

GRANT APPLICATION 2017/18 – ASSESSMENT AND RECOMMENDATION

Priority Corporate Outcomes	To make Barnet a place of opportunity and build community wellbeing where people can further their quality of life To develop more resilient communities where people do more to help themselves and reduce their reliance on statutory services To reduce health inequalities	
Organisation	CHANA CHARITABLE TRUST	ref 82/C/CTY
Address	23 Ravenshurst Avenue, NW4	
Relevant policy, aims and objectives		
<p>The Corporate Plan, 2015-20, signifies the council's commitment to helping build a sense of community and to working with partners to make Barnet a place of opportunity where people can further their quality of life and ensuring equal access to quality services which provide value to the taxpayer. The transformation of adult health and social care set out in the Care Act 2014 places growing emphasis on prevention rather than cure; delivering targeted information and advice; and ensuring people have the right support at the right time. The Commissioning Plan for Adults & Communities, 2015-20, focuses on the development of preventative services; the removal of inequalities; and the wider well-being agenda.</p>		
Activities / proposal		
<p>Chana Charitable Trust (CCT) is a registered charity formed in 1995 to provide support and up-to-date medical information to individuals and couples in the Jewish community experiencing difficulties with fertility. It seeks to raise awareness within the community and reduce the stigma associated with reproductive health issues. A confidential helpline offers clients medical and emotional support in relation to reproductive health issues; specialist support workers offer confidential counselling; and financial support is provided to eligible couples to undergo treatment. The charity also delivers public lectures on reproductive health and training sessions for medical professionals, supported by a voluntary panel of specialists in the fields of infertility, gynaecology and ultrasound scanning with an appreciation of the needs and requirements of the orthodox Jewish community.</p> <p>183 new individuals or couples were referred, by general practitioners, medical specialists, private clinics and other fertility charities, to CCT for counselling in the twelve months to July 2017. 43 babies were born to clients over this period, mostly without the need for invasive treatment. 95% of service users are Barnet residents. The production of a series of live webinars on fertility and reproductive health issues and other web-based projects embrace a geographically diverse audience.</p> <p>This application relates to a proposal to establish a fortnightly support group for women struggling with primary or secondary infertility, to be facilitated by two qualified counsellors. The objective is to provide an opportunity for women to express themselves; gain support from each other to alleviate feelings of isolation; and improve their overall health. Research referenced by CCT demonstrates a strong link between psychological health and fertility. Analytical evidence published by the National Infertility Association in the USA shows how support groups not only alleviate depression and anxiety but also result in higher rates of pregnancy.</p> <p>Public Health, Harrow & Barnet (PH), and NHS/Barnet Clinical Commissioning Group (BCCG) state that the provision of fertility services is the responsibility of the NHS. Group counselling or support services are not identified as a priority, however, in any of its local strategic plans.</p>		

Although BCCG commissions services for people with psychological problems through local mental health commissioning contracts, neither the Corporate Plan nor the Joint Health and Wellbeing Strategy identify fertility-related services amongst the priorities for improving the health and wellbeing of residents. It is considered inappropriate strategically to fund the proposal in question independently of BCCG, for which reason it is not supported.

By way of a rejoinder, CCT comments that NHS has severely limited funding for infertility and that its policy does not address the need that many individuals and couples have for psychological support, even in the case of those that become eligible for assisted conception after tests and investigations in primary and secondary care in line with National Institute for Health & Care Excellence guidelines, who may require psychological help before they reach that option. It acknowledges that it would be better to improve provision within the NHS. As change is invariably slow to effect, however, its proposal is an expedient to address the deficiency now.

It remains the view of PH and BCCG that this is a matter for the NHS to consider, not the council, in the context of its policy of evaluating treatments that are not routinely available because their clinical or cost effectiveness is unproven.

Cost and financial need

In 2015/16, the latest year for which accounts have been submitted, CCT incurred expenditure of £813,870, of which £586,415 was on service delivery. Fundraising costs amounted to £227,455. The charity relies heavily on the support of the Jewish community, the proceeds of fundraising events, donations and legacies making up 95% of its income. Charges are applied mainly for training and lectures. Net current assets at 31/3/2016 were £56,767, unrestricted funds that equated to 6% of estimated expenditure in 2017/18.

A start-up grant of £6,535 is requested to set up and run the support group over the first twelve months, of which £4,980 is to pay and supervise the two counsellors. Interviews, publicity and room rental make up the balance. There will be no charge to participants. CCT states that the group will be sustained through savings achieved by a reduction in demand amongst participants for counselling.

Grant recommendation, type and conditions

NIL

Date: February 2018