

Learning from Service Delivery During the Pandemic:

Where we were, where we
are and where we want to be



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Background

Citizens Advice Wandsworth (CAW) and Wandsworth Community Empowerment Network (WCEN) work in partnership to deliver the Help Through Hardship Crisis project. The project, funded by the National Lottery Community Fund, aims to provide improved support to people in Wandsworth who face hardship and crisis.

As well as providing direct social welfare advice the project also trains volunteers and staff from community and voluntary sector partners to provide 'Advice First Aid' (AFA), and connects people experiencing hardship with the support they need to improve their circumstances. The AFA part of the project builds on evidence that early identification of advice issues, and the provision of timely support (e.g. with debt, housing, benefit and employment issues), can prevent problems developing into issues of hardship and crisis.

Through this work we are building a network of organisations involving a diverse range of community, faith and statutory groups and services. We bring together members of these networks at our regular events, and at our annual conferences.

Our conferences are an important opportunity for reflection and networking. They provide us with the setting to build a shared sense of community, to talk about the issues effecting local people and explore solutions to these problems. They also act as accountability forums; firstly, enabling us, and our wider stakeholders to measure our achievements, and secondly by providing a platform for service users and practitioners to speak directly to policy makers and service providers and vice versa.

Our 2021 conference

Our 2021 conference was held as COVID-19 lockdown restrictions lifted. We saw this as an opportunity to focus on learning from the pandemic. We knew the unequal and harmful impact Covid-19 had on the most marginalised members of our community, we also knew that across Wandsworth the community, voluntary, faith and statutory sector had worked together in unprecedented ways to try and meet the health and economic needs of local people resulting from coronavirus. All agencies had learnt a great deal; about the needs of communities, about remote delivery and the value of collaboration. We thought it was important to take-stock as a network and consider what we wanted to take forward from this period, to share ideas and identify possible risks of new-ways-of-working.

The event itself was attended by over 80 people; all sectors were well represented, with attendees from the CCG, the Council, and the voluntary, community and faith sector all contributing both as speakers and participants.

The event sought to answer three questions:

1. What have we learnt from service delivery during the pandemic that we want to keep?
2. What are the risks of a new approach? [How will we ensure we don't leave people behind?]
3. What will we take forward? [As individual agencies, and together as a community].

The issues were framed by presentations from Mary-Ann Foxwell [CE of CAW], Malik Gul [Director of WCEN], Cllr Ravi Govindia [Leader of Wandsworth Council], Dr Mike Lane [Deputy Clinical Chair Wandsworth, Southwest London Clinical Commissioning Group], Isabel Oakley Chapman [Director, Power to Connect] and Geetha Maheshwaran [Shree Ganapathy temple], as well as [by filmed contributions](#) from eight community, voluntary and faith groups in Wandsworth – who spoke about what they had learned from supporting residents during the pandemic.

Facilitated discussions were had in break-out rooms and in plenary. Participants' responses to the conference questions were noted by both facilitators and individuals on Jamboard and in the zoom comments. These were subsequently themed and colour-coded [see Appendix 2].

Aims of this document

In order that the conference discussion didn't become a moment-in-time, forgotten in the following days and weeks, we committed to producing a report which summarises the consensus reached at the event in order to inform post-pandemic plans across sectors in the borough.

Findings

What have we learnt during the pandemic that we want to keep?

From March 23rd 2020 face to face contact with people ceased and new kinds of emergency help and support were rapidly developed. Almost overnight we started working in different ways, and in a manner previously thought impossible. We considered learning from this and three main areas of focus came through in relation to learning that we want to keep.

We have summarised the responses from participants under the headings:

1. Ways of working, from the perspective of staff/volunteers and service users
2. Collaboration
3. Council engagement

Under each heading we have identified the potential risks that were raised in relation to retaining the new working arrangements.

Theme 1A: New ways of working for our staff and volunteers

We learnt:

- That staff and volunteers were able to adapt quickly to working remotely.
- How efficient home-working can be; and that it's possible to be more productive working from home.
- That we can deliver and attend online workshops and training events that are interactive and valuable.
- That the immediate and evident need motivated volunteers to step up, that volunteers engaged with a clear purpose, and that this energy enabled many services to respond effectively.
- That it was possible to increase the **flexibility** of systems and processes – which were changed in ways that had previously not been possible [e.g. recruitment processes for volunteers were simplified] and made service delivery a little easier and more effective.

The risks we identified were:

- **Of excluding certain people;** not everyone is able to contribute from home
- And not all staff and volunteers have the necessary digital skills – some also need training to improve and upskill in digital.
- **Of reducing team development;** opportunities for learning and collaborating are lessened
- **Of burnout of staff and volunteers;** we need to ensure that our staff and volunteers are looked after. 'Everyone has been so flexible over the last 16 months and we almost now expect this from them. Need to do everything we can to prevent volunteer/staff burnout'.
- Risks of work/life balance for workers - blurred work times and Zoom fatigue.

Theme 1B: New ways of working with our service users

We learnt:

- The extent of support that can be provided online and by telephone. And that
- For **some people online service delivery increased their ability to access support**. For example, not having to travel to appointments has been great for people with health conditions. Similarly, Zoom groups for Carers worked well, and some communities - such as people on the autism spectrum - have embraced digitalisation
- Being able to use an interpreter for online workshops had meant we can reach a wider audience and communities not otherwise accessed.
- Online provides more capacity for meetings; allowing some organisations to provide workshops and opportunities to a wider range of people.
- Some people preferred digital access; 'young people were accessing our services in large numbers for the first time'.
- Some people are **more comfortable receiving services** in their own home '*mediation has proved to be more productive - a surprising outcome*'.
- Clients could be provided **with services more efficiently** '*the wait for our appointments was shorter*'.

The risks we identified were:

- That **digital exclusion** leads to a sense of loss of not being 'in community'; social-deprivation tends to beget digital deprivation, compounding exclusion of those who most need it.
- There is a **loss of fellowship and depth of relationships** that come with physical touch and non-verbal communication.
- **Exclusion** of certain groups: deaf and hard-of-hearing, the elderly, and people with English as a second language.
- Limited capacity for **confidentiality and vulnerability online** making it harder to reach those who feel unsafe or uncomfortable at home, who cannot speak freely. e.g. difficult to report abuse or discuss issues relating to sexuality.
- **Safeguarding** clues and cues can be missed out on.

Theme 2: Better collaboration

The urgency of the pandemic necessitated communication between and within the sectors. New ways of working and using digital facilitated this.

We learnt:

- That we could **reach a wider audience by working together**, 'we relied on referral relationships with partners to access the most vulnerable groups, these grew exponentially and we want to keep them'.
- The importance of **trusted 'gateway' organisations** that provide a 'front-door' and join residents in-need with support organisations through sign-posting and referral.
- Some community and faith organisations developed new capabilities that enabled them to serve their communities in ways that were previously not considered.

- That better relationships between schools and home developed.
- That **online platforms** [MS Teams/ Zoom] – allow us to have more regular meetings with colleagues across the borough. *'Partnership working is more powerful and beneficial for everyone'*
- Council and **sector sharing information** about community needs led to more, and effective, preventative work.

The risks we identified were:

- That resourcing doesn't follow signposting; there is the potential for the voluntary sector to pick up lion's share of community need.
- That the contrast between agile voluntary sector and not-so agile local authority services could lead to the community and voluntary sector 'plugging-gaps' and providing solutions without adequate support.
- That a loss of trust could result between organisations in relation to co-production and sharing resources.

Theme 3: Improved Council engagement

There was unequivocal support for how the Council responded to the pandemic. Participants were clear that they want the level of engagement demonstrated by the Council to continue.

We learnt:

- There's been a huge benefit to **working holistically with the local authority** and the increased recognition of the work community organisation are doing.
- The Council has done an amazing job during the pandemic.
- The Council is listening better
- The regular voluntary sector and council meeting were invaluable
- There was a massive benefit of shifting from slow, bureaucratic processes to more agile response to crisis.
- The allocation of Emergency funding was done swiftly and with a helpfully reduced level of bureaucracy and paperwork. Decisions were made more easily and quickly - reacting to the need in a rapid and effective way. Want to keep this dynamic and proactive decision making.

The risks we identified were:

- That groups and organisations that don't have the capacity to attend regular meetings are excluded from discussions and planning. The meetings therefore potentially lack 'intelligence' and diversity of opinion and experience.
- That any move to reduce the level of engagement will harm emerging relationships.

What we'll take forward; as individual agencies and together as a community

As agencies of differing scales, focus and remit we will inevitably implement our pandemic-learning in different ways; we hope that the summary above [and below] will usefully inform the plans of individual organisations as they develop their post-pandemic arrangements.

However, we are more than the sum of our parts. We want the conference findings to inform how we operate as a community network, in particular how we work individually and together to support people in Wandsworth who are experiencing hardship and crisis.

To inform this network development we have summarised the points that conference participants contributed as ambitions for us across Wandsworth:

Values and approach

1. Everything is possible when a heart is added and there is a will to succeed and achieve.
2. Kindness, compassion, love are the most important things.

Ambition

- Ensure addressing economic & racial injustice & poverty in Wandsworth - and all its social-determinants of health is a priority for the post-pandemic future.
- Causes of poverty are not new - just more visible to more people. Need to prioritise tackling the **root causes of poverty**.
- Keep hoping, and continue to **demand better for the vulnerable**. The seemingly 'impossible' is often very possible with a will, strong enough intent, and sometimes a twisted arm!
- **Harness** greater awareness of needs and inequality and interest in changing this.

Collaboration

- Reaching the hard-to-reach and the vulnerable requires partnership and collaboration - most people are connected to someone/thing. Find and connect with the someone/thing.
- Build partnerships that work for the way people live; not how institutions are constructed. Shift towards **community ownership, equity and involvement**,
- We crucially need to enable, empower and **share resources with grassroots organisations**, as they tend to have deeper reach and cultural resonance with some of our most marginalised communities.
- **Strive to carry-on putting groups** in touch with each other, and linking those who are falling through the cracks with the help they need.
- Know what other services are available locally, particularly relating to **mental health** services.
- Share information and report in partnership. Everyone on the same page!
- Build on the power of relationships, real balance in fellowship in community. Workshops, and reaching out, moving forward with changes.

Service Delivery

- Communication is key in relationship building; **changes identified need to be communicated** clearly in advance and the transitional period managed effectively.
- **Promote** our own services to reach those in need.
- Demonstrate a willingness to try new things and let them go if they don't work, as opposed to over attaching to projects and ideas that don't work as planned
- Make more places inclusive rather than segregated
- Digital isn't going to go away, think hard about **making digital easier to use**

Reaching people: ensuring we don't leave people behind

- Acknowledge that some people never go to services for help - we cannot sit back and wait for them to come to us, we must go to unusual, non-mainstream and community spaces to reach them.
- Support people and communities to **help themselves and each other**.
- Keep our approach humanising. Kindness and compassion goes a long way- in all things we do - as opposed to transactional and 'Organisation to Client'
- Acknowledge that digital is not inherently better than in-person, both have serious limitations that exclude people. **A blended approach** is critical. Provide an agile response to managing paperwork for those without digital resource.
- **Language needs** is one of the issues causing potential marginalisation in the digital world - but which could be improved by a bigger commitment to interpreting and translating which IT can also ease.
- Overcome **digital exclusion** with 1-2-1 outreach, peer mentorship, and ensuring you have a strong data that allows you to keep track of community members and their specific needs.

Recommendations

"I like that distinction between top-down and bottom-up approaches in our community. There is this grey area when it comes to power hierarchies - these aren't recognized - and keeps disparities persisting".

- Conference attendee

In the weeks following the conference CAW and WCEN reflected on the information gathered from the event, and with the Hardship Crisis project's Project Oversight Panel (POP), drafted the recommendations below. We propose these points as ways for our statutory partners (and ourselves) to embed, and progress, the learning from the pandemic period.

The Council and the CCG

1. Wandsworth Health and Wellbeing board note the findings from the conference and consider how learning can be applied in the areas of public health and adult social care.
2. Incorporate the findings from this conference report into the development of the 2021- 23 Health and Care plan.
3. The emerging ICS considers the value of the community, voluntary and faith sectors in addressing health inequalities, and in particular the importance of advice and advocacy to improving health and wellbeing.
4. Each PCN in the population health management development program in Wandsworth considers the findings from this report, and is mindful of the value of advice and advocacy and the resources within their local faith, community and voluntary groups when making decisions.
5. That the Public Health Board, and the newly formed Public Health Community Action Group, notes the findings from this report and engages with the advice and advocacy element of the project when considering strategies to reduce health inequalities.

South West London and St Georges Mental Health NHS Trust

Recognise the importance of advice and advocacy as an important component of the Ethnicity and Mental Health Improvement Project (EMHIP) and commits to apply this learning across the Mental Health Transformation programme

Wandsworth Council

1. Seeks out opportunities for collaboration and production, where the Council acts as an enabler of community, faith and voluntary sector organisations who want to develop their capabilities to provide services and support to their communities.
2. Lead in the protection and continuation of strong cross-sector partnership work
3. Going forward - make sure channels stay open between the council and the community
4. Maintain the cross-borough access to WBC officers and teams – don't re-build the silos.

CAW and WCEN

1. Together, to continue to build the advice and advocacy capacity of Wandsworth's communities. And to facilitate collaboration across sectors.
2. Together, to make the case for the mainstreaming of this capacity-building work to ensure that it continues to be delivered beyond the end of its project funding in June 2023.
3. CAW to continue to host and develop a referral platform and facilitate referral relationships across and between sectors in the borough.

Appendix 1: List of people who registered to attend

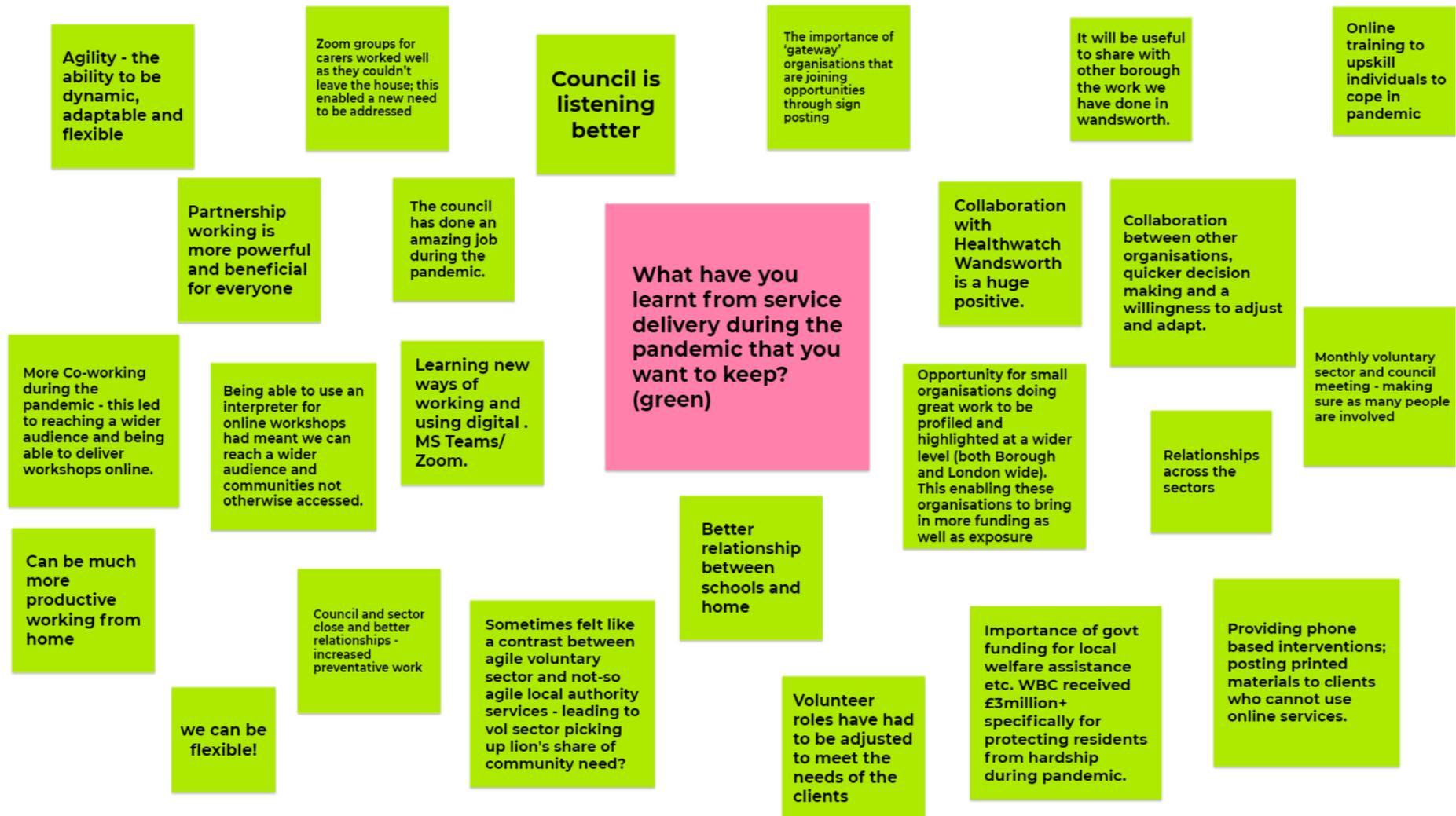
First Name	Last Name	Organisation
Ukaku	Kalu	None
Kirt	Hunte	Primary Care Plus (PCP) service
Richard	Wiles	Wandsworth Council, Adult Social Care and Public Health
Jonathan	Palma	Citizens Advice Wandsworth
Abi	Dosunmu	Hestia
Andrea	Owen	Alzheimers Society
Kate	Moon	Little Village
Annie	McDowall	Share Community
Paul	Banks	Wandsworth & Richmond Councils
Charlotte	Duncan-Smith	Citizens Advice Wandsworth
Sarah	Goodall	Katherine Low Settlement
Lauren	Palmer	Wimbledon Foundation
Iesha	St. Hilaire	Optivo
Melissa	Watson	LBRuT
Stephen	Manning	Crosslight Advice
Sarah	Chapman	Wandsworth Foodbank
Pat	Gabriel	Wandsworth Foodbank
David	Olusesan	Hestia Housing & Support
Jenny	Reid	Wandsworth Mediation Service
Anton	Tavernier-Gustave	Enable Leisure and Culture
Ella	Mizon	National Lottery Community Fund
Shanice	Danso	South West London Law Centre
Cecilia	Potez	Citizens Advice Wandsworth
Diane	Dugdale	Wandsworth Council
Lystra	Charles	The HOPE Atrium
Claire	Gilbert	Wandsworth Council

Sahar	Beg	MindworksUK
Jacque	Reid-Rodney	CLCH
Vanida	Moonsamy	Croydon Hospital
Cheryl	Gale	Wandsworth Plus Credit Union Ltd
Rachel	Austin-Francis	Second Step
Rebecca	Nkanor	Talk Wandsworth South West London & St George's Mental Health NHS Trust
June	Pilgrim-Ndure	Wandsworth Community Empowerment Network
Basma	Parvi	Talk Wandsworth NHS
Dayo	Balogun	MIND in Brent, Wandsworth & Westminster
Nathalie	Gibson-Wilson	Tooting Graveney Daycare Centre
Icylina	Howell	Ransom AMEZ Church
Martin	Haddon	Healthwatch Wandsworth
Melanie	Getty McManus	Aurora
Katie	Cousins	CLCH NHS Trust
Sharon	Palmer	House of Commons, office of Member for Battersea
Judi	Gasser	Wandsworth Council
Callum	Stubbs	The National Lottery Community Fund
Delia	Fitzsimmons	Wandsworth Care Alliance (Healthwatch)
Elaine	Sheppard	Love to Learn
Stephen	Daws	Citizens Advice Wandsworth
Debby	Flannery	The National Lottery Community Fund
Candace	Skelton	WCEN
Aaron	Barbour	Katherine Low Settlement
Kusum	Gautam	SW London and St Georges MH Trust
Vivien	Yalcin	Age UK Wandsworth
Naseem	Aboobaker	Mushkil Aasaan
Charlotte	White	Earlsfield Foodbank
Sian	Phillips	Rethink
Sheree	Pinheiro	New Testament Assembly

Patrick	Marples	South West London Law Centres
Emily	Rycroft	SPEAR London
Melanie	Nock	Wandsworth Care Alliance
Isabel	Oakley Chapman	Power to Connect
Jo	Anderson	Citizens Advice Wandsworth
Nikki	Best	Talk Wandsworth NHS
Hanan	El Mahdi	Elays Network
Sitta	Dayi	Wandsworth Council
Miranda	Taggart	MindworksUK
Charmaine	Anderson	Yahweh Christian Fellowship
Ken	Phillips	Wandsworth & Richmond Councils
Graeme	Markwell	Wandsworth & Richmond Councils
Victoria	Diamond	Putney Society
Michael	Lane	NHS Southwest London CCG (Wandsworth)
Ravi	Govindia	Wandsworth Council
Lea	Siba	Wandsworth & Richmond Councils
Beverly	Baines	Citizens Advice Wandsworth
Beverley	Wilson Blunt	Family Action
Martel	Johnson	RWCDAS
Hope	Olugbola	Youth Legal Wandsworth
Lily	Odigie	Wandsworth Well Family - Family Action
Glenroy	Browne	Ransom AME Zion Church Lay Council
James	Sandbach	LawWorks
Adina	Maglan	Citizens Advice Wandsworth
Natalie	de Silva	Age UK Wandsworth
Tina	Molyneux	Council
Catherine	Gladstone	CLCHT
Kitty	Ma	CAB
Jack	Slade	Citizens Advice Wandsworth
Beth	Rattigan	Citizens Advice Wandsworth

Carol	Clapperton	Wandsworth Council
Malik	Gul	WCEN
Mary-Ann	Foxwell	Citizens Advice Wandsworth
Ruth	McKinney	WCEN

Appendix 2: Jamboard notes



What have I learned which I can continue using?

One size doesn't fit all, interactive workshops and Meeting more frequently

The ability of staff and volunteers to adapt quickly from face to face service to remote work - including telephone befriending and Zoom socials

The allocation of Emergency funding. The generosity of software providers. Now that we are approaching the "new normal" will we be charged for these. What next?

the benefit of shifting from slow, bureaucratic processes to more agile responses to crisis

value of relationship with national government - DWP with the Help to Claim service and NHS with the GP Referral project - linked us to people who needed advice

increasing digital channels is good, but staff need training to improve their skills - for instance, how to actively read in webchat

The value of speaking to people. Still providing a personal touch.

Working holistically with local authority and more recognition to the work community organisation are doing.

Decisions were made more easily and quickly - reacting to the need in a rapid and effective way. Want to keep this dynamic and proactive decision making.

What have you learnt from service delivery during the pandemic that you want to keep? (green)

we found we had learnt to quickly adapt to a new way of providing services; a change in demographic of service users (younger) and tailoring services for different groups; learnt that a personal

Tech online... very good in most aspects to keep services going, cutting down on isolation and giving voices. Some young people felt it was a tool and accessible for them. Food provision and food parcels was

community galvanising and mobilising itself; more volunteers working with institutions, especially those you wouldn't otherwise expect. Additional advantage of flexibility, of systems and processes

downside of going back to face to face - for people with health conditions not having to travel to fixed appointments has been great

Installing document 'drop boxes' for clients as we could not meet face-to-face.

Working in partnership with local libraries so people (clients) could take documents in - & have them digitally uploaded, scanned etc. So, advice givers (providers) responded to client needs 'remotely'.

the importance of a blended service post pandemic because many of the lessons learned should be retained. Particularly that people are much more comfortable in their own homes. For example mediation has proved to be more

Who knew housing people who are homeless was possible, and possible to do so quickly?!

Kindness and compassion goes a long way- in all things we do, it is important to keep our approach humanising, as opposed to transactional and 'Organisation to Client'

The is a sense of loss not being in community due to digital exclusion.

Housing issues with younger demographic as the change in increase of job lost

Civic spaces and opportunities

Important to stay clued up and joined up; be willing to partner and collaborate. We cannot be all things to all people

Faith groups have raised they didn't know much about their community in 'normal conditions' they wasn't able to recognise how much need they was in their communities previously as there was cultural barriers

Overcome digital exclusion with 1-2-1 outreach, peer mentorship, and ensuring you have a strong data that allows you to keep track of community members and their specific needs

Some people never go to services for help- we cannot sit back and wait for them to come to us, we must go to unusual, non-mainstream and community spaces to reach them

crucial need to enable, empower and share resources with grassroots organisations, as they tend to have deeper reach

agile response to managing paperwork for those without digital resource

What are the risks (orange) - How do we ensure no one is left behind? (yellow)

Digital is not inherently better than in-person, both have serious limitations that exclude people. A blended approach is critical

1) Things to be lost by going online- exclusion of deaf and hard-of-hearing, the elderly (particularly EASL, socially deprived and technically ungifted), loss of fellowship and depth of relationships that come with

Social deprivation also tends to beget digital deprivation, compounding exclusion of the who most need it.

Digitalisation = more capacity for meetings, offering workshops and opportunities to a wider range of people, has embraced by some communities such as people on the autism spectrum

Take advantage of greater awareness of needs and inequality and interest in changing this

language needs - one of the other issues causing potential marginalisation in the digital world but which could be improved by a bigger commitment to interpreting and translating which IT can also ease. At the

Some risks faced is the trust between organisations in co-production and sharing resources

Risk of poor, ineffective communication of all these changes identified and managing the transitional period effectively. Clear lines of communication needed.

Communikey in relationship building

we need to ensure that our staff and volunteers are looked after. Everyone has been so flexible over the last 16 months and we almost now expect this from them. Need to do everything we can to prevent volunteer/staff

Safeguarding can be missed out on, as you are not able to see face to face contact

Looking for places where young people are present to address young people

Risk of not focusing on the health economic benefits and not putting systems in place to measure outcomes.

Risk of not striking the correct balance between CCG and Local Authority.

2/2 physical touch and non verbal communication, limited capacity for confidentiality and vulnerability online, unable to reach those who feel unsafe or uncomfortable at home, who cannot speak freely



Communicate in advance what changes are being made.

How do we ensure we protect and continue strong cross-sector partnership work?

elders being willing to learn IT skills so they can attend online sessions where possible

How do we settle after the easing off of lockdown?

More blended support after pandemic to have maximum reach

Causes of poverty are not new - just more visible to more people. Need to prioritise tackling root causes.

Sharing and reporting in partnership. Everyone on the same page!

Agility is crucial in responding to hardship- moving forward, it would be great to move away from excessive bureaucracy and over-planning

What will we take forward? As individual agencies and together, as a community (blue)

Going forward - make sure channels stay open between the council and the community

As a community I would like to see the power of relationship, real balance in fellowship in community. Workshops, and reaching out, moving forward with changes

Digital isn't going to go away. How do we make digital easier to use?

Making more places inclusive rather than segregated

Vital to address economic & racial injustice & poverty in Wandsworth - and all its social-determinants of health. Needs to be priority for post-pandemic future

Personal responsibility for outreach is important.

Making places more cultural inclusive

Everything is possible when a heart is added

kindness, compassion, love are the most important things.

In exchange for bureaucracy, we need a willingness to try new things and let them go if they don't work, as opposed to over attaching to projects and ideas that don't work as planned

Citizen's Advice Wandsworth continue to work with and accommodate this population (the homeless) in suitable accommodation. And we have managed to get many vaccinated too.

Knowing what other services are available locally, particularly relating to mental health services. Promoting our own services to reach those in need.

Wandsworth Foodbank continue to provide emergency food and essentials to people in hotels and B&Bs, and are glad to help. But cooking facilities in hotels are scarce to non-existent, and it would be great if this

There is something in there about the importance of keeping hope and continuing to demand for better for the vulnerable. The seemingly 'impossible' is often very possible with a twisted arm!

Putney Society: We'll strive to carry on putting groups in touch with each other, and linking those who are falling through the cracks with the help they need. Great seminar