockdown compliance (1%)
- Accessing PPE (1%).



Helping communities to respond; support needs

70% of those responding to the question of capacity to continue with the current level of support, answered that they could continue at this level. For those who were unsure if this would be possible, concerns were raised about volunteer fatigue or return to work, and lack of central government support.

Participants were asked what support could be provided to ensure that their council would be able to continue to provide community support:

- Financial support (6 respondents)
- Improved communication with higher tiers of government (2 respondents)
- Help maintaining public spaces (1 respondent)
- Help in supporting a local family with additional needs (1 respondent)



Best practice

By identifying best practice in COVID-19 response, support models can be created. Best practice identification has additionally refocused on positive stories in the pandemic and shown the possibility of legacy development at the local level. Best practices identified are:

- Recognition of community willingness (10 respondents)
- Creation of a volunteer network (5 respondents)



- Having a local response Facebook group (5 respondents)
- Working in collaboration with a local pub or community shop (5 respondents)
- Working in collaboration with other local organisations (5 respondents)
- Having a dedicated helpline number for local support requests (2 respondents)
- Chatting support for those isolating (1 respondent)
- Creative projects such as distribution of plants to grow (1 respondent)
- Organising support at the micro scale, e.g. one key contact per hamlet or street (1 respondent)



Summary

- While only 40% of the participating town and parish councils have a community emergency plan, 72% have developed a COVID-19 response plan, providing a platform from which community emergency planning can be developed.
- Town and Parish councils have been involved in community COVID-19 support in a variety of different ways and working with different amalgamations of local organisations, which frequently include, shops, pubs, health centres, and churches.
- Key challenges centre around higher than average ageing populations, dispersed rural areas, discouraging visitors, and top down support and communication being confusing, conflicting, or lacking.
- Town and parish councils have seen good levels of community support, at the level of both individuals, and other local organisations.

Village Halls and Community Buildings Survey

This survey ran from 23rd April to 23rd June online using Survey Monkey. It was created to help understand the challenges faced by community buildings during the COVID-19 pandemic and related lockdown, and how we as a rural community council can support our community buildings during this time.



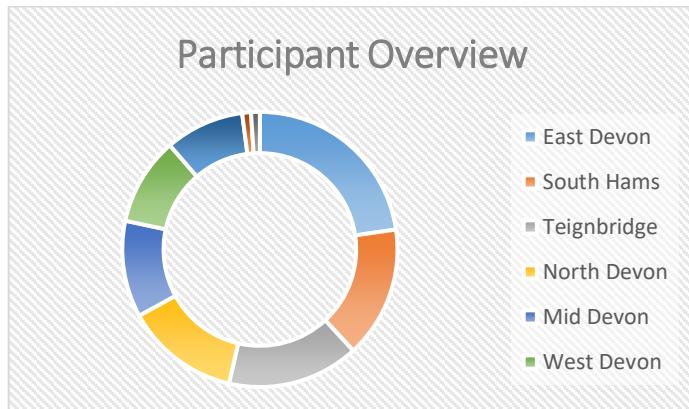
Participant overview

105 participants representing their community building responded to the survey representing; 3 city-based community buildings, 9 market town community buildings, and 93 rural community buildings (Village, parish, and community halls).

Of those, 80% were a CIO or charity owned asset. 10.5% were owned by another organisation such as the parish council or a church. 9.5% were leased or held in trust.

97 participants gave their district area with a breakdown as follows:

- 22 in East Devon
- 1 in Exeter
- 11 in Mid Devon
- 13 in North Devon
- 1 in Plymouth
- 15 in South Hams
- 15 in Teignbridge
- 9 in Torridge
- 10 in West Devon



COVID-19 and Lockdown Actions

Participants were asked about actions that had been taken as a result of the pandemic and subsequent lockdown. All halls had closed with 85% of halls reporting full closure, and 15% of halls reporting partial closure.



Participants used the free text field to expand upon the services and usages of the community buildings for those that are partially open, often taking on new services to adapt to community support needs during the pandemic and lockdown. These services and uses include:

- Post Office, including an emergency Post Office (6)
- Food bank or community kitchen (4)
- NHS Blood donation sessions (2)
- Book swap service (2)
- PPE production (1)
- Collection and distribution point for prescriptions (1)
- Dance practice for an individual (1)

Participants were asked whether the hall's COVID-19 community response will require further funding in the next 6-8 weeks. 15.5% of respondents to this question responded that they would require funding in this time frame in order to support their community response.

17% of participants stated that their community building would be able to increase their community COVID-19 support if they received additional funding to do so.



COVID-19 and Lockdown Impact

Participants were asked which issues, from a list provided, apply to them as a result of the pandemic. Response data is summarised in Table 1.

Issues arising	Percentage responses
Immediate short-term impact on users of your building (please provide details)	75.49%
Longer term impact on users of your building (please provide details)	52.94%
Access to equipment & supplies (including PPE)	8.82%
Reduced demand for your services	58.82%
Immediate cash-flow problems	9.80%



Medium to long term financial difficulties	48.04%
Additional advice and guidance needs (please provide details)	6.86%
Technical ICT /broadband/ software limitations	2.94%
Other (Please supply)	6.86%

Table 1: Issues arising for community buildings as a result of the pandemic

Clearly the greatest impact is seen upon the users of the building, but with a high reduced demand for services, this in turn impacts on hall bookings and potentially financial sustainability. This is reflected in 9.8% of respondents citing immediate cash flow problems and 48% of respondents citing medium to long term financial difficulties.

When looking in more detail at those halls facing potential financial difficulties, of the 9.8% facing immediate financial difficulty, these halls had all closed completely, and none of them were offering any new services. While for the 48% facing medium to long term financial difficulties, 98% had fully or partially closed their hall and 12% had developed new community services.

Of concern, 2 participants reported that their community building would be at the point of failure if the current lockdown¹ continued for 3 months, 4 reported they would be at the point of failure if it continued for 6 months, and 21 reported they would be at the point of failure if it continued for 12 months.

During normal times participants reported community building monthly income of between £150 a month for a small rural hall, to £12,500 a month for a larger market town venue, with an average monthly income across all participant community buildings of £1,512.

Participants reported a monthly loss of income for their community building which varied between £50 for a small village hall, through to £5,200 for a large community building within a market town. Average loss of revenue was £1,250 per month. 75% of participants reported that their current monthly income during lockdown was zero.

Of the 25% still receiving some level of monthly income this ranged from £10 to £1,300, for the latter this higher level of continued income was due to the school hiring the premises in addition to the solar feed in tariff. For the 25% still receiving a monthly income during lockdown the average figure was £270.

¹ At the time of the survey being open, community buildings were not permitted to open for any indoor activity.



Looking ahead to lockdown easing, community buildings will not immediately return to pre-COVID-19 income levels, with participants reporting that they expect bookings to be significantly lower, especially in areas where the majority of users are older.

With this in mind, participants reported plans to advertise through social media, local newspapers, and radio, and hold events to boost the venue profile and potential bookings. However, at the time of taking the survey, many participants used free text fields to report the need for clear guidance on reopening. Guidance for Village Halls has subsequently been produced by Action for Communities in Rural England (ACRE) and shared with Devon's community buildings by Devon Communities Together.

Across all participants, 49% reported having applied for funding, some through multiple sources (without success) but generally through the Retail, Hospitality, and Leisure £10,000 grant, with successful receipt of the award.

When looking at this specifically for those community buildings facing immediate financial difficulty, 70% of these had applied for funding. For those facing medium to long term financial difficulty, the figure applying for grant funding was slightly below the overall average, at 47%.



Community Building Management During Lockdown

57% of participants said that their community building management committee were still meeting in some way during lockdown, compared to 43% who were not meeting in any way. Many respondents explained that they use Zoom, email or phone calls to meet with members of the committee, both formally and informally.

The hall buildings themselves are being looked after predominantly by visits from committee members on a frequency ranging from 'daily' to 'occasionally'. In some instances, caretakers or cleaners have been furloughed and this maintenance has fallen to the committee.

For some halls, maintenance work such as painting or work on heating systems has been done, especially when able to be undertaken by a member of the hall committee. For those community buildings who were undertaking, or were planning to start larger scale building work this has almost always been postponed or delayed, as one participant explained,

"We were nearing the end of a refurbishment when the lockdown started. Money in our account is mainly grant money which can only be used for that purpose. The builder was able to continue as social distancing was easy, but we were relying on our income to complete the work".

(Rural Village Hall, Currently Fully Closed)



43% of community buildings reported completing work on their governance and administration during lockdown. Predominantly this related to updating processes and producing documentation to support the hall reopening with new risk assessments as lockdown is eased, including 51% of respondents who were specifically creating a plan for reopening. 5 community buildings have used this time to review and update general policies.



Summary

- Community buildings vary greatly in their size and ability to deal with the impacts of COVID-19 with a large degree of variability in normal income and overheads
- For 27 halls, their community building would be at the point of failure within the next 12 months were lockdown to continue
- Access to funding is vital for many community buildings to enable their sustainability through the pandemic
- Community buildings are supporting services related to COVID-19 support and 17% of participant halls would be able to increase that community provision with access to funding



3.0 Overall Impact

Feedback from diverse sources clearly demonstrate the immense impact DCT's CV-19 support services has had. This has reflected in most case studies and personal contacts from local councils, individuals, and village halls.

Most village halls and community buildings especially have been able to receive guidance and assistance on their survival during the pandemic, among others, through our bi-weekly bulletins and consistent distribution of relevant updates and information via email platforms, social media platforms, and website. Most popular has been the provision of advice and information on available grants, as well as direct support in applying for the grants.

The positive impact of DCT's work as well as remarkable efforts of local communities has been reflected in all of the **14 case studies** that featured in our weekly reports.

Additionally, there has recently been great feedback on the benefits of recent distribution by DCT to village halls, information on ACRE's practical guidelines to help village halls reopen. This has been recognised as a beneficial tool for village halls, especially for their recovery and operation in the current phase of lockdown.

Below are some feedback and quotes from our cohorts.

“Just wanted to say this is such a helpful document and has made what at first thought felt like a daunting process to be much more simple – huge relief! We feel much more confident planning for the reopening of our Community Buildings as a result.”

“Thank you for providing this survey. It has given us, as a committee, several things to think about and our treasurer a lot of number crunching to do.”



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“This survey has highlighted our need to radically revise our budget and get a more reliable view of where we are going.”

“Thank you for the advice and support the team at DCT have given. It is really appreciated.”

“DCT's regular email newsletters have been very useful and have been distributed to all the Trustees.”

“It's good to know you are available to us, thank you. Thanks to DCT for regular information and updates. It's really helpful in keeping us aware of what we need to do. We are very glad that we are members!”



4.0 Conclusion, Recommendations & Way forward

In general, Devon communities depicted widespread community spirit coupled with stabilised efforts of Town/Parish Councils, Village Halls, and community groups in responding to the pandemic.

In spite of all the challenges and issues outlined in earlier parts of this report, communities have been able to mobilise through local Mutual Aid Groups and place-based spontaneous volunteer networks to effectively provide the necessary support to their community members to the best of their abilities.

Aside from the notable impact from DCT's Covid-19 project activities, the connection of existing DCT projects and partners to the COVID 19 project was also very beneficial and revealed significant impacts and challenges of the pandemic on a wide range of people (including "high risk population"), to which support was provided.

Considering the positive feedback received from our cohort and general reflection of the work done so far, DCT anticipates receiving further support to continually provide support to communities and community buildings, especially during this current recovery period. Furthermore, to assist communities in establishing the necessary mechanisms to be readily prepared to combat any future disasters. Specifically, community recovery, including work around Local Outbreak Management Plans (LOMPs) as required.

Recommendations/ Actions

- A second Delivery Phase to develop and roll out specific guidelines and protocols for volunteer engagement for all Town/Parish Councils and Emergency Response Groups to enhance coordination.
- Ongoing support to assist local councils to harness and mobilise the energy and enthusiasm of younger emergency response/ mutual aid group volunteers in local communities which otherwise may dissipate as lockdown is eased.
- Digital training for local councils to enhance additional digital upskilling to enable more video conferencing council meetings.



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- Need for greater connection with the bigger hubs for learning and sharing purposes. Thus, rural councils learning from, and connecting with larger councils/ other councils of the same size for more enhanced peer to peer support.
- Support for ongoing programme of focus group meetings undertaken by DCT, where local councils are able to engage with one another, peer network and share information and learning.
- Furtherance of resources for DCT through its ongoing resilience work, to continually provide support to communities who would like to update, formalise or begin developing a community emergency plan.