

Community Enterprise General Meeting 3 Wednesday, 13th July 2011 at St Mary Bourne Vicarage

Present (15)	Win Coventry SMB	Laura Sykes HbT	John Scott LP	Christian Dryden LP
	Bill Coventry SMB	John Scott SMB	David Ankcorn LP	Pat Jones SMB
	Robert Sykes HbT	Eve Lind-Smith SMB	Rekha Ankcorn LP	Jenny Cutbill SMB
		Jenna Cooper SMB	Caroline Hoyes SMB	Martin Coppen All
Apologies (11)	Kerry Meaden LP	James Croser SMB	Fenella Williams HbP	Marion Scull SMB
	Corinne Bowman LP	Dodie Marsden SMB	Terry Hemming LP	Andrew Parkins LP
	David Marklew LP	Mark Williams HbP	Bridget Culley SMB	

1. Structures: the proposal to work under the name Hill and Valley Area Community Enterprise (HVCE, pronounced HaVACE) was generally accepted. James Croser's paper ([Appendix 1a](#)) suggested the group is now formally set up as an Unincorporated Association with charitable aims (suggested in [Appendix 1b](#)) in order to work at the next more formal level, holding a bank account and gaining the ability to benefit from GiftAid. This was agreed. John Scott LP, John Scott SMB, David Ankcorn, Pat Jones, Martin Coppen and it is hoped, James Croser would meet to prepare a constitution for the next General Meeting, which would be the first Annual Meeting of HVCE.
2. Reports were tabled and discussed (copies of all documents attached as appendices).
 - a. Signposting: Pat Jones reported two initiatives of rolling pages of information distributed through Hill & Valley: health, prepared by Pat Jones & Jenny Cutbill, and other support, details being listed by Val Kennett & Lyn North. Next step is to consult with Mark Williams.
 - b. Neighbourcare: [Appendix 2](#). HbP are exploring joining the scheme. LP representatives to consult on whether there could be value in the scheme being rolled out to LP area. Christian Dryden to discuss with LP Community Association.
 - c. Village Agents: HCC/Age Concern scheme to be piloted in SMB by job-share of Val Kennett & Lyn North. This could use the Coffee Morning suggested below.
 - d. Parish Nursing Scheme: [Appendix 3](#) - to be discussed by PCCs as a helpful addition to Church pastoral care.
 - e. Coffee Morning: [Appendix 4](#). Caroline Hoyes had established that this would at least be supported by LP Recycled Teenagers, but we need to hold it open as an all age opportunity for meeting, with the aim of supporting the lonely, and the possibility of adding talks or discussion with advisers (could be Health Visitor, for instance). Caroline Hoyes to meet with Kerry Meaden, Marion Scull and Win Coventry to set up initially in SMB Coronation Arms.
 - f. Survey of Needs: Mark Williams still poised to start this but needs direction as to the line of questioning.
 - g. Un- or under-employed: [Appendix 5](#). The proposal is to set up a weekly Job Club at sub-executive level. The suggestion was made that this might be a second aspiration after testing the need by offering coaching as a mobile service. John Scott LP to write short article about coaching for H&V to begin airing the topic: further article to try to make H&V readers aware of the possibility of support: information to be put on website. HVCE will need to expect CRB checks when scheme reaches a particular size.
 - h. Fuel Syndicate: [Appendix 6](#). Jonny Rees-Davies has made a start at what is hoped will become a large scheme of 400-500 members. Points made in discussion; narrow/awkward access lanes in some areas: how payment is managed (direct to fuel company or via intermediary). HVCE has no intention of making a levy within the price.
3. Gathering up the fragments:
 - a. SMB PC had just promoted a Volunteer Awareness morning: quiet but worthwhile.
 - b. Lunch for Children: especially for those receiving free school meals.
4. Other matters: Kingfisher Club: to move from Whitchurch to Laverstoke, but needs £100k for the refurbishment – a substantial fund-raising target.

Date for next General Meeting = First HaVACE Annual Meeting: Wednesday, 12 October 2011, 8.00pm at SMB Vicarage (or better/larger).

Hill and Valley Area Community Enterprise (HVCE)

Briefing Paper on Structure and Organisation – What should the structure be?

In answering the question what should the structure be? We need to explore **both legal and charitable status**.

There are four main legal forms that charities may take:

Trust - the governing document is a trust deed or a will. There is no protection from liability for the trustees.

Unincorporated association - the governing document is a constitution or rules and there is usually a membership. The trustees are often referred to as the management committee. Again, there is no protection from liability for the trustees.

Company limited by guarantee - the governing documents are articles of association. The trustees (or directors) are protected in most circumstances against contractual liabilities. Charitable companies must register with Companies House and, with the Charity Commission if income exceeds £5,000 per annum.

Charitable Incorporated Organisation - the governing document will be a constitution. The trustees will be protected in most circumstances against contractual liabilities. CIOs only register with the Charity Commission.

Already the Hill & Valley Community Enterprise (HCVE) can be loosely defined as an **Unincorporated Association of members** with **charitable aims**. It now needs to formalise its legal structure in order to open a **bank account** and its charitable status to **recover VAT** and benefit from **gift aid** donations.

In order to formalise its legal status it needs to create a **constitution**; this will include the name of the organisation, its aims (in our case charitable aims), Members, Committee and Officers (Trustees) such as Chair, Secretary, Treasurer, Fundraiser, Membership Secretary and/or others, rules of how the Association will be run and the arrangements for meetings and the AGM. There is a straight forward template for a constitution on the charity Commissions Web Site that could suit our needs www.charitycommission.gov.uk/library/guidance/gd4text.pdf

As a small Charity the HVCE will want to **register with HMRC** to recover VAT and benefit from Gift Aid donations. **Registration with the charity commission** can only take place once its income exceeds £5,000 when it also becomes obligatory to register.

As the Hill & Valley Community Enterprise grows it will need to consider becoming either a **Company Limited by Guarantee** registered with Companies House (and probably with the Charity Commission as well) or a **Charitable Incorporated Organisation** just registered with the Charity Commission. Neither of these structures is considered suitable for HVCE to start with as they involve cost and more onerous reporting requirements but at a later date it will be appropriate and give trustees some financial protection.

Possible Charitable Aims for HVCE (Hill & Valley Area Community Enterprise)

Main Aims

- to **explore and encourage** initiatives for the community benefit and economic and social welfare of those who live in the area served by Hill & Valley parish magazine, the ecclesiastical parishes of Hurstbourne Priors, Longparish, St Mary Bourne and Woodcott.
- to **research and reflect** upon local social needs.
- to **support** and take executive responsibility for running agreed local projects to these ends.
- to act as an **advocate** for the area in discussions with other organisations, statutory and voluntary.
- to **set annual strategic priorities** towards these aims.

Methods of achieving our aims

- by **building good working partnerships** with organisations that help us meet our goals (setting in place such legal structures and financial agreements as are appropriate).
- by **establishing such organisation and structures** as may be appropriate to help achieve the agreed aims.
- by **affiliating to appropriate organisations** to gain expertise or advantage.
- by **holding such funds** as are necessary to forward the aims, using any profits generated solely for the benefit of people in the area.
- by **sharing information** in ways appropriate to people of the area, including establishing and maintaining a website.
- by **recruiting and resourcing** volunteers in the area for such projects as are approved, using local or regional training.

MC

June 2011

A Re- look at Neighbour care

The present problems

- 1) Mainly used for transport
- 2) Insufficient volunteers especially for long journeys
- 3) Mileage rate has not changed for years at 40p a mile therefore insufficient reimbursement for volunteers who should always have the right to claim back.
- 4) Car insurance, often extra premium for voluntary work.
- 5) Volunteers need CRB checks
- 6) Volunteers get upset if not used but often not available when needed!
- 7) Abuse of service.

The present good things to capitalise on

- 1) Financially sound at present
- 2) Offers a good service for a number of things eg shop and drop in bad weather
- 3) 8 volunteers for SMB and district all of which seem happy with the mileage rate.

Proposals for future

Investigate spreading out across the Hill and Valley Parishes

- 1) Investigate what services Longparish already has (at joint meeting on 13th July)
- 2) Fenella to investigate with HBpriors Parish Council if any financial help with start up (could be helped by SMB if necessary) or fund raising to pump prime.
- 3) co-ordinators needed in HBpriors and Longparish could then be helped by SMB, when necessary, to increase volunteers available and in advisory role.
- 4) Eve to update info for parish magazine then include in rolling signposting leaflet, so people get reminded frequently what is available.
- 5) Liaise with New village agents when they get started, as new services for neighbour care may become obvious.
- 6) Considerations for expanding role, short term gardening, dog walking.

Re convene when research completed and village agents have had time in post. Meanwhile try to increase profile.

A Brief Report on Parish Nursing

What is Parish Nursing?

Parish Nursing developed in the mid 1980s in USA, where there are over 10000 schemes in operation, the concept and was brought to the UK in the early 2000s and has been developed under the umbrella of a non-denominational charity called Parish Nursing Ministries UK (PNMUK) www.parishnursing.org.uk . Parish Nurses (PN) are registered nurses/health care professionals who focus on the promotion of holistic health provided within the context of the faith community but not exclusive to members of the faith community.

I took on the preliminary investigation of this project because I spend a substantial amount of time working in USA and know several parishes operating such schemes. In both countries Parish Nursing schemes promote a complementary concept of community health, wholeness and wellbeing firmly rooted in the Christian tradition and provided as an extension of the ministry of a faith community. The USA experience is substantially different from UK due to differences in health care systems, and particularly the primary healthcare system. In USA it is difficult to access primary health care unless you have insurance; here in UK our primary health care is provided by the NHS. What can be learned from the USA experience is that PN schemes are dependant on three major factors: 1) the commitment of the ministry and outreach team of the faith community to the concept of parish nursing as an integral part of their ministry; 2) availability of suitable volunteers within the faith community; and 3) adequate funding. For the UK in general, and for our own United Benefice, it is essential that any PN scheme must work with and be complementary to the local NHS GP Surgeries, Practice Nurses and community nursing services.

Things a Parish Nurse might do?

A PN is a Registered Nurse (or other healthcare professional) working in a voluntary capacity with a support team, from Church, Community and NHS, to offer a complementary nursing service of spiritual wellbeing, physical and pastoral care as part of the ministry of the sponsoring church.

- Visit congregational contacts and others requesting the service who have health-related problems, offering practical support, prayer and discussion to link faith and health as an integral part of the Church ministry team
- Assist the church to offer relevant help at a person's point of need.
- Give personal health advice and help someone to get the most appropriate treatment or care
- Liaise with the local GP surgeries and staff
- Encourage the congregation towards more healthy lifestyles
- Motivate volunteers and offer training and opportunities for service in the local community
- Support and work with those already engaged in pastoral care
- Talk to church-based groups about physical and spiritual health issues
- Accompany someone to a stressful medical appointment
- Make links with other voluntary groups and agencies
- Attend and assist with services for healing
- Help the ministry and leadership team to adopt healthy work practices and care for their own health
- Work within the Code of Professional Practice (e.g. Nursing and Midwifery Council).

Things a Parish Nurse should not do?

- A PN will not do dressings, injections, and invasive treatments. If these are needed they are provided by the local Practice Nurse, or District Nursing service
- will not give advice beyond the competencies for which s/he has been trained
- Will not put pressure on anyone to change their religion or join a particular church. This project is for the benefit of everyone irrespective of their faith.

Recommendations

- A PN could add a significant new level of pastoral care within the United Benefice for both the Church community and the wider community of the villages; offering a holistic and faith-centred nursing service towards spiritual and physical wellbeing which complements existing NHS Nursing services in the United Benefice.
- Any PN should be regarded as an important member of the United Benefice Ministry and Leadership Team
- If decision is to proceed we should consider using the services of Parish Nursing Ministries UK (PNMUK) to ensure that our PN project proceeds along professional guidelines and good practice
- If further information is required the next stage should be to arrange a speaker from PNMUK to talk to a meeting of the United Benefice
- Appendix A: a web page from PNMUK as a useful guide to good practice in setting up a Parish Nurse Scheme with indications of training and resourcing costs.

- Appendix B : Frequently Asked Questions about Parish Nursing

John Scott

Rev John Scott absalom2@hotmail.com johnscott@neo.rr.com

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Setting Up a Parish Nurse Scheme

www.parishnursing.org.uk

Summary

A church or group of churches can appoint a Parish Nurse who works part-time or full-time, on a paid or voluntary basis, developing a service that is complementary to NHS provision. The nurse could promote exercise, walking groups, healthy eating etc. and will also offer personal health advice, and promote the integration of spiritual care with physical care.

Brief Description of PNMUK

We exist so that people of all ages and backgrounds may find resources for whole-person health through local churches. We do this by recruiting and training registered nurses to build bridges in health ministry from their churches into the local community. We support and resource both nurses and churches as they develop this work.

Start date of Organisation

2004

No. of churches/ groups supported

50

Brief Description

A registered nurse, (who may already be in the congregation) is appointed by the church to lead a programme of health promotion and advocacy within both church and local community, coordinating volunteers to offer support to local people struggling with health-related problems. S/he may work anything from 4 voluntary or paid hours a week to full time. Training, professional support and expenses are paid by the church. S/he builds good relationships with local GP surgeries so that where appropriate, referrals may be facilitated. Accountability is to the church and the Nursing and Midwifery Council. Professional supervision is arranged.

Expected Results

A nurse working 4 hours a week records an average of 400 significant interventions in a year. Around half of these will include prayer or discussion of faith, and at least one third of the interventions are likely to be with people who do not attend church.

Advantages to church

This is an extremely effective way of building bridges in the community; increasing the church's links with health providers in the area; improving the health of local people and encouraging them to use their gifts to engage with the community in volunteering; providing additional support to existing pastoral care teams; and helping people discover spiritual resources and the gift of prayer at a point of need. The church may already have the resources in the form of nurses in its membership. They just need the training, commissioning and willingness of the church to share in this ministry.

Services provided by national organisation

PNMUK offers information-sharing meetings with churches and ministers; the initial preparation of one residential week's training for registered nurses; an international certificate and badge once they have completed a portfolio of practice; ongoing national and regional study days for the nurses, a regional coordinator to give ongoing personal advice and support to both church and nurse; resources for documentation and policies; quality standard certification for church projects; liaison with national bodies like the Department of Health and the Nursing and Midwifery Council.

Financial cost to church

- Initial training currently around £550 including accommodation.
- Study days currently around £250 per year.
- Regional coordination costs, currently £360 per year plus donation to national development of Parish Nursing.
- If the nurse is not working in the NHS, annual fees for NMC and RCN membership which give insurance cover (currently totalling around £230).
- Start up equipment; e.g. locked filing cabinet, mobile phone, BP machine.
- Parish nursing daily expenses; travel, telephone, stationery etc.
- Although the nurse may want to work volunteer hours to start with, as the project grows the church may want to increase those hours by offering some paid hours.

Non-Financial Requirements for church

- A volunteer support team of six to eight people that meets about every two months.
- At least "hot desk" office space and a room for private conversations.

- Access to a computer and printer (for downloading resources, not for keeping records)
- A line-manager.
- Access to some but not necessarily all staff meetings.

Contact Details

Revd. Helen Wordsworth, UK Coordinator
Parish Nursing Ministries UK, 3 Barnwell Close, Dunchurch, Rugby CV22 6QH
01788 817292 helen.w@parishnursing.org.uk www.parishnursing.org.uk

Frequently Asked Questions about Parish Nursing

What is a Parish Nurse?

A Parish Nurse is a registered nurse with community experience who works through a church of any denomination offering whole-person health i.e. spiritual as well as physical and mental care. They work in a voluntary or paid capacity serving the church and the local community, whilst respecting people of all faiths or no faith at all. This is done in a complementary and communicative way with all health care professionals, GP practices and ministers of religion.

How is a Parish Nurse different from a Health Visitor or other community nurse?

A Parish Nurse works through the church, offering spiritual as well as physical and mental care. She/he is a registered nurse with community experience, serving the church as well as the local community.

Why is Parish Nursing needed?

Most people with health needs spend very little time in hospital or hospices, where spiritual care happens through chaplaincy. Unless their need is known by a local minister, people may receive very little in the way of spiritual care in the community, other than that occasionally offered through community mental health teams, or cancer care nurses.

Community health services are limited and have to be directed to the most needy. So what about those who do not need home treatments or injections? Is anyone there to make the connections between all the services that are available? To explain things that are not understood? To signpost people to appropriate agencies? Is anyone there to recruit and coordinate volunteer help? To encourage self-help? To promote a healthy lifestyle for faith groups, and the communities they serve?

Professional nurses are trained to coordinate appropriate care around the health needs of an individual or community. Many entered nursing because they felt a sense of vocation arising from their faith commitment. Most church communities have at least one registered nurse in the congregation. Yet their skills may not be recognised or used within the faith community. And in the NHS, staff are not encouraged to speak of faith even when a patient or client asks.

But the NHS recognises that spiritual care is important, and it is also looking for sustainable ways to involve the third sector. The church derives its wholistic view of health from the ministry of Jesus and is looking for sustainable ways to be missional in its practical work, and pastoral in its mission initiatives.

We've got a range of ministries including pastoral and healing; what's different that a Parish Nurse offers?

A Parish Nurse comes with a wide experience of medical conditions and prevention of illness, and probably some theological training. As a staff member of the church's ministry team she/he works together with the congregation to promote the holistic message of the Gospel in the local community. As an integrator of faith and health, a parish Nurse complements and extends other ministries of the church, providing resources for pastoral carers and health advice for all.

How can we get a Parish Nurse?

Approaching registered nurses within the congregation to discuss the potential of the role. You could also gather together the people interested in health ministry and see what they could offer between them. They could contact the local GP surgery and ascertain local need, do wider research on health needs through the PCT, and locate possible sources of funding for specific projects. For example, local health staff could be invited in to Toddler groups/Senior Citizens clubs etc. to speak about health needs, healthy eating patterns could be practised through the church catering group and exercise classes and walking groups could be commenced. Likewise, they could also pray about the way forward in health ministry.

All of the above and more could be led by a Parish Nurse. They advocate for clients, offer personal health advice, and promote the integration of spiritual care with physical care. Prayer is therefore a significant feature in the care that is offered, where that is appropriate.

Many Parish nurses offer volunteer hours, but funding would need to be secured from the church or various local sources if a paid Parish Nurse position is envisaged. Either way an induction programme needs to be undertaken by the nurse. The church commits to meeting the training fee (around £600), any equipment/publicity required, out of pocket expenses, and to making an annual contribution (currently £360.00) to PNMUK for the cost of quality assurance, resources and coordination.

Can an NHS Nurse work as a Parish Nurse?

There is no restriction for nurses who work in the NHS from also want to work as a Parish Nurse. A number of our Parish Nurses also have jobs with the NHS. Some work part time and this allows them the time they need to be involved in a paid or voluntary Parish Nursing project. Even full time NHS nurses could offer their local church their services for maybe half a day a week. Parish Nursing projects are usually quite flexible where working hours and days are concerned so NHS shift working is not necessarily an obstacle.

How will it affect our GP practice if we have a Parish Nurse?

The first task of a Parish Nurse will be to develop good relationships with local health staff. This takes time, but the fact that the nurse is working to the code of professional practice will be important in that relationship. GP practices are keen to find ways of encouraging patients toward better self-care and community support, so the appointment of a parish nurse will help this. Responsibilities of a Parish Nurse include “to work at developing good, communicative, team relationships with professional colleagues in both NHS and church structures” and “to develop a service that is complementary to NHS provision and not in competition with it”. She/he is also required “not to engage in any nursing intervention or advice that is beyond that for which she/he has been adequately trained”.

What must a church do to get a Parish Nurse?

There are different possible starting points: one may be that you have a nurse in your congregation who can see potential for health input within and beyond the church; or you might have learned from your local health providers that a particular health issue needs attention; or you might have heard from your members, their families or neighbours, that there are needs not being met and additional local support is required. The church that decides to act on any of these, or some other trigger, can get advice and information from Parish Nursing Ministries UK.

How can just one day a week be worth all the setting up and management effort?

A Parish Nurse co-ordinates, mobilises, educates and supports others in serving the community. She/he is not aiming to do all the work alone, but to help maximise the ministry of the whole church. With just one day a week, a Parish Nurse makes an average of 400 contacts per year.

How and where does a Parish Nurse fit into a church?

A Parish Nurse is an accountable member of her/his church ministry team and accountable to its leader; and is accountable to her/his spiritual and professional advisers in both personal/professional development and the growth of the ministry. A parish nurse acts as

- Health Educator for congregation and community
- Personal Health Adviser in the team
- Referral Agent
- Trainer and Co-ordinator of Volunteers
- Developer of Support Groups
- Health Advocate
- Integrator of Faith and Health

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John Scott

Rev John Scott absalom2@hotmail.com johnscott@neo.rr.com

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At a previous meeting Christina Moran of *Age Concern* suggested we try holding our social events at a pub.

Advantages:

- No rent to pay
- Heated
- No chairs to put out etc
- Landlord might cook cakes/serve beverages
- No washing up
- Pub will get more business
- Clients may well have happy memories of previous visits

I visited the White Lion at Wherwell's tea party, set up as one of several in the Test Valley by Christina. She says that each village has ended up with a completely different event depending on the pub used and the clients wishes. Wherwell has between 8 and 15 clients each time many from the recycled teenagers of Longparish. Some villages like a speaker, others someone holding an advice clinic in a corner and others much prefer to just talk. Sue at The Coronation, is very happy to host one in St. Marybourne. She has a very pleasant and suitable back room, is happy to cook the cakes as long as they are freezable, is very flexible and reasonable on the subject of charging. Average charge for Christina's events is £2.

Timing

In Stoke/SMB coffee mornings seem to be winning over tea parties. The Coronation has a very busy car park around 3pm because the village school parents use it. There are already several afternoon events ... walks for health every Wednesday, St. Peters Women's Fellowship, the Lunch, Scramblers,

H. Priors has a ladies coffee morning 2nd Wednesday monthly, Longparish has one monthly variable days. The recycled teenagers say they would like to come to our event.

Sue suggests either Tuesdays, Wednesdays or Thursdays 10.30am

Information sessions

The village representatives would like to use these events at times to distribute information
Talks on health issues are already included in last walk of each month.

Questions

Who are we aiming at? We originally wanted to attract all ages including lonely new mums and the out of work.
If we advertise talks how will we avoid targeting one group? Are sit in advisers better?
Are there any other events which could clash in any of our villages?
Price. We do not want to exclude anyone but pub is not a charity. The Lunch is only £2.50
Is there anyone who would like to be involved in these?

Caroline Hoyes 07/11

Research and Meetings

John Scott (of Forton!) has confirmed that the *Longparish Link* group may be able to identify some supply of temporary work opportunities. The Link last met before Christmas but could be reactivated if there is sufficient demand from the community project.

Johnnie Lavers has confirmed that he is happy to participate in a project to coach individuals into a working mind-set. There are other qualified “life coaches” etc. in the area who may also be willing to help.

Maria Wright at the Andover JobCentre (01264 826007) advised that 2 separate types of Job Club have emerged over time. On the one hand, executives tend to secure their own opportunities through networking, or join clubs where like-minded individuals meet. Executive work clubs already exist in Basingstoke and Newbury, and someone is researching a start-up in Andover (possibly to be based at Andover College). I have not yet contacted him: details are: nick.tynan@yahoo.com.

Maria also supplied information on how to set up a more basic job club (now called Work Clubs):



work-club-guide.pdf

Although she was unable to provide a precise profile of unemployment in the area, the following link to the “Nomis” website gives a basic age/gender profile of unemployed people registered with the local JobCentre by Ward / Postcode (e.g. it shows the stats for Harewood):

www.nomisweb.co.uk

Local experience in starting and running job clubs

As an interesting case study, job clubs were started in Andover and Romsey on the same day in 2009. Both retained paid staff and decided to open once per week. It is worth noting that the Andover club appears to have stalled due to funding problems. There is no dedicated website and I got no reply when attempting to contact them. Google indicates that news flow has been scarce.

Meanwhile, Romsey Job Club has flourished, with a comprehensive web site (e.g. news flow from Sarah Nokes’ visit), good premises and IT infrastructure (3 laptops). I visited them to see what a successful effort might look like...

Stuart Bannerman is the (paid) person running Romsey Job Club and also manages their informative website:

<http://romseyjobclub.wikispaces.com/>

Stuart normally expects around 4 people to turn up at the weekly session, only a couple of whom may be “regulars”. The fact that a central location, with good infrastructure and paid staff, averages a fairly low attendance, gives an indication of the small scale typical in this kind of community engagement.

Of approximately 80 people registered with Romsey over the past 2 years, about 10 have found jobs through the Club. Reasons for registering with the club vary, but most come from JobCentre or CAB referrals (Romsey puts some effort into maintaining these relationships) or from flyers placed in shops and pubs etc.

Jan Lefley is the Community Education Manager at Romsey. I spoke with her about the origins of the Job Club. Her email is jan.lefley@hants.gov.uk, phone number 01794 522106.

Setting up a club

Maria at Andover JobCentre gave the following advice:

- As transport (availability and cost) is a major issue for the job seeker, it may be most effective to run a mobile service to local village halls or equivalent.

- The one piece of infrastructure needed is IT, as most jobs are advertised through the web and IT skills are essential for preparing CVs etc. This could be done with a laptop with “dongle” for web connectivity; but procurement and running costs are not trivial.
- Relationships with CAB, JobCentre etc. normally generate referrals to job clubs but word of mouth is the most powerful motivator, which means time and some patience.

Maria also supplied information regarding funding but agreed that it may be best to test the demand, before having to look into Health and Safety Risk Assessments, CRB checks etc. that may be required to secure the funding (I have not looked into this in detail).

Other connections/contacts in employment/skills development

Kath, at Andover Adult and Family Learning, Longmeadow Centre

Tel: 01264 359062

enquiries@andoverafcentre.co.uk

Conclusion

A “Hill and Valley Work Club” might expect to:

- Run a club for people whose work experience was below Executive level (as the Executive job market is specialist and largely provided for)
- Meet once per week, in one of the village locations (in rotation, to overcome transport constraints)
- Beware the potential demands of CRB checks, data protection act, Health and Safety Risk Assessments etc.!
- Use a couple of computers with internet access, to allow job seekers to create CVs and search for opportunities
- Be supported by skilled coaches/employment experts (ideally working for free, at least while demand is established)
- Rely on basic publicity materials, such as flyers paced in the village shops
- Generate temporary work opportunities through entities such as Longparish Link; also publicise jobs traced informally, e.g. temporary shop work
- Get a fairly low level of attendance until reputation/word spreads

Recommendation

The project should establish whether anyone in the wider Community Project has the availability (and energy) to:

- Identify suitable locations in each village
- Provide at least one laptop with internet access
- Secure support of someone with coaching skills
- Create some basic publicity flyers
- Run, say, 2 meetings in each village (one per week)
 - If demand grows, investigate potential funding for “proper” infrastructure
 - If demand is poor, fold the idea

Andrew Parkins 07/2011

Fuel Syndicates – Paper by Mark Williams

Demand

I estimate that 85% of the houses in St Mary Bourne, 20% of the houses in Hurstbourne Priors and “nearly all” of the houses in Longparish use oil for their heating. There was a syndicate in Longparish and another in Forton, but both were too small to be viable. Longparish cricket club operate a scheme with Wessex Petroleum (their sponsor) where ½ p per litre is given to the club on sales to club syndicate members, but the price is not noticeably different from the standard price. I have spoken to other syndicate organisers in Vernham Dean, Dorset, and East Hampshire.

Other syndicates motivation and experience

There have been variety of reasons for establishing oil buying syndicates. The most common is to save on the price of fuel. Most small syndicates that have been started on this basis have eventually stopped because their critical mass was too small to make significant savings. The consensus seems to be that the syndicate needs a few hundred members before the savings become substantial. I estimate that there are over 1,000 potential customers in the area between Stoke and Longparish, which implies that there is potential to make cost savings. Smaller syndicates have found that they are not competitive against the BoilerJuice website which quotes opportunistic pricing based on shared deliveries to the area.

The second most popular reason is to give assurance over price. Many oil buyers (particularly elderly people) like to have the assurance of buying with others who they feel may have a better grasp of a fair price. This does put a duty of care on the syndicate organisers to ensure that they are getting a good price from the suppliers.

The third reason is to cut down the number of delivery vehicles. This was the motivation behind the scheme in Vernham Dean, but also means that the scheme is quite labour intensive for the syndicate organisers.

One of the most striking similarity is that all of the syndicates seemed to have a preferred supplier but none seemed to understand why they were getting the best deal from that particular supplier, nor were many of them very confident that it was the best price. It was noteworthy that no supplier was the preferred supplier to more than one of the syndicates contacted.

All of the schemes that I have seen rely on the individual customers to settle their own accounts, but in some of the smaller schemes and the Vernham Dean scheme, the orders were placed by the syndicate manager, while in other larger schemes the individual customers would place their own orders quoting a syndicate name and a member number. In the smaller schemes and the Vernham Dean scheme, the organiser would accept orders from members and place those orders when there was sufficient volume to require a tanker load. This might also involve the organiser shopping around for the best price.

In the larger schemes the organiser can only tell how much oil has been purchased through the syndicate (and at what price) if the oil company is prepared to provide a statement to that effect.

Recommendations

I suggest that we aim to start a very large (>500 member) syndicate that should run with a minimum amount of administration, covering the area from Stoke to Longparish, but open to other members if that is acceptable to oil suppliers. Members outside the H&V area would find it harder to get information on the activities of the syndicate.

In order to keep the oil suppliers honest the syndicate should take quotations from several companies and publish those quotations, which would be effective for a given period, typically 7 days, with delivery within a specified period thereafter (perhaps 5 days). Price quotations would be published by email, on village websites and posted on noticeboards. (Prices printed in H&V would be out of date at the date of distribution). We could consider other methods but they are likely to entail a cost (SMS, telephone voice recordings).

Members would place an order by calling the company, quoting the syndicate name and member number. Each participating company would be supplied with the names and addresses of syndicate members and member numbers. In order to avoid confusion, the list of members would have to be maintained by the syndicate organisers and distributed to oil companies (and not managed by the oil companies).

The oil companies would be required periodically to produce schedules of deliveries made to syndicate members listing aggregate volumes at each price, so that the syndicate can publish the results and the savings against regular quoted prices. The savings would be published regularly in H&V (to reassure existing members and to encourage new members). H&V's "resident oil buying expert" could publish articles with graphs explaining why heating oil prices look likely to rise or fall..

The administration should be a shared task between several volunteers to ensure that there is coverage during holiday periods for weekly price distribution.

Most of the tasks would entail email and I would suggest the creation of a suitable email address and/or domain to accomplish this. If an email is distributed to several hundred addresses, it could carry a limited amount of sponsorship/advertising from a local heating engineer in order to cover any annual domain registration/ email handling costs (c. £25 p.a.)

4th May 2011