

VCS Funding Co-Design Workshop Notes 20.10.16

Present

- Nicola Rea, Manchester City Council
- Liz Goodger, MCC
- Claire Evans, 4CT
- Elizabeth Mitchell, MCC
- Lynne Stafford, Gaddum Centre
- Martin Preston, Macc
- Juliet Eadie, CCG
- Frances Davies-Tagoe, Tree of Life
- Val Bayliss-Brideaux, CCG

Resilience

Objectives of Funding

- Stability
- Promote ability to grow
- Financial stability
- Enabling organisations to develop 5 year plans to build their sustainability
- Supporting and enabling organisations to successfully bid
- To allow new organisations to be funded
- Support organisations to reflect on how they function within the cities changing priorities
- Support organisations to build stronger relationships with the private sector
- Promote better sharing between organisations
 - sharing back office functions
 - information
 - skills
- To enable organisations to gain fresh perspectives on who else could offer support
- To provide a challenge to some organisations
- Encourage and Foster Good Governance
 - Effective risk management- financial and delivery
 - Stronger action needed- governance checks- must be legally compliant
 - Policy and procedure framework
 - Safeguarding policies
 - Role of trustees and legally what responsible for
- Construct prospectus in such a way that it ensures funding aimed at Manchester Organisations

Proposals/Comments/Questions

- Provide a health check on organisations (Governance, Policies, Building Management)
- Working with local communities to get volunteers/trustees

- Concern around potentially losing some good services but need to balance it with some organisations that are not delivering effective efficient services.
- How to respond if VCS does not change/improve/ react/acknowledge issues
- Lead organisation accountable- lead for others and due diligence
- Do we look at fewer contracts?
- Do we want to fund larger organisations to support smaller organisations or a mixture of funding large and small organisations?
- Developing linkages with student union to promote volunteering.
- Insist an organisation having private sector provider? E.g. could provide the support/IT support, would require a cultural shift, Linkage with Mcr Chamber of Commerce.
- Fewer grants and less process. Devolution of decision making.
- Fewer better relationships?

Prevention and the role of the VCS

Objectives

- Prevention from a strength based approach- focus on equalities and intervention
- Promoting and awareness of public health initiatives
- Targeted intervention and working together to achieve outcomes
- Bring in different perspective from statutory sectors and can access areas that statutory sector cant.
- Statutory sector referring into the voluntary sector
- Role of VCS to brokerage access to services such as NHS screening, support awareness, needs, share information

Proposals/Comments/Questions

- Are we talking whole population health or groups providing services that mitigate an escalation to a public sector service
- Targeted prevention underpins universal prevention
- Wider determinants impact health care education, debt, poverty etc
- Children and young people work targeted at symptoms rather than cause - limited resources
- VCSE tipping from preventative to statutory in some services- some are plugging gaps
- Eg Wirral- cooperative- shift on NHS conditions
- Is role of VCS already recognised in prevention? Eg carers 10% in GM
- Clear outcomes in contracts/funding- is the funding to be used to support statutory?
- Define prevention in entirety
- Can the VCS lead on this? Proactive development model - target approaches to needs
- Our Manchester and working together, e.g. tough cookies, sex education provider with specialism, who would link with community, who has access to local community

- Identify missing thousands
- Role in early identification
- Reducing social isolation
- Promoting links with Buzz
- Help to identify communities which have been engaged
- Some communities feel they can trust VCS but not statutory sector
- VCS as enablers

Neighbourhood and Citywide

Objectives

- Need a balance between neighbourhoods and communities of identity and interest
- Clearly identify the practical benefits of commissioning city wide where it is more viable on a large scale
- Decision about outcomes should shape streams of funding
- All health and wellbeing should outcomes be linked to Mcr locality plan
- Fund in a way that does not label people
- Use funding to develop VCS services/ support in neighbourhoods/ geographical based groups
- Equitable funding- ward to ward (or natural neighbourhoods?)needs to be different- priorities based on need, however, Poverty issues may be masked due to other circumstances in the ward
- Need to use some funding to try to encourage more activity in some areas
- Trial new approaches e.g. alliance/ consortium/partnership/ lead organisation
- Avoid duplication of contracts where more efficient to fund single providers rather than multiple providers.
- Organisations who obtain funding must be working with and supporting other organisations. No standalone organisations.
- Infrastructure
 - Role VCS/infrastructure- strategic/ local support/operational and role of other organisations to provide operational support.
 - Offer support to VCS groups who are not funded by local authority
 - Use funding to modernise VCS/ change management
 - Encourage ward-based groups to work together
- Assistance to organisations to develop the knowledge/skills and experience needed to draw on resources/ infrastructure.

Proposals/Comments/Questions

- Historical funding and rolling over of contracts, need to think differently

- Meeting statutory duties- is this part of this?
- Would citywide need more funding? No necessarily e.g. CAMMS tier 4, numbers low and so commission on a larger basis
- Do we want to fund community centre? More detail needed about grants
- Culture within the sector sometimes hinder change- need to support sustainability
- Are we trying to do too much for £3 million funding
- Equitable funding- ward to ward needs to be different- priorities based on need, how to decide, it may not be equitable because of this.
- VCS infrastructure important
- Challenge lots of groups have learned to adapt to funding regime and how they utilise this.
- VCS infrastructure important- prospective gives options to bid against
- Outcome of this process would be to maintain neighbourhood services and supported by city wide model or would it? Geographical/ place based or city wide? VCS funding to follow
- Don't use wards, use natural neighbourhoods
- Do we need to fund all neighbourhoods, what about those with more resources anyway? Yes but recognise some need more targeted etc
- Loss of factors why activity is low in some areas- history, member, facilities
- Challenge the sector- will hate it
- Some equality groups are geographically based e.g. race, others city wide e.g. sexuality and disability, wide variety

Funding Model

Proposals

- % figure of core costs to not encourage dependency, depends on size of organisation and scale of delivery
- Full recovery model
- Incorporate a facilitation role to keep a level playing field, incorporate funding for infrastructure organisation
- Give funding to external group outside of Manchester for feedback.

Questions/Comments

- Historical funding needs to be reviewed must change and be outcome based
- How is funding going to achieve different priorities?
- Core funding or just direct care costs?
- Do we want to agree % core costs or for the groups to choose?
- From a funder's perspective, how much goes into achieving actual aims and how just ends up supporting back office.
- Pool resources
- Housing providers now bidding for one service
- What happens to other organisations who get support but not funding from MCC/CCG?
- Broker type position to meet outcomes- neutral to help development
- Terms of reference and memorandum of understanding
- Second funding model, based on prospectus

- 3rd model based on 1 pot of funding but supports a number of organisations, if pooled more staff, offer more services, more support
- Need geographical spread or based on need
- Do we need outcomes to be high level, do they remain or be more specific?
- Must link to the bigger picture
- Is there flexibility on where funding is to be sent- no agreement on where it is to be spent?
- What are the priorities for the funding- need to discuss and agree and how decisions are informed or agreed?
- Contract plus- e.g. an organisation be a lead and delivers a service and also supports/ links to a number of organisation that also deliver outcomes incorporating infrastructure support KPIs in place would include core cost delivery
- Fourth model- full amount to one organisation and they sub contract out