

Appendix 2:

Key messages from table discussion at VCS funding workshops

74 attendees from VCS groups, and 13 council officers, across 3 workshops

What works well in Council funding now?

- The Council has maintained funding when many other councils haven't
- Council funding provides confidence to other funders
- Good relationships with the Council and other funded groups
- Funding covers core costs
- Development of local carers network
- Moving to outcomes rather than output approach
- Communication is good
- Monitoring arrangements have (mostly) improved

What doesn't work so well?

- The process keeps changing e.g. monitoring and can be confusing
- Application and monitoring process takes staff time and is not efficient for small grants/groups
- Number of Council staff changes over the last few years
- Council has funded some of the 'usual suspects' for many years
- Mixed views on the infrastructure service

What can we learn from other areas?

- 3–5 year grant agreements allow for better planning, help secure additional funding and continuity of staff
- Camden – core funding and partnership approach positive
- Some interest in investigating other organisations that could coordinate and manage the funding – others didn't agree with this approach, suggesting ownership should stay within the Council
- Salford - really good consultation around procurement, commissioning, needs analysis – accessible leaders
- Rochdale - Health and Wellbeing alliance and Mental health alliance
- Service mapping and benchmarking
- Scale of monitoring relating to the amount of funding

What are the main considerations for the co-design group?

- How will membership of the group be determined – VCS should choose the reps and not the usual suspects
- Fair representation of groups in co-design group
- Smaller groups and community voice must be heard
- Timescale is too ambitious

- Fair allocation of funding – clear eligibility/proven track record
- Focus on outcomes
- Need to involve other public sector partners e.g. Health
- Needs to be brave – decommissioning groups will be necessary
- Must have a robust consultation process
- Clear transparent and accountable process

Other questions and comments:

- Need to recognise the changes and impact on a GM level.
- Many providers go to similar meetings (GM wide) this timescale does not match other GM area footprints.
- It is important to make DEVO a reality
- As you are looking at different models, are you looking at the Youth and Play model, and how this co-design links into the Youth and Play model, so they can complement each other?
- You are including six funding streams - is youth going to be funded separately?
- I am concerned that the youth funding is separate
- Every year we are faced with different models. Illness doesn't change. What is going to be different? How will it look? Have you got a vision?
- I have worked in the VCS for a long time and I am always grumpy, we do not have salaries in December. You have got some money behind you but what have our staff got, to deliver services. We are running on good will.
- Is it about numbers? You spoke about buildings and resources. We have to buy, beg or borrow.
- The VSC are alive and kicking and we are bringing in a lot of money, and we do really well at this. This needs to be considered when looking at strengths.
- The Camden model took a long time to develop, where they came up with three models, and consultations were undertaken on these models. To have a good model for Manchester this will take time.
- The Camden model was a long term process with lots of consultation.
- Were the CCGs in the discussions with both Camden and Bristol?
- Is Manchester's timescale long enough?
- Will contracts be extended from March 2017?
- Three year contracts are great but are we missing an opportunity with the time frame you have given. If you extend you could get something extraordinary.
- The VCS have suffered from the short term nature of being given short notice of funding. (6-12months) and this is very destabilising. Staff need security on tenure and providers need a real clear indication of funding.
- It is great that there is a focus on partnership however sometimes it feels as though this partnership is a forced marriage.
- How do you ensure partnerships are organic?
- It is important to recognise that both funded and non-funded organisations do collaborate and work in partnership.
- It is important to be mindful with any new funding, around partnership, if some organisations get funding and others don't; how would that partnership continue?
- We had strategic partnerships some years ago; lots of the features are beneficial.

- How will we know how to link in with other providers if we don't know what other providers do?
- For the larger grants were agencies aware they could work together?
- Are you looking at historical commissioning? Are you looking at outcomes?
- We have aging wards so what priority will you give to this and linking with the Age Friendly Charter?
- What relationship will there be with the CCGs, police and other investors to have one pot?
- Will you be liaising with CCGs, PCC at some point as they have already announced their budgets?
- Could co-production be looked at, could there be a cooperative way of working and not a competitive way?
- Could you look at extending purchasing arrangements so organisations could pay the same rates MCC pay rather than top commercial rates?