VCFSE Sector Funding Report

Morecambe Bay Primary Care Collaborative Opportunity

Lancaster District CVS
October 2026

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Introduction

This report summarises activities and outcomes in relation to an investment of £15,000 by Morecambe Bay Primary Care Collaborative (MBPCC) into the Voluntary, Community, Faith and Social Enterprise (VCFSE) sector in north Lancashire and south Cumbria.

The report sets out the purpose of the investment and the process by which funding was allocated to community organisations. It summarises the activities proposed by each funded organisation, and their outcomes.

The report concludes with recommendations for future development of similar programmes across the region.

Executive Summary

The Morecambe Bay Primary Care Collaborative Fund was established to support voluntary, community, faith and social enterprise (VCFSE) organisations to deliver activities that complemented general practice and contributed to the NHS ambitions of shifting care from sickness to prevention, from hospital to community, and from analogue to digital. The programme offered grants of up to £2,000 to organisations across North Lancashire and South Cumbria for activities delivered between April and August 2026.

Following an open application process, nine projects were awarded funding, representing a diverse portfolio of community-based health and wellbeing interventions. Funded activities included bereavement support, menopause support, physical activity programmes, falls prevention, chronic pain management, peer support for people living with long-term conditions, healthy lifestyle education and initiatives addressing loneliness and social isolation. Collectively, the projects sought to improve wellbeing, strengthen resilience and provide accessible community-based alternatives and complements to primary care.

The programme demonstrated the significant impact that relatively small grants can achieve when targeted towards established community organisations with strong local relationships and a clear understanding of need. Across the funded portfolio, projects supported individuals experiencing a wide range of health and wellbeing challenges, creating opportunities for earlier intervention, peer support and improved self-management. The strongest alignment was with the NHS shifts from sickness to prevention and from hospital to community, reflecting the ability of the VCFSE sector to engage people before needs escalate and to provide support outside traditional clinical settings.

At the time of reporting, evaluation returns had been received from seven organisations. Findings indicate that funded projects delivered positive outcomes including reduced social isolation, improved confidence and wellbeing, increased knowledge and self-management, greater engagement in physical activity and stronger community connections. Several organisations exceeded their anticipated reach and reported strong demand for continued provision beyond the grant period.

Feedback from grant recipients was highly positive. Organisations valued the accessibility of the funding, the proportionate grant management arrangements and the opportunity to develop new partnerships with healthcare providers and other community organisations. Several projects have already secured commitments to continue or expand delivery, suggesting that the programme has generated benefits that extend beyond the immediate funding period.

Overall, the programme has demonstrated that targeted investment in the VCFSE sector can deliver meaningful health and wellbeing outcomes, strengthen relationships between primary care and community organisations, and support the wider transformation ambitions of the NHS. The learning from this programme suggests that future investment in preventative, community-based approaches has the potential to generate substantial value for local communities while helping to reduce demand on statutory health services.

Measure	**Outcome**
Grants awarded	9
Total funding distributed	£13,500
Programme management	£1,500
Total fund value	£15,000
People directly supported	544
Projects reporting as of 12 October	7 of 9 funded projects have submitted end-of-project reports (at 20 October 2026)

Programme Purpose

In March 2026, MBPCC allocated £15,000 as one-off charitable funding towards VCFSE sector activities in north Lancashire and south Cumbria, administered by a partnership between Lancaster District CVS, Cumbria CVS and South Cumbria VCFSE Gateway.

The investment was intended to support initiatives that work with, alongside, or complement general practice. Recognising that the VCFSE sector already plays an important role in supporting people's health and wellbeing, MBPCC asked the VCFSE sector to focus on activities and ways of working that contributed to the three "shifts" highlighted by the 10-year Long Term Plan for the NHS:

- From sickness to prevention: supporting people and communities to stay well and prevent ill health before it develops or worsens.
- From hospital to community: providing more care, support and wellbeing activity closer to where people live.
- From analogue to digital: improving access to services, information and support through digital approaches where appropriate.

Through these initiatives, MBPCC aimed to:

- Strengthen relationships between general practice and the VCFSE sector
- Support small-scale, high-impact community activity
- Help improve health and wellbeing across local communities

Programme Delivery

Preparation and Receiving Applications

Following confirmation of the investment from MBPCC, Lancaster District CVS worked with the Cumbria CVS and South Cumbria VCFSE Gateway to develop an application form and guidance, opening the fund to applications though an online grants portal from 6 April until 30 April.

Applicants were directed to make applications in line with the purpose of the investment, with several eligibility and project design requirements in place. Applicants were required to demonstrate that their proposed activity would work with, alongside, or complement general practice, and contribute to at least one of the three NHS "shifts". Projects were expected to deliver activity within North Lancashire and South Cumbria between April and 30 August 2026, with grants of up to £2,000 available.

Eligible expenditure included staffing, volunteer expenses, equipment, training, events, outreach and reasonable management costs directly related to project delivery. Activities such as clinical treatment, statutory services, large capital projects, political activity and projects taking place outside the target geography were not eligible for support.

Applications were open to a wide range of voluntary, community, faith and social enterprise (VCFSE) organisations, including charities, community groups, Community Interest Companies and faith-based organisations. Applicants were required to have an appropriate governing document, a UK bank account in the organisation's name with suitable financial controls, and arrangements in place to produce annual accounts.

Organisations were also asked to demonstrate a clear understanding of local need, identify who would benefit from the proposed activity, explain how impact would be measured, and describe any partnerships or relationships that would support successful delivery.

Assessment and Award

At the application deadline, 33 projects had been proposed by eligible organisations – 13 for activities in the Lancaster district, 17 for activities in south Cumbria, and three for activities taking place across the entire region.

Three representatives (one from each of LDCVS, Cumbria CVS and South Cumbria VCFSE Gateway) scored the applications prior to taking part in a meeting to discuss the outcomes. On this occasion, panel members were asked to provide an overall score out of ten for each application, taking into consideration:

- The extent to which the project met the fund's aims
- The extent to which the project aligned with the applicant's declared NHS "shifts"
- The extent to which the project seemed feasible within the declared budget and reach
- The extent to which the applicant has convinced the panel member of their ability to deliver the project and report on their declared outcomes

Panel members convened via Teams on 8 April to discuss the outcome of the scoring process and to agree recommendations about which projects should be awarded grants.

Nine projects were recommended for grants. Eight were awarded their full grant request, while the ninth was offered a reduced grant taking into account the total budget available.

Code	Organisation	Project	Award
1483-MBPCC	Stanleys Community Centre	Living Well With Pain	1,840
1500-MBPCC	Walney Community Trust	Cook, Move, Thrive	2,000
1468-MBPCC	Positive Futures Well Being Services	Opening Up Appointments	2,000
1481-MBPCC	Millom and Haverigg Together CIC	Finding Your Feet	1,450

1460-MBPCC	Adullam Programme	Moving Together	1,220
1505-MBPCC	Carnforth Community Swimming Pool	Loneliness & Isolation	550
1458-MBPCC	Tigerlily Trust	Baby and Child Loss Bereavement Support	1,998
1476-MBPCC	FND All-Inclusive Support Group.	FND All-Inclusive Support Group	600
1466-MBPCC	Thrive Community Health CIC	Barrow Menopause Community Pilot	1,842
		Sub-total	**13,500**
	Lancaster District CVS	Granting process management	1,500
		Total	**15,000**

Following approval, all successful applicants were issued with a grant agreement setting out the purpose of the funding, the activities and outcomes that had been approved, the reporting requirements, and the terms and conditions attached to the award.

The agreement provided a clear framework for delivery, ensuring that organisations understood how funds could be used, the evidence they would be expected to retain, and the monitoring information they would be required to submit. It also established accountability arrangements, including requirements relating to governance, financial controls, safeguarding, data protection, acknowledgement of funding, and the recovery of funds in circumstances where grant conditions were not met.

By requiring formal acceptance from an authorised representative, the grant agreement provided assurance that both parties had a shared understanding of the project, its intended outcomes, and their respective responsibilities throughout the grant period.

Payments were released to organisations once their signed agreement was returned to LDCVS. The final payment was made on 10 July.

Funded Projects

Collectively, the nine funded projects proposed to support around 100 direct beneficiaries, alongside additional indirect benefits for families, carers and wider community networks.

Planned activity included more than 120 hours of specialist support, structured exercise and wellbeing programmes, peer support groups, healthy lifestyle

interventions, chronic pain management, menopause support and initiatives addressing loneliness and isolation.

The projects combined preventative health approaches with community-based support, helping people improve wellbeing, build resilience and access non-clinical interventions that complement primary care.

Baby and Child Loss Bereavement Support (Tigerlily Trust)

Primary shift: From sickness to prevention

The project proposed specialist bereavement support for parents affected by the loss of a baby or child. Funding supported both peer support groups and one-to-one interventions, enabling the organisation to deliver an anticipated 111 hours of support. The project anticipated supporting between 19 and 27 bereaved parents directly, with wider benefits extending to family members and support networks

Moving Together (Adullam Programme)

Primary shift: From sickness to prevention
Secondary shift: From hospital to community

Moving Together proposed two six-week chair-based exercise programmes, one for men and one for women, aimed at people experiencing barriers to traditional physical activity. Sessions combined accessible exercise with opportunities for social connection and confidence building. The project planned to support up to 16 participants and sought to improve physical wellbeing, confidence, mental health and social connectedness.

Barrow Menopause Community Pilot (Thrive Community Health CIC)

Primary shift: From hospital to community
Secondary shift: From sickness to prevention

The project proposed a series of community-based Menopause Café sessions, providing information, peer support and opportunities for discussion in a non-clinical setting. Funding also supported the development of volunteer champions and online resources to extend the project's reach. Approximately 40 women were expected to benefit directly, including around 33 participants and seven volunteers.

Opening Up Appointments (Positive Futures Wellbeing Services)

Primary shift: From hospital to community
Secondary shift: From sickness to prevention

The project proposed a trauma-informed wellbeing support for people presenting to primary care with social, emotional and mental health challenges. Through personalised support, social prescribing approaches and practical interventions, the project aimed to improve wellbeing and resilience while helping individuals access community-based support that could reduce reliance on primary care services.

FND All-Inclusive Support Group

Primary shift: From hospital to community

Funding was requested to establish a dedicated peer support group for people living with Functional Neurological Disorder (FND). The group provided opportunities for participants to share experiences, access information, develop self-management strategies and build supportive relationships with others experiencing similar challenges.

Finding Your Feet (Millom and Haverigg Together CIC)

Primary shift: From sickness to prevention

Support to Finding Your Feet established practical falls-prevention sessions using adapted judo techniques to teach participants how to fall safely and improve confidence in movement. The project sought to improve balance, mobility, strength and independence among older adults, contributing to falls prevention and improved wellbeing.

Living Well with Pain (Stanleys Community Centre)

Primary shift: From hospital to community
Secondary shift: From sickness to prevention

Stanleys requested funding to create a community Pain Café, providing people living with chronic pain with access to education, peer support and self-management strategies. Activities focused on helping participants better manage their condition, improve wellbeing and reduce the impact of pain on everyday life, while also creating opportunities for social connection.

Cook, Move, Thrive (Walney Community Trust)

Primary shift: From sickness to prevention

This project proposed an eight-week healthy lifestyles programme combining physical activity, practical cooking workshops and nutrition education. The project aimed to support 15 participants, with at least 12 expected to complete the majority of sessions. In addition to direct beneficiaries, the project anticipated wider benefits for between 30 and 45 household members through shared learning and healthy eating practices.

Loneliness and Isolation (Carnforth Community Swimming Pool)

Primary shift: From sickness to prevention
Secondary shift: From hospital to community

Funding was requested to create an eight-week Swim & Connect programme combining accessible swimming activities with facilitated social interaction. Designed for adults experiencing loneliness or social isolation, the programme aimed to support between 8 and 12 participants per cohort, improving wellbeing, increasing social connection and encouraging sustained community engagement.

Outcomes

At the time of reporting, returns had been received from seven of the nine organisations. Two funded projects were not delivered (grants were returned) and one report remains outstanding and is being proactively chased. This report reflects information available as of 20 October 2026 and should therefore be regarded as an interim reflection of programme outcomes. Further evidence and learning may emerge when the final project report is received.

Although the funded projects varied in their focus and approach, several common themes emerged across the programme:

- Improved physical and mental wellbeing through creative, social, physical activity and peer-support interventions.
- Reduced loneliness and social isolation by creating opportunities for people to connect with others and participate in community activities.
- Increased confidence, independence and resilience among participants, particularly those experiencing health challenges, caring responsibilities or social exclusion.
- Greater access to preventative and community-based support, helping people maintain their health and wellbeing and reducing the risk of needs escalating.

- Strengthened community connections through volunteering, peer support and participation in local activities.
- Enhanced partnership working between community organisations and health services, demonstrating the value of community-based approaches in supporting population health and wellbeing.

Collectively, the projects (as reported to date) supported 544 people, equivalent to an investment of £28 per head from MBPCC.

These projects have demonstrated how relatively small grants can enable community organisations to reach people who may not otherwise engage with traditional services. By providing accessible, community-based opportunities for connection, activity and support, funded organisations contributed to improved wellbeing and helped strengthen the wider health and care system across Morecambe Bay.

Baby and Child Loss Bereavement Support (Tigerlily Trust)

Tigerlily Trust delivered the project largely as planned, providing 111 hours of bereavement support between May and August 2026 through a combination of one-to-one and peer support sessions for parents affected by the loss of a baby or child.

All grant funding (£1,998) was spent as budgeted on support group delivery and individual support sessions. A total of 26 people benefitted directly from the project.

The evaluation highlights significant benefits for participants, including reduced isolation, improved confidence in discussing their experiences, lower levels of anxiety and depression, and increased ability to engage with everyday life following their loss.

Participants valued meeting others with similar experiences and described feeling understood and supported in their grief. Positive feedback was also received from NHS bereavement staff, who described the service as an important source of support for families.

The project supported the NHS shift from sickness to prevention by helping bereaved parents manage their grief through peer support and coping strategies, with some participants reporting that they had avoided relying on antidepressant or anti-anxiety medication. The use of Zoom sessions also contributed to the shift from analogue to digital, enabling people in remote and rural communities to access support from home.

Moving Together (Adullam Programme)

The project was not delivered within the funded period because the proposed facilitator withdrew after securing alternative employment. As a result, no participant sessions took place and no beneficiaries were reported during the reporting period. Grant expenditure was also deferred, with no project costs incurred.

The organisation reported that it remained committed to delivering the programme and had been in discussions with alternative providers, including Salt Ayre Sports Centre, to identify a replacement facilitator.

Lancaster District CVS received this information from Adullam one day prior to the reporting deadline and unfortunately there had been no previous engagement from the organisation requesting support. Adullam have returned the full value of the grant, in line with their grant agreement.

As no activities were delivered, there were no direct community outcomes. However, the organisation reiterated its belief that the proposed chair-based exercise programme would support the NHS shift from sickness to prevention by addressing physical inactivity, confidence and mental wellbeing.

Barrow Menopause Community Pilot (Thrive Community Health CIC)

The pilot successfully delivered and exceeded its planned activities. Three Menopause Café sessions were delivered during the funded period, with an additional session added following strong demand. Sessions combined peer support, professional input and discussion on topics including menopause symptoms, sleep, mental wellbeing, relationships, lifestyle changes and navigating healthcare services. Volunteers were recruited and supported, and work also began on developing digital resources and partnerships to extend the project's reach. The full grant value of £1,842 was spent as planned.

The project directly benefitted 52 women, exceeding the original target. Evaluation findings were particularly strong, with 92% reporting increased understanding of menopause, 92% reporting greater confidence to manage symptoms or seek support, and 100% stating they would recommend the Menopause Café to others. Participants consistently reported reduced isolation, increased confidence and improved understanding of available support. The project also strengthened links between community organisations, healthcare providers, Healthwatch, local employers and elected representatives.

The pilot strongly supported the NHS shift from sickness to prevention by improving health literacy, encouraging earlier help-seeking and increasing

confidence in accessing support. It also complemented general practice by creating opportunities for women to explore concerns in a supportive setting outside clinical appointments. Through the development of curated online resources and plans for a shared digital platform, the project additionally contributed to the shift from analogue to digital.

Opening Up Appointments

The project established a dedicated referral pathway within Queen Square Medical Practice for patients presenting with complex social, emotional and mental health needs. Working alongside primary care teams, the service provided trauma-informed support, practical assistance and connections to community-based services.

The project supported 123 people directly and received more than 160 referrals during the delivery period. Participants were helped to access counselling, social groups, practical support and specialist services, with more than 70% successfully connected to wider community provision. The organisation reported that the project more than doubled its original beneficiary target and helped people address issues before they escalated into crisis.

The project strongly supported the NHS shifts from sickness to prevention and hospital to community by providing early, non-clinical interventions for people whose needs extended beyond traditional medical treatment. The organisation reported positive feedback from both GPs and participants and identified evidence of reduced demand on primary care services, with a longer-term evaluation being developed to assess wider system impacts.

FND All-Inclusive Support Group

The project established two in-person support groups, based in Morecambe and Lancaster, alongside ongoing online support through Zoom and Facebook. The group provided peer support, information, guidance and one-to-one volunteer support for people living with Functional Neurological Disorder (FND). The full grant of £600 was spent, matching the original budget.

The project reported supporting 140 people through a combination of face-to-face meetings, online groups and individual support. Participants described feeling less isolated, better informed about their condition and more confident communicating their needs to family members, carers and professionals. The organisation also reported reaching a wider online community of nearly 1,200 people through its Facebook group.

The project supported the NHS shift from hospital to community by helping people understand their condition, identify triggers and access appropriate

support outside formal healthcare settings. By improving self-management and helping people distinguish between symptoms that required medical intervention and those that could be managed independently, the project also contributed to reducing unnecessary use of frontline services.

Finding Your Feet (Millom and Haverigg Together CIC)

The project delivered a falls-prevention session based on British Judo's "Finding Your Feet" programme. Activities focused on balance, mobility, strength, safe-falling techniques and methods for safely getting up after a fall. The grant of £1,330 was spent fully in line with the approved budget.

The project benefitted 8 participants, slightly below the expected attendance of 10-20 people. Participants learned practical skills designed to reduce falls risk and increase confidence in managing falls safely.

Millom and Haverigg Together contacted Lancaster District CVS shortly after the start of their project to express concern about attendance figures at their original delivery location in Millom. LDCVS was able to support the organisation to identify alternative locations in south Cumbria which had the potential to serve a larger geographic area and to develop some ideas for promoting the sessions, resulting in take-up for activities in a new session held in Thwaites.

The project clearly aligned with the NHS shift from sickness to prevention, aiming to reduce falls, injuries and avoidable healthcare interventions through preventative education and physical activity.

Living Well With Pain (Stanleys Community Centre)

The Pain Café was delivered twice each month throughout the funding period, providing peer support, self-management education, nutritional advice and guided movement activities for people living with chronic pain. The project also trained staff in pain-management approaches to support future sustainability. All grant funding (£1,840) was spent as planned.

The project directly benefitted 36 people, including around 22 regular participants and a further eight people supported outside formal group sessions. Participants reported increased knowledge and confidence in managing their pain, greater mobility, improved sleep, reduced isolation and improved mental wellbeing. Several individuals also reported reducing their reliance on pain medication. Strong links were established with local healthcare professionals through partnership working with Bay Medical Group.

The evaluation demonstrated alignment with both sickness to prevention and hospital to community. Participants became more confident in self-management, developed peer support networks, improved their understanding of healthcare

options and gained access to early-intervention support outside clinical settings. The project was also reported to have reduced pressure on primary care by helping people manage chronic pain more effectively between appointments.

Stanleys and Bay Medical Group have committed to continuing and expanding the service after the grant period, increasing delivery from fortnightly to weekly sessions.

Cook, Move, Thrive (Walney Community Trust)

As of 12 October, a report on this project remains outstanding.

Loneliness and Isolation (Carnforth Community Swimming Pool)

Carnforth Community Swimming Pool contacted Lancaster District CVS on 30 June to explain that they no longer felt able to deliver their project, as they had been unable to develop a referral process in time to receive a large enough cohort of participants.

Lancaster District CVS offered support which was declined, before requesting the return of the full grant value in line with our standard grant agreement. The grant was eventually returned, after chasing, on 14 October.

Feedback to the Funder

Overall, the programme demonstrated that small, targeted investments in the VCFSE sector can deliver meaningful health and wellbeing outcomes, strengthen links between community organisations and primary care, and contribute to the NHS ambition of shifting support towards prevention and community-based delivery. Future programmes should seek to retain the flexibility and accessibility of this model while providing greater opportunities for project development, learning and sustainability.

Feedback from funded organisations suggests that small, flexible grants can enable community organisations to respond quickly to identified needs, test new approaches and reach people who may not engage with traditional healthcare services. Several recipients reported that the funding created opportunities to strengthen relationships with primary care, other voluntary sector organisations and wider community partners, resulting in more joined-up support for local people.

A recurring theme was the value of investment in preventative and community-based activity. Organisations reported that relatively modest funding levels were sufficient to establish new groups, expand existing services or pilot innovative approaches, often generating strong participant demand and demonstrating clear community need. Several projects indicated that the funding had helped them gather evidence of impact that could be used to attract future investment and support longer-term sustainability.

Feedback also highlighted the importance of allowing sufficient time for project mobilisation and delivery. Projects that were able to build on existing community relationships and delivery models generally reported stronger engagement and outcomes. Where projects experienced staffing, recruitment or engagement challenges, organisations emphasised the need for flexibility and ongoing support during implementation. Where we were approached at an early stage, we were able to work with organisations to manage project change in such a way that significant delivery against target was still achieved.

Overall, grant recipients viewed the programme positively and reported that the combination of accessible funding, proportionate monitoring requirements and supportive grant management enabled them to focus on delivering meaningful outcomes for beneficiaries. The feedback suggests that future programmes would continue to benefit from maintaining a light-touch approach while creating opportunities for funded organisations to share learning, build partnerships and develop sustainable models beyond the life of the grant.

Learning & Recommendations

- Small grants can generate significant health and wellbeing outcomes
- The strongest opportunities lie in prevention and community-based support
- Partnerships between primary care and the VCFSE sector add value
- Organisations benefit from proactive support during delivery
- Short delivery timescales create risks
- Light touch processes were proportionate to the scale of funding available
- Future programmes should place greater emphasis on sustainability and shared learning.