

# Large Grants Fund 2025 Report

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## Introduction

In January 2025, as part of the Health Grants Programme 2025-29, an online monitoring form was introduced for the annual monitoring reports of organisations in receipt of a Large Grant from Cloudesley. This has enabled more detailed analysis of the monitoring than was possible before. The monitoring



*Islington Centre for Refugees and Migrants*

included in this report was completed between April 2025 and January 2026, as different Large Grant rounds have different monitoring deadlines.

## Grants

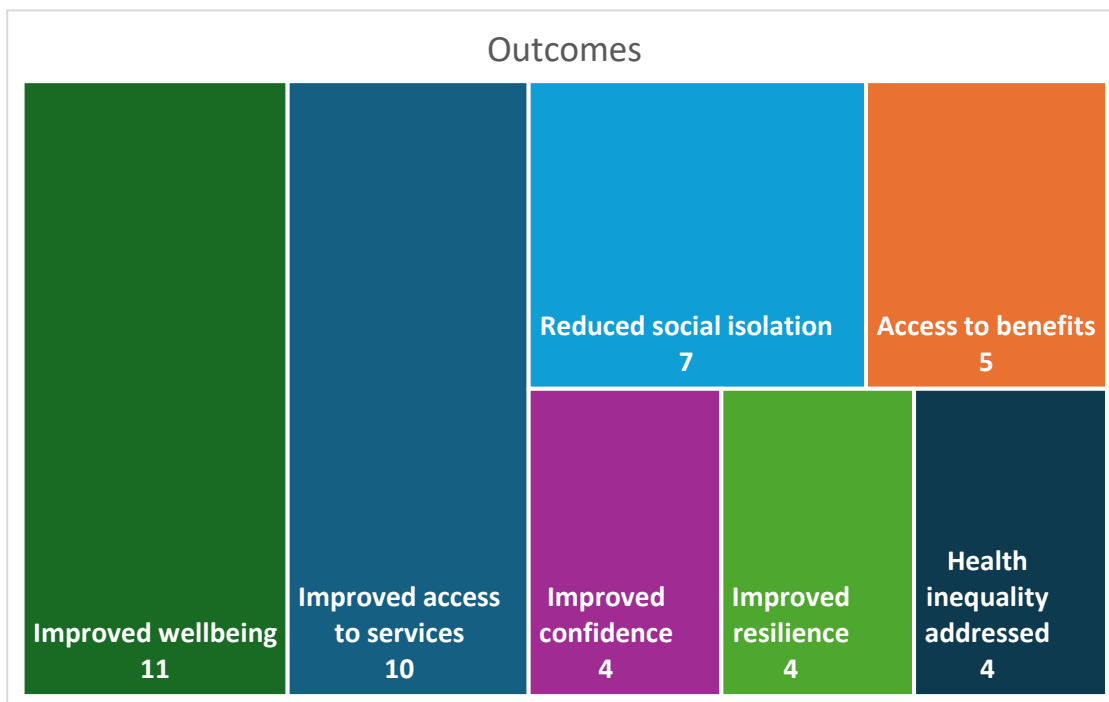
The following 16 grants are included in the analysis:

Organisation	Funding Round	Project Name
The Maya Centre	Round 1	Black Women's Project
The Manna	Round 1	One-to-one support service and activity groups
Islington Centre for Refugees and Migrants	Round 2	Support Service
The Margins Project	Round 2	Margins Plus
Stuart Low Trust	Round 2	Core Costs Arts, Nature and Wellbeing Programme
Holloway Neighbourhood Group	Round 2	Improving Mental Health & Wellbeing
St Luke's Parochial Trust	Round 2	St Luke's Helping Hands
Islington Mind	Round 3	Talking Therapies Clinic
Disability Action in Islington	Round 3	Complex Caseworker

<b>Manor Gardens Welfare Trust</b>	Round 3	Connecting for Health
<b>The Elfrida Society</b>	Round 4	LDAD Healthcare Access & Resilience Project
<b>Prospex</b>	Round 4	Prospex One to One
<b>Islington Bangladesh Association</b>	Round 4	Islington Bangladeshi Community Health Project
<b>Community Language Support Services</b>	Round 4	Helping hand to improve lives
<b>MahaDevi Yoga Centre</b>	Round 4	Therapeutic yoga for children and young people with additional or complex needs
<b>Islington People's Rights</b>	Round 4	KidsSupport

The above are all of the Large Grant groups except the former Strategic Grants, Islington Law Centre and Help On Your Doorstep (HOYD).

## Impact



As the focus of the Large Grants vary, the projects have differing outcomes and impact. However, there are some outcomes that are shared by a number of projects, and the most common outcomes are summarised below.

- **Improved wellbeing** – eleven projects improved the wellbeing of participants. In some cases, the project resulted in clinically measurable improvements in mental health, whilst in others, this was more general improved physical and mental wellbeing, often achieved through connection with others.
- **Improved access to services** – some projects offered direct support to people to access services such as healthcare, housing, community support and statutory services, whilst other projects helped service users to feel confident in accessing these services independently, or improved users’ digital skills to access online services.
- **Reduced social isolation** – seven projects reduced social isolation, with some directly bringing people together in a social context, whilst others connected people in a therapeutic context. In some cases, projects supported residents on a one-to-one basis to help them feel more prepared and confident to make social connections, or re-engage with existing relationships.
- **Access to benefits** – five projects worked to ensure residents received their full entitlement of benefits, through applications and appeals. Benefits received include Disability Living Allowance, Personal Independence Payments and Universal Credit.
- **Improved confidence and resilience** – four projects improved participants’ confidence, whilst four projects improved the resilience of participants to handle challenges in their lives.
- **Health inequality addressed** – whilst all projects address health inequality, four organisations explicitly cited this as an outcome of their work.



*Holloway Neighbourhood Group*

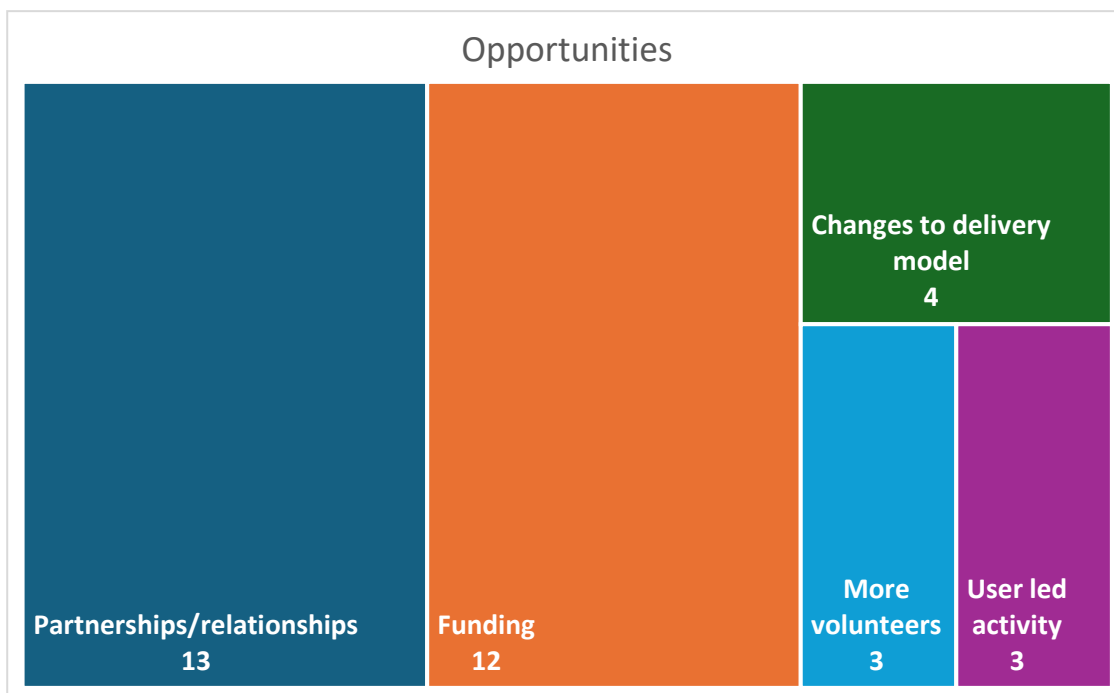
## Challenges



- **Funding challenges** – funding was identified as a key challenge for 11 of the funded organisations. In addition to challenges in securing sufficient funding to run services, other issues with funding included the restricted and short-term nature of many grants, meaning that core costs were often not covered, reserves could not be built, and services were not sustained for long without further funding. Some organisations had to close particular services when funding came to an end. Some organisations also had concerns about statutory cuts to funding.
- **Welfare system, policy and external factors** – eight organisations identified issues with the welfare system or policy changes as challenges for their service. Many highlighted welfare system delays and changes as a problem, and digitisation of services was also a recurring theme, with digitally excluded residents struggling to access services. A lack of housing and changes to the immigration system were also issues for organisations and their service users.
- **Demand and complexity** – increased demand and the increasing complexity of cases were highlighted by eight organisations. Demand for services often outstripped capacity, with some organisations forced to close their waiting list, whilst at other organisations, staff were working extra hours to accommodate the increase. Cases were often more complex, with people presenting with multiple, overlapping challenges, often including mental health issues, and requiring longer, more intense interventions and collaboration with other services.

- **Staffing** – six organisations identified staffing as a challenge. This included recruitment and retention of staff, with some having difficulty attracting suitable candidates, whilst others found the transition period during a personnel changeover challenging. Organisations also highlighted concerns around staff wellbeing and the pressure placed on staff by the increased demand and complexity of cases.
- **Volunteers and boards** – five organisations identified a challenge relating to volunteering, with the main issue being recruitment and retention of volunteers and Trustees. Another issue was reliability of volunteers – some organisations were exploring the possibility of using volunteers to increase their capacity, but had previous negative experiences of volunteers not always turning up when required.
- **Offer take-up and programme design** – one organisation reported that it was challenging to engage men and convince them to participate in the programme, whilst another found engagement with their online offer was declining. Another organisation was attempting to involve service users in the design and governance of the service, but the complex lives of their client group made this challenging.
- **Increased costs** – three organisations highlighted rising costs and the cost of living crisis as continuing challenges for their organisations.

## Opportunities

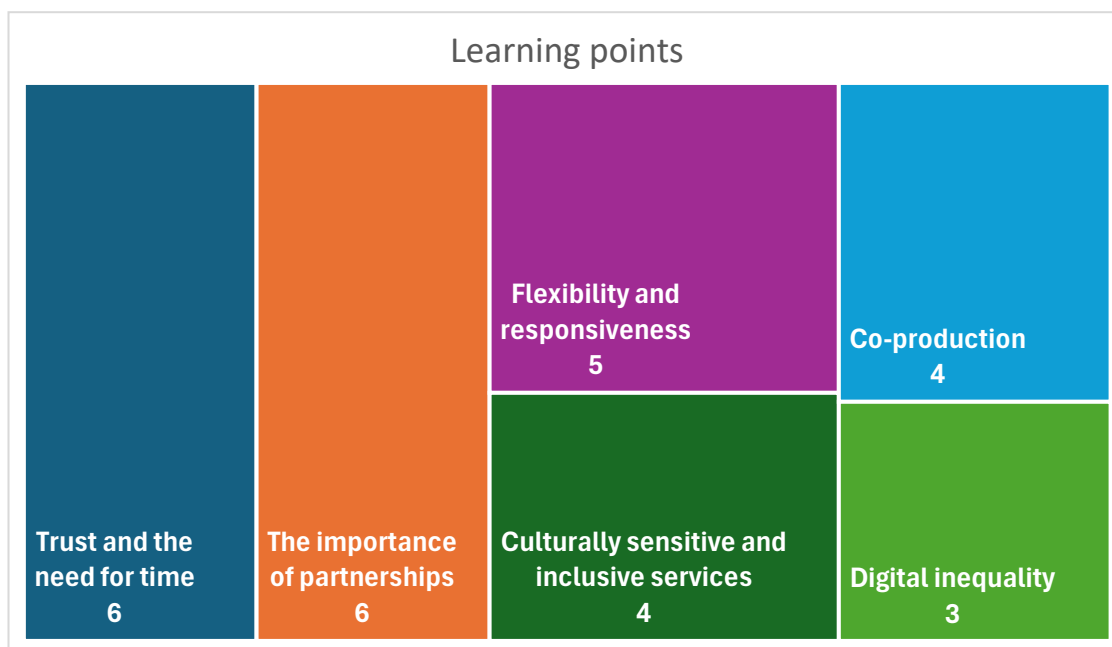


- **Partnerships and relationship building** – 81% of the funded organisations identified establishing formal partnerships or building relationships with organisations as a key opportunity. For many, the partnerships involved service delivery, with partner organisations providing additional services or activities to their client group. In some cases, the partnership enabled the funded organisation to reach more people or

deliver more effectively by enabling access to other professionals involved in supporting their clients. Some organisations were exploring the possibility of partnership bids for funding.

- **Funding** – funding was identified as a key challenge for many organisations, but 12 organisations also highlighted funding-related opportunities. Seven organisations pointed to funding that they had recently secured, whilst four organisations referenced recent funding applications where they were hopeful of success. Some were exploring new ways of securing funding. One organisation had to embark on an urgent fundraising campaign, but this activity had opened up a number of new avenues of funding for them. One had developed corporate fundraising as a new income stream, whilst another will be formulating a five-year development plan.
- **Changes to delivery model and organisation** – four organisations highlighted work that they were doing to refine or change their delivery model, or review their organisation more widely. Changes were in response to user feedback, to increase the sustainability of the model, or in response to new opportunities created by partnership working.
- **Increased number of volunteers** – three organisations were able to increase their volunteer numbers, increasing capacity and extending their reach and impact.
- **User-led activity** – three organisations had developed opportunities for service users to lead, shape or deliver activities within the service.

## Learning



- **Trust and the need for time** – six organisations highlighted the importance of establishing trust with clients. They highlighted that clients can often be reluctant to share the issues they are facing initially, and need time to open up. Trust is often easier to build if there is continuity with the staff member or volunteer they engage

with. Once the relationship is established, some organisations then found it difficult to bring the support to an end.

- **The importance of partnerships** – six organisations had learnt about the benefits that partnerships could bring, such as maximising resources, improving referral pathways, reducing duplication and increasing impact.
- **Flexibility and responsiveness** – five organisations highlighted the importance of a flexible offer that is able to adjust according to the needs of service users. For organisations working with young people, this involved adjusting their services during exam periods and other school activities. For other organisations, this involved tweaking service content in response to feedback, or changing the structure of the service to better suit clients. In many cases, organisations emphasised the need for a personalised, relational approach.
- **Culturally sensitive and inclusive services** – four organisations highlighted the importance of providing culturally appropriate services in order to deliver an effective service.
- **Co-production** – three organisations highlighted the benefits of co-producing the service with service users, making their services more relevant and accessible, and empowering clients.
- **Digital inequality** – three organisations had learnt how digitally excluded residents were negatively impacted by statutory providers transitioning to online services.

## Case studies

*(all names have been changed and photos are unrelated)*

### Community Language Support Services (CLSS)

Nia is a single mother of two children. She experienced domestic violence by her ex-husband. He had issues with alcohol misuse and used to spend the income of the family on alcohol, leaving his family in destitution. Nia suffered in silence due to cultural barriers, and as a result developed depression. She



*Community Language Support Services*

came to CLSS's service for help. They helped her to attend their health awareness session, and this has helped and empowered her to seek help. She reported the domestic violence to the police, who then removed her husband from the house. CLSS helped her to claim for Universal Credit and PIP (Personal Independence Payments), and provided her with ongoing

emotional support. She said that it is not wrong to seek help, your health and family matters.

### **Prospex**

Callum joined Prospex at the age of eight. He has faced a number of health and learning challenges throughout his early years. In school, he struggled significantly. Despite clear signs of dyslexia, concerns raised by the family were not taken seriously. Matters escalated when the family was informed that he would not be accepted into his secondary school of choice due to his academic attainment. From the outset, Prospex provided a steady source of support and encouragement.

Recognising the need for more tailored support, Prospex began One-2-One sessions with Callum. 'Beef', a member of the Prospex team, contacted Callum's school to share professional concerns and observations about his learning difficulties. Understanding the need for formal identification and support, Prospex funded a full assessment. Following receipt of the assessment report, the school acted immediately, implementing all recommendations outlined – a significant step towards ensuring Callum's needs were properly addressed.

Since the intervention, there has been a visible transformation in Callum. He now carries himself with a sense of relief, as though a heavy burden has finally been lifted. His parents have expressed immense gratitude for the timely and impactful support provided by Prospex. The intervention is set to have a life-changing impact, providing Callum with the opportunity to thrive both academically and personally in the years ahead. This gives him an educational passport so that he receives the support he needs through his education and into work.

### **The Elfrida Society**

Freddy, a 41-year-old Islington resident, lives with a mild learning disability and a brain injury sustained after being struck by a truck several years ago. Freddy experiences significant challenges, particularly with severe memory loss, which affects his ability to attend and manage his healthcare needs. His GP referred him to Elfrida after concerns arose that he was repeatedly missing medical appointments, leading to a deterioration in his health. Due to his memory issues, even arranging the initial onboarding session proved difficult, with several postponements. During Elfrida's early work with Freddy, they discovered that he had been removed from several hospital waiting



*The Elfrida Society*

lists. He had been deregistered after multiple missed appointments, exacerbating his already complex health needs.

Working in partnership with a caseworker from a charity specialising in brain injuries, Elfrida's health advocate tracked down the correspondence related to these missed appointments. They then liaised directly with the clinics, explaining Freddy's circumstances and successfully advocating for him to be reinstated on their patient lists. In some cases, they managed to expedite appointments to meet his urgent needs. To support Freddy's memory challenges, they agreed on a system where the advocate sends appointment reminders both a few days before and on the morning of the appointment. The advocate has also been attending some appointments with him, providing emotional support and helping facilitate communication between Freddy and healthcare professionals, who often struggle to adapt to his communication needs. Through sustained advocacy and practical support, Freddy has been able to re-engage with essential health services, significantly improving his wellbeing and quality of life.

### **The Margins Project**

John was referred to the Margins Project in June 2025 by St Giles Trust, a national charity supporting people affected by poverty, unemployment, the criminal justice system and homelessness towards a positive future. John has been diagnosed with paranoid schizophrenia and has a history of violence and substance misuse. After committing a serious crime in 2018, he was detained under the Mental Health Act for six years and discharged into the community in 2024. When John first joined the Supported Employment Programme, he was quiet and reticent to engage in conversation. He gradually settled into the team during his trial period, and his real promise was evident. He then moved from the trial period to enrolment in the Supported Employment Programme cohort.



*The Margins Project*

He quickly became a popular and reliable member of the team, and his confidence flourished. John works hard and learns quickly, with a punctual and resilient attitude. Over the course of John's time in the Supported Employment Programme, he has gained outstanding skills and become adept at adapting to change, making him ready to successfully move on to further paid employment elsewhere. As John neared his graduation time at the Supported Employment Programme, a position was secured for him in a patisserie in South London. The Margins team will miss his warm and friendly presence at but are certain that he will excel in his new role. John said: "I feel like a totally different person since I joined Margins. I feel a lot more confident about myself."

## Quotes from service users

*"I cannot stress how helpful (and needed) the counselling was, I was really struggling beforehand to cope and felt a bit like I was 'imploding'. Although I found it difficult at times (which I know is normal), I came away feeling much 'stronger' and now feel so much better about myself than, in hindsight, I probably ever have done."*

**Service user supported by Islington Mind**



*Islington Bangladesh Association*

*"At first, I was shy, but the group made me feel like I belong. Now I wait for Zumba day every week. ...I never thought I could learn these things at my age. Now I sleep better, I eat better, and I feel more in control of my health. ...Before, I used to keep everything inside. Now, I talk to other women, and we help each other."*

**Service user supported by Islington Bangladesh Association**

*"Ever since starting yoga at Mahadevi yoga centre it has helped me feel more calm, confident and happier within myself. ...It is also such a nice atmosphere seeing everyone with a smile on their faces. ...Coming to Mahadevi weekly and doing yoga here for such a long while has given me the inspiration to be a yoga teacher and help people like myself feeling less stressed, anxious and helping them feel confident and calmer."*

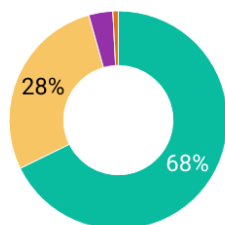
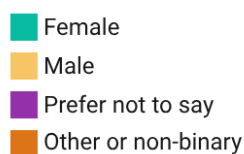
**Service user supported by MahaDevi Yoga Centre**

*"A very positive experience that has improved my understanding of self, my life (past and future) and recent health events and how they have impacted me, and especially how I move forward and rebuild my life. ...The service you have provided is excellent and I am very grateful for your provision of affordable help - I cannot praise you enough."*

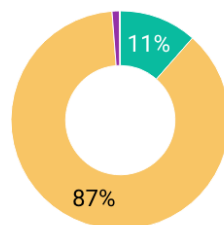
**Service user supported by Holloway Neighbourhood Group**

## Demographics

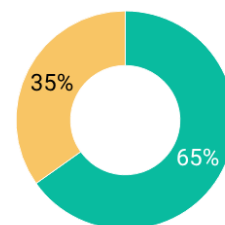
### Gender



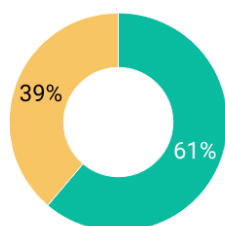
Mental health



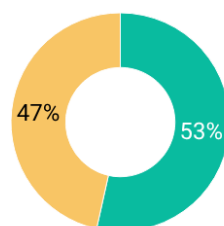
Homelessness



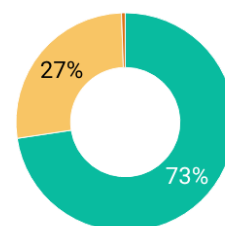
Disability



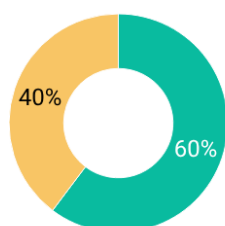
Older people



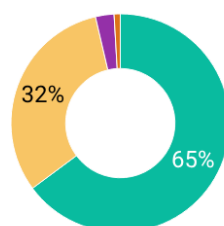
Young people



Community health



Advice



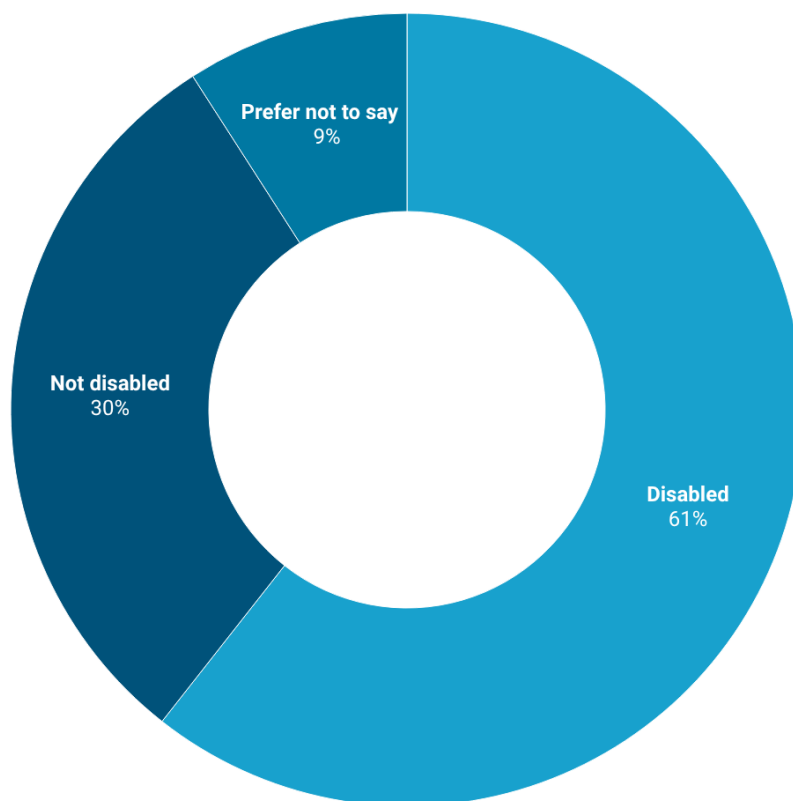
Refugees and asylum seekers

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Overall, the Large Grants reached 2,110 women (55%), 1,725 men (45%) and 12 people identifying as non-binary or another gender. The chart above breaks down the gender by grant theme. As can be seen, the only male-dominated services are those focused on homelessness. All other types of services tend to have more female than male service users, particularly for community health and mental health services. In some cases, the service was targeted at women, but in most cases, the service is open to all but predominantly attended by women. Some organisations are actively trying to increase the number of men who engage with their service.

## Disability

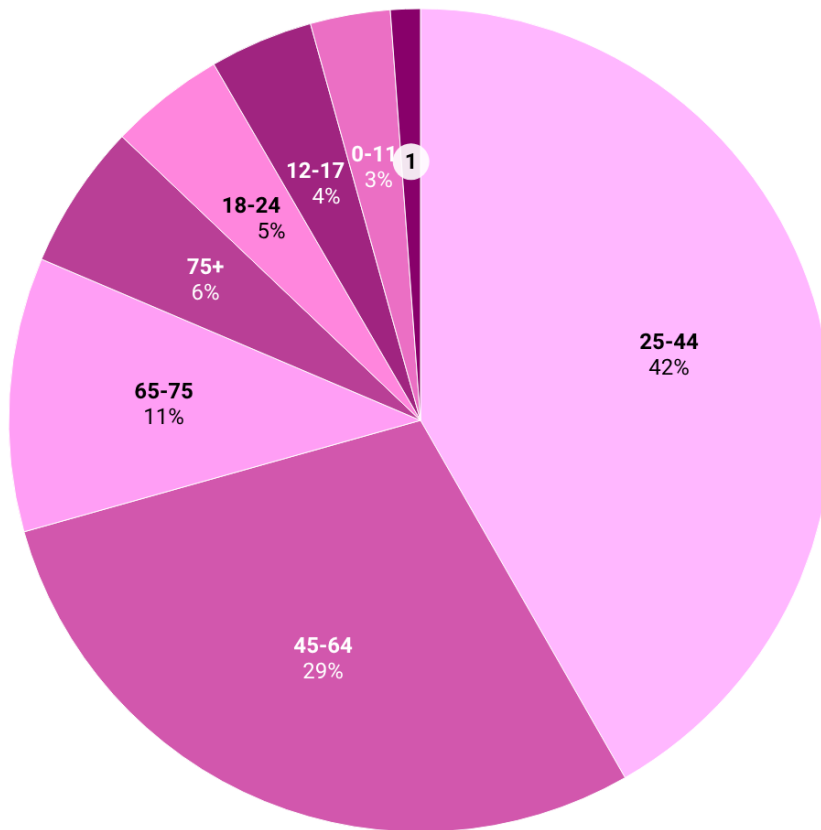
■ Disabled ■ Not disabled ■ Prefer not to say



Created with Datawrapper

The above chart shows that the majority (61%) of the Islington residents reached through the Large Grants identify as disabled. This compares to about 16% of Islington residents overall identifying as disabled according to the 2021 Census. However, as the Fund is focused on health inequalities, the high number of disabled people reached is perhaps unsurprising, and a positive sign that the Fund is achieving its aims.

## Age



1 Prefer not to say

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The largest age segment is 25-44 at 42%, followed by 45-64 at 29%. Under 18s only account for 7% of the residents reached by the Large Grants Fund, but this is still a significant increase on the figures in 2021, when no young people were being reached. Ultimately, most funded projects are adult only. Prospex and MahaDevi Yoga Centre are the two funded projects that are working with young people. Meanwhile, St Luke's Parochial Trust is focused on older people.

## Ethnicity

Ethnicity	Detail	Percentage
Asian	Any other Asian background	2
Asian	Bangladeshi	5
Asian	Chinese	2
Asian	Indian	1
Asian	Pakistani	1
Other	Any other ethnic group	4
Other	Arab	10
Other	Latin American	0
White	Any other White background	8
White	British	22
White	Greek / Greek Cypriot	1
White	Gypsy or Irish Traveller	0
White	Irish	3
White	Kurdish	1
White	Turkish / Turkish Cypriot	1
Black	Any other Black background	6
Black	Caribbean	3
Black	Eritrean	7
Black	Ghanaian	0
Black	Nigerian	1
Black	Other Black African	9
Black	Somali	11
Mixed	Any other Mixed background	2
Mixed	Asian and White	0
Mixed	Black African and White	0
Mixed	Black Caribbean and White	1

Created with Datawrapper

Figures for Islington as a whole from the 2021 census are as follows:

Ethnic group	Total	Percentage
Asian, Asian British or Asian Welsh	21,532	9.9
Black, Black British, Black Welsh, Caribbean or African	28,743	13.3
Mixed or Multiple ethnic groups	16,231	7.5
White	134,754	62.2
Other ethnic group	15,330	7.1

As can be seen, 36% of residents reached by funded organisations were from white backgrounds, compared to 62% in the Islington community. People from mixed ethnic backgrounds were also underrepresented at 3% compared to 7.5%. People from Black, Asian and other ethnic backgrounds were over-represented. Given the Fund's focus on health inequality, and as people from minority ethnic backgrounds are disproportionately affected by health inequality, this over-representation is to be expected and perhaps could be understood as a sign that the Large Grants Fund is achieving its aims.



Stuart Low Trust

## Conclusion and next steps

Funded organisations are making a significant difference to Islington residents, improving their wellbeing, helping them access services and benefits, and increasing their social networks. It is a challenging time for the voluntary and community sector in general, with funding being a significant concern, and many concerned about further cuts to statutory funding. Demand and the complexity of cases are also major current issues, which in turn can lead to staff burnout. On the positive side, many organisations are successfully utilising partnerships and networks to maximise impact and reach new people. Demographic data shows that Cloudesley is generally reaching a good cross-section of the Islington community, but that more work could be done to reach men.

Building on the learning from the monitoring, we will look to progress the following actions:

- Health inequality reporting – although all projects addressed health inequalities, only four projects explicitly reported on how their work reduced health inequality. As this is the focus of Cloudesley’s Health Grants Programme, we could explore the possibility of taking steps to ensure reporting on this in the future. This could include adding a specific question to the monitoring form, and making information on health inequality available to funded organisations to ensure they have a good understanding of the link between their work and tackling health inequality
- Underserved demographics – if funding becomes available, we could target future grants at organisations that reach people in demographics currently underserved by our existing portfolio