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# ZIONITY HEALTH & RESOURCE CENRE

ANNUAL REPORT 1996-97

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#### INTRODUCTION

This is the final annual report of the charity Zion Community Health and Resource Centre and is therefore a milestone in the development of our organisation. Over the past six years we have achieved much more than we could have anticipated. Some of this is recorded in this final report. But it isn't just what we've done, more importantly its how we've done it and who we've done it with.

We want to use this as an opportunity to thank everyone who has been involved in the journey of the last six years. And also to inspire you to continue to work with us in the future, which we hope will be just as exciting and productive as the previous period.

#### OUR VISION FOR THE FUTURE

We have always resisted the production of a definitive vision - perhaps it was thought to be too rigid and constraining. Over the past year we have had many an occasion to go back and revisit this idea, even questioning if we have a shared vision and ethos - and if we do what is it?

Some of the common threads are:

- To provide quality services which are accessible to everyone, but particularly meeting the needs of people who find accessing mainstream services difficult.
- To recognise difference and disadvantage and by so doing deliver services which will contribute to equality in health.
- To risk developing new services which are not usually accessible to our clients.
- To develop services based on the needs of users, not on the needs of the organisation, and to be prepared to continually adapt and change.
- To be innovative and work in co-operation with other agencies and the community in order to bring about change and improvements.
- To recognise everyone's contribution, and to support self development by staff, volunteers and users.
- To empower people to control their own health.
- To provide a model for other areas to utilise.
- To be cost effective.

We hope that this debate will continue, and keep us on our toes. As we grow larger as an organisation one of the main concerns has been about preserving our ethos and keeping us on track. Only by constantly reviewing and monitoring our progress can we ensure this happens.

Membership of our company



is open to people who share our aims, and ethos.



THE
ABASINDI DRUMMERS & DANCERS
PERFORMING AT THE OPENING OF THE
KATH LOCKE CENTRE,
DECEMBER 1996.



# COMMUNITY & VOLUNTARY SECTOR DEVELOPMENT

In 1991 the ZCHRC was an office base for four voluntary sector projects. These groups worked together to develop a vision of a community centre about health. This Centre was to be very accessible, and was to empower the local community to develop health services to meet their needs. Six years on we have substantially achieved this vision by:

- having two Centres which are open and welcoming, and well used by local communities (Zion CHRC and Kath Locke CHRC).
- •providing space for 19 projects, (6 of which are statutory services, 11 are voluntary and two are self- help groups, which were developed by the local community).
- providing workbases for over 90 staff.
- providing four services directly (Counselling, Zion Art Paintbox, Massage, Women's health).
- employing 18 staff, 12 sessional staff, 12 trainee placements, and 20 volunteers.

#### SUPPORT

- We employ the core staff for the Centres providing reception and cleaning services to all the services.
- We publicise the services available and produce reports, videos and leaflets to encourage uptake.
- Each Centre has a resource room which provides computers, fax, photocopying and telephones to community groups, self help groups and volunteers working to improve health in the area.
- The core staff provide development and funding support to self help and community groups.
- The Centres provide a range of training, counselling, meeting and clinical rooms which can be booked on a sessional basis.

We have supported the development of self help, community and voluntary sector in the following ways:

• The ZCHRC has taken on management of voluntary sector projects which have had funding difficulties, as shown by the support given to the Parent and Infant Project. Mainstream funding was time expired and the Pip Management Committee decided to wind up the service. ZCHRC secured some new funding for the project and took on the employment of the service Co-ordinator for one year. During this time the Centre provided management support to develop a new Management Committee and manage the work of the project, as well as administrative support. Pip is now an independent project.

• ZCHRC has provided staff time to secure funding for projects who have been in funding difficulties and have helped restructure organisations in accordance with needs. This has included hands on involvement in management committees, as well as training and development support.

• We have supported the development of self help groups, through the free use of the resources of the Centres. co-ordination

between groups, payment of volunteers expenses and supervision fees for group facilitators, payment and provision of training courses, and support with funding applications.

• ZCHRC has developed community initiatives, such as the Aisha Childcaring Group in response to the needs of people using and volunteering in the Centre. We have given developmental support, as well as securing funding and training schemes. We have recruited and manage staff to support this service.

• We have acted as a channel of communication for staff and community groups into planning bodies, such as Health for All, Community Health Council, Joint Consultative Council, as well as local forums.

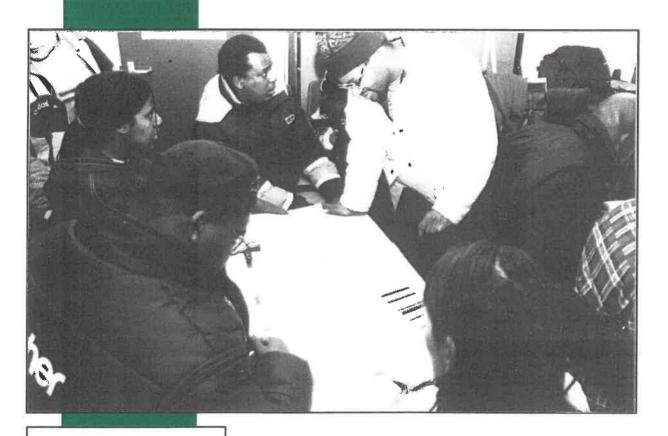


PAINTING THE SIGN FOR THE ZION BUILDING, 1991.



#### INTER-AGENCY INITIATIVES

ZCHRC is firmly committed to encouraging joint working between services in order to improve the quality, range, accessibility and appropriateness of services provided. We believe that joint working can lead to a more holistic approach to tackling health problems, and ensures that good practice is shared across all agencies.



PLANNING MEETING FOR THE KATH LOCKE CENTRE, 1996.

#### PROJECTS BASED IN OUR CENTRE WORK CLOSELY TOGETHER

Over the last six years agencies have been encouraged to develop services jointly, and new services wanting to work in the Centres have had to demonstrate how they will be contributing to the services already in place. This has led to excellent models of care being developed, an example of which is Drug Advice and Support in Hulme(DASH) and Manchester Drug Services (MDS). DASH is a voluntary agency offering drop-ins, needle exchange, welfare rights, housing advice, education and training. Over the last year they have pioneered new work on acupuncture and massage therapy as part of drug reduction programmes. They work closely with MDS which is a statutory agency offering methodone maintenance programmes, and access to in patient facilities. The two services regularly meet together to discuss their work, identify problems and plan improvements.



#### NEW SERVICES HAVE BEEN DEVELOPED

The statutory and voluntary mental health groups meet together on a monthly basis to focus on areas of joint work and to exchange information. This has led to the production of joint publicity, planning of seminars and training. It has also led to the development of a Counselling service which was a gap identified by the group. The Counselling service is based on clear principles of giving choice and control to the user and employs a cross section of counsellors from different races, genders and sexualities. Three years ago it consisted of just two volunteer Counsellors. It now employs eight, has four trainees and two volunteers. It is contracted by the Health Authority to provide a service to all Manchester residents.

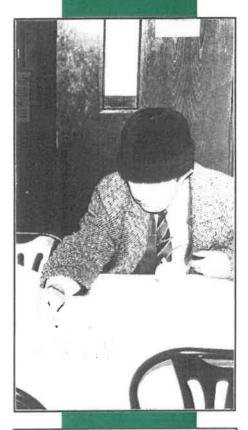
#### SUPPORTING OTHER AGENCIES DELIVERING SERVICES

ZCHRC co-ordinated an inter-agency steering group for three years and managed three social work placements focussing on the needs of pregnant drug users. The steering group brought together midwives, health visitors, probation officers, social workers, voluntary agencies and drugs workers. As a result of this work a specialist midwife was appointed in 1995, to work with this client group, develop a protocol of care for the local maternity hospital, and share knowledge, support other staff in the delivery of services. This post is jointly funded by Central Manchester Healthcare Trust and Manchester Drugs Service. The success of this initiative can be seen in the increase in the number of drug using women now identified in the maternity service (it has more than doubled). This initiative is now being followed by a new steering group which is developing a maternity service based on changing childbirth principles, which is being piloted in the Kath Locke Centre.

#### DEVELOPING CENTRE BASED SERVICES

We have worked closely with a range of agencies to develop services in our centres. The women's health service is a prime example. It was set up and is co-ordinated by a steering group of staff, users and volunteers, and provides a range of services including: therapeutic massage, counselling, art drop in, information, advice, needle exchange, creche and cafe. These services are provided by a range of agencies, and have included the provision of family planning and nursing staff from the Mancunion Trust.

The Accident Prevention Home Loan Scheme and Toy Library are other new services which were developed partly by projects based in the Centre and the Local Authority.



PETER DUNGEY
LONGTIME VOLUNTEER
AND MCM
NOW LOCAL COUNCILLOR



DI CHISAM
AS DIRCTOR OF PUBLIC HEALTH
&
IAN MELLOW BARON
ON INFO. STAND



#### CITY CHALLENGE

Manchester City Council's successfully bid to Central Government for City Challenge funding for the regeneration of the Hulme area. It spearheaded a five year programme of demolition and redevelopment from 1992, which drew on a range of funding sources. Central to the initiative was a strong commitment to tackling all aspects of regeneration, not just the physical ones. Social issues, health, education, employment and environmental improvements were all included as central to the success of the programme. The ZCHRC has worked closely with the City Challenge Initiative to achieve remarkable improvements in health facilities in the area.

#### HULME HEALTH FORUM

The Hulme Health Forum was established as part of the City Challenge structures. Chaired by the Director of Public Health, the Forum for the first time brought together health professionals, community groups, voluntary sector and social services, with a remit of improving health in the area. The Zion Community Health and Resource Centre played a central role in the work of the Forum. We won a contract to act as a local contact and access point for the Forum, and were responsible for administering its meetings, producing newsletters and managing the small grants funding programme.

- ZCHRC provided one of the two voluntary sector representatives on the Core Group of the Forum, which was responsible for steering the work, setting the Forum agendas, and dealing with issues between Forum meetings.
- We jointly managed the Hulme Rapid Appraisal research exercise and provided a base and contact point for the research team.
- We have taken part in an evaluation of the work of the Forum, the production of a report and exhibition, and are helping to plan the development of a wider Moss Side and Hulme Forum which will come into operation in April 1997.

#### FUNDING

ZCHRC has attracted City Challenge funding to help develop our own organisation and the services we provide.

- We have used the small grants initiative to pilot new schemes (such as the massage clinics and the cafe)
- we have utilised five year funding to develop the core of the organisation (additional reception and cleaning staff)
- we have used capital funding to refurbish our centre to make it more accessible to our users, volunteers and staff.

#### HULME SUPPORTED HOUSING FORUM

The Hulme Supported Housing Forum was set up as a result of a conference organised on the initiative of ZCHRC. This brought together Housing Associations, the Housing Corporation, the Local Authority and local voluntary and community groups, to ensure the housing redevelopment made provision for people with special needs. ZCHRC initially administered the groups meetings and played a central role in its operation throughout its three year life.

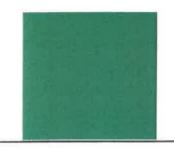
- ZCHC jointly managed the research exercise carried out by Sheffield Hallum University, which determined need for supported housing in the area. The Hulme Supported Housing strategy was the first of its kind produced in this country and has led to the development of a strategy for the whole of Manchester.
- We supported the development of local projects and their involvement in the Forum.

Hulme now has 80 supported housing units out of 1,000 new homes built, in addition to adapted housing for elderly people. These provide support for people with HIV, mental health needs and young people.

#### MAKING LINKS

One of the long lasting successes of the City Challenge initiative is that it developed links between statutory, voluntary and community groups which will be sustainable past the expiry of City Challenge itself. These links can be seen formally through channels such as the Health Forum, but are also informal.

- ZCHRC has developed services jointly with three local NHS Trusts, (Mancunion, Central Manchester and Salford).
- We have raised our profile with the Health Authority which enabled us to become the first voluntary sector managing agent for a primary care resource centre. We are also now designing a new building for the Zion CHRC to relocate to which will provide more facilities for existing and future services.
- We have drawn in funding and support from the business community, such as Kelloggs UK Ltd.



#### THE FUTURE

City Challenge ceases in May 1997, but we will work to ensure that the relationships we have developed over the last five years remain.

- ZCHRC will continue to work with all the agencies in the area to take forward the initiatives that have begun and new initiatives which will develop in the future.
- We will continue to make use of regeneration initiatives which will exist after City Challenge, such as Capital Challenge, Urban and Single Regeneration Budget.
- We will work to ensure that the lessons of Hulme - tackling regeneration in a holistic, multi-agency, community based way, are publicised.



#### PCRC

In 1995 ZCHRC decided to bid to the Manchester Health Authority to manage the new Primary Care Resource Centre which was then under construction. We presented our vision of accessible, appropriate and innovative community based centres and were awarded the contract in January 1996. ZCHRC became the first voluntary sector agency to be awarded a major contract to manage a Primary Care Resource Centre - a role which has always traditionally been retained by NHS Trusts.

We named the Centre 'Kath Locke' after a local activist who campaigned for improved services in the Moss Side and Hulme area until her death from cancer in 1992. The Kath Locke Centre opened in December 1996 and extends the range and accessibility of services available locally. It includes a new NHS dentist, an Asian women's project, advice service, community mental health team, an African Caribbean Mental Health Project, a range of community health services (chiropody, child health, family planning, dietitian, orthoptics, physiotherapy), and a learning disability project. The Centre is being used on a sessional basis by a whole range of groups including Irish Community Care and Henshaws - who provide a drop in session for people with sight impairments. In 1997 we will be providing an extended range of training opportunities, cafe and creche facility.

We have worked to ensure that the centre is warm and welcoming to local people, and offers resources to local community and voluntary groups to develop health initiatives. It will be the base of the new Moss Side and Hulme Health Forum, which will co-ordinate an plan future developments in health care. It also provides a base for the Health Authorities Locality manager - giving easier access to health planning more local.

The Kath Locke Centre is already pioneering new inter-agency approaches to delivery of services. It is continuing to develop services with input form local people by providing a range of opportunities - whether this be in volunteering, training, taking part in steering groups, setting up self help groups, or being involved in managing the centre itself.

The Kath Locke Centre is a key tool in achieving our vision-

for the provision of a range of innovative, accessible, appropriate and empowering services in our community.







#### TRAINING

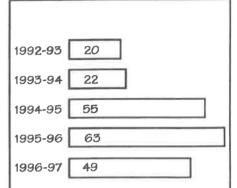
Training and learning are key to the work of our centres. ZCHRC is firmly committed to development of our staff, volunteers and local community, and believe that this is central to the promotion of health and well being. We have worked closely with City College Manchester, Hulme Regeneration and Manchester TEC to plan and deliver a range of training opportunities.

Over the last six years we have provided a wide range of training courses including:

Childcare NVQ Level 2
First Aid at Work
Certificate in Counselling
Supervision Skills
Assertiveness
Confidence building
Parenting Skills

Childcare NVQ Level 3 Introduction to Counselling Afrikan History Training the Trainer Safety and Security Aromatherapy and Massage

- Some of these courses have arisen from suggestions by users and volunteers in the Centre who have expressed an interest in them.
- The Childcare qualifications arose out of the development work with the local parents involved in the Creche, who recognised a need for a local, flexible, and accessible place to train, which would provide childcare. Between 1994 and summer 1997 we will have 13 trainees achieving NVQ Level II and 7 achieving NVQ Level III.
- The Counselling Qualifications arose from a recognition from the counselling service that ethnic communities were under represented in the Counselling profession.
- By providing quality training in a centre which was already well used by a range of ethnic communities, we attracted a wider range of trainees. The Course is delivered by City College and is accredited by the Centre. In the two years 1995 to 1997 we trained 31 people to Certificate level. 60% of whom were from ethnic minority communities.
- We have contributed to funding costs for volunteers which has enabled one to undertake a Therapeutic Massage qualification, two to undertake Counselling Diplomas and two to attain counselling supervision qualifications.
- Staff and volunteers have also accessed a range of short courses, including desk top publishing, supervision skills, funding, recruiting and using volunteers, writing and development plans.
- \* Two members of staff are undertaking day release to attain professional qualifications.
- Over the last six years we have had over 12 students on placement for a variety of lengths of time and working on a range of projects.



Numbers of people undertaking training courses at ZCHRC and Kath Locke Centre.

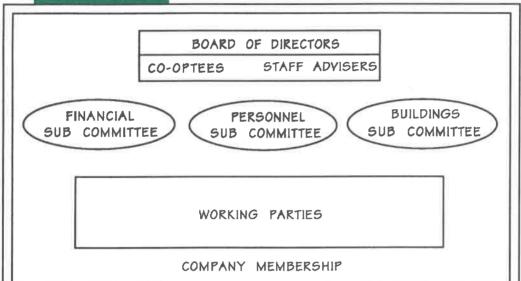
**NB** this does not include external training courses.





In 1991 ZCHRc employed just three staff. We now employ 18 staff and 12 sessional staff. We manage and develop two Centres in the Hulme and Moss Side area of Manchester. Our budget has shown an increase rising from just £17,000 p.a. in 1990-91, to nearly £400,000p.a. in 1996-7. The growth in what we do has been reflected in our organisational structure and policies.

We are now in a period of consolidation. For the forthcoming year we will be allocating time and resources to look inwardly at how manage, develop and change. We believe this process to be central to our success.



# MANAGEMENT COMMITTEE

The Management Committee met in October 1996 to plan changes in management structures. With the awarding of the contract for Kath Locke Centre the committee decided to incorporate as a company limited by guarantee - a process which will be complete

by 1st April 1997. The company (Community Health & Resource Centres Ltd) will replace the existing ZCHRC charity, and will be responsible for the two centres, Zion and Kath Locke.

The challenge for the Management Committee is to develop a structure which encourages maximum participation from services, users and volunteers, ensures decision making is retained at the most appropriate level, and that responsibility and authority are clearly defined. In addition, members want to ensure that the growth of the organisation does not dilute the ethos and principles upon which we work.

The structure outlined above, aims to meet these demands, by utilising existing methods of working which have been developed over the past six years, as vehicles for continued involvement of the company membership. We will be working to ensure that members are actively involved in the working groups and sub committees, and good communication methods are adopted. This will be a central feature of the staff workprogramme for the forthcoming months, and will focus around a skills audit of the membership, setting up initial meetings of new working parties and sub committees, developing and evaluating information systems.



The smaller board membership recognises the time constraints of involvement for a wide membership. The new structure targets involvement at an individual level so that the majority of members will be able to participate in areas which directly relate to their experience and interest. Only six members will have to regularly maintain an overview of the whole organisation.

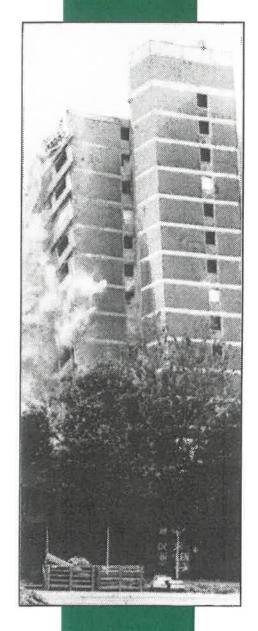
The membership will review the this new structure six months after its operation. We have ensured flexibility in the Memorandum and Articles of Association which will enable us to refine the structure in line with our experience.

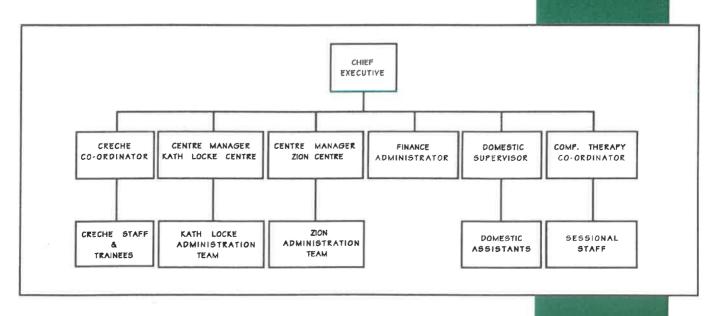
#### **POLICIES**

All of our policies remain working documents, so that they may be altered and developed in light of changing circumstances and experience. We presently have policies on: Health and Safety, Recruitment and Selection, Safety and Security, Equal Opportunities, Service Principles, Smoking, Volunteering, Self Help, and Finances. We are presently producing a policy on Personnel. We will be revising staff contracts, job descriptions, appraisals and monitoring procedures.

#### STAFFING

ZCHRC believes in investing in its staff and continuing to develop them as a resource. Each year our staff have increased and in 1996 we adopted a new staffing. We have also adopted a staff plan for future development which we anticipate will meet the growing needs of the organisation.





#### MONITORING

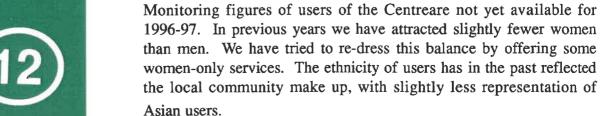
#### FUNDING

YEAR	INCOME	EXP
1990-91	17,771	17,673
1991 -92	46,632	42,274
1992-93	67,863	67,092
1993-94	153,290	145,036
1994-95	118,293	118,603
1995-96	255,563	237,232
1996-97	397,925*	280,925*

\* BUDGETTED

#### THE NUMBER OF PEOPLE USING THE CENTRE

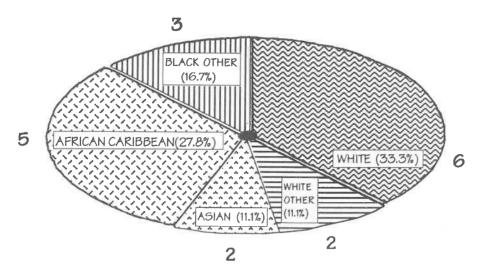
YEAR	NUMBER
1992-93	10,060
1993-94	12,110
1994-95	14,500
1995-96	14,750
1996-97	15,461*
	*PROJECTED FROM 11 MONTHS FIGURES





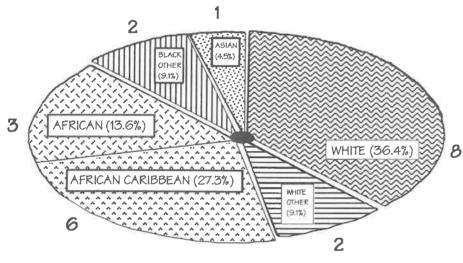
JENNY FLYNN FOUNDER MEMBER OF THE ZION CENTRE.

#### STAFF EMPLOYED BY ETHNICITY



3 staff have disabilities. As one staff member is male, we will be encouraging male applicants for future posts.

#### MANAGEMENT COMMITTEE MEMBERSHIP

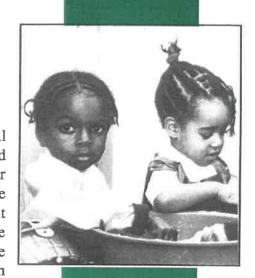


Levels of membership has stayed fairly constant since 1992 Turnover of membership has been approximately 30% p.a. Current make up of the committee is predominantly female with

#### 16 Females & 6 Males

#### COMPLAINTS

As the organisation has grown, so have the number of formal complaints we have received. We will continue to encourage and monitor complaints as a way of evaluating and improving our performance. In 1996-97 we had received 6 complaints from service users, one formal grievance from a member of staff and one complaint from a management committee member. Our response rate to service user complaints was within timescales set by policy. However, we have identified a need to respond quicker to internal complaints from staff and management committee members.



## AGENCIES/SERVICES BASED IN OUR CENTRES



**Drug Advice & Support in Hulme Manchester Drugs Service Anxiety Self-Help Group Depression Self-Help Group** Aisha Childcaring Group Black Hiv & Aids Forum Harp Cafe **Hulme Action Resource Project** African Caribbean Mental Health Project **Continuing Support Services Creative Support** Parents & Infant Project **Zion Art Paintbox** Counselling Therapeutic Massage Women's Health Group



Advice & Community Resource Centre
African Caribbean Mental Health Project
Adrian Jennings - Dentist
Asian Women's Outreach Project
Creative Support
Community Psychiatric Nurses (CMHT)
Social Services Mental Health Team (MCC)
District Nurses (MT)
Health Visitors (MT)
Therapeutic Massage
Counselling

#### WITH THANKS TO















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PUBLISHED BY

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