

Report to: Lead Member for Adult Social Care and Health

Date of meeting: 17 September 2024

By: Director of Adult Social Care and Health

Title: Community and Voluntary Community and Social Enterprise Development Programme

Purpose: To provide an update on a Community and Voluntary Community and Social Enterprise Development Programme from 2025 and seek approval to proceed with procurement based on an indicative budget.

RECOMMENDATIONS

The Lead Member is recommended to:

- 1) Approve the procurement of a Community and Voluntary Community and Social Enterprise Development Programme from 2025;
 - 2) Approve the allocation of up to £539,000 (per annum) from the Public Health fund, subject to confirmation of the available budget through the Council's budget setting processes; and
 - 3) Delegate to the Director of Adult Social Care and Health authority to take all actions necessary to implement the Community and Voluntary Community and Social Enterprise Development Programme.
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1. Background

- 1.1 East Sussex has a thriving and diverse Voluntary, Community and Social Enterprise (VCSE) sector. The benefit and value of the sector has never been more apparent than in recent years due to the pivotal role it has played in supporting local communities through the pandemic, the cost-of-living crisis, through ongoing pressures in the health and care system, and in welcoming people seeking sanctuary in the UK.
- 1.2 East Sussex County Council (ESCC) has a strong track record of co-development, collaboration and partnership working with the VCSE, alongside ESCC investments in the sector that enable ESCC to meet corporate priorities and the needs of communities.
- 1.3 This work contributes to all ESCC's corporate priorities and specifically to the following Key Delivery Outcomes for 'Helping People Help Themselves':
 - 'Commissioners and providers from all sectors put people first when providing services and information to help them meet their needs.'
 - 'The most vulnerable get the support they need to maintain their independence, and this is provided at or as close to home as possible.'
 - 'Through working well with the VCSE sector, individuals, families and communities are supported to thrive.'
- 1.4 The VCSE will continue to have a key role in helping ESCC meet ongoing challenges, such as:
 - demand-led pressures from a growing older population and growing numbers of adults and children with increasing and complex needs;
 - uncertainty of future Government funding, and funding not keeping pace with increased costs; and
 - significant financial challenges from the current year (2024/25) and into future financial years, with current projections suggesting there will be significantly less resources to invest in services from 2025/26.

- 1.5 ESCC's programmes of work with the VCSE have been commissioned or initiated at different times with different objectives and have levels of interconnectedness that may not have been fully realised to date.
- 1.6 The challenges ahead require a focus on the bigger picture, on interconnectedness, and on how ESCC can enable a thriving VCSE sector that can engage in whole system approaches with sustainable support to communities.
- 1.7 3 current programmes have particular synergies and could benefit most from being drawn together in the future. These are:
 - Generic Infrastructure Services Contracts (GIS);
 - Asset Based Community Wellbeing Contract (known as Making it Happen - MiH); and
 - the Community Networks Support Programme (CNSP) - which aims to identify and support the Community Networks that have become a vital part of the ecosystem supporting people, communities, and community organisations.
- 1.8 These programmes also:
 - have a District and Borough footprint, recognising that there is variance in delivery, needs, and solutions, but that collectively reach right across the diverse County.
 - either take a strength based or asset-based development approach or would benefit from adopting such an approach,
 - provide infrastructure support services that nurture and develop hyper-local, independent, not-for-profit groups and organisations, and
 - benefit people of all ages and communities who are marginalised, at risk and most vulnerable.
- 1.9 2 of these programmes (GIS and MiH) have contracts which are ending at the end of this financial year.
- 1.10 There are other programmes which have strong connections to this work but are not delivered through existing or upcoming ESCC contracts. This includes the developing work on Integrated Community Teams (ICTs) which aim to bring together all sectors to provide an integrated health and care offer within local areas.
- 1.11 A Literature Review was completed which sets out the framework for a future Community and VCSE Development programme, based on the existing programmes and current strategic priorities.
- 1.12 ESCC is currently engaging on the new framework and will be building the feedback into the new programme.
- 1.13 Together these programmes support the strengthening of a shift to more person and community-centred approaches to health and wellbeing. The key components of the new Community and VCSE Development Programme will help to embed these ways of working, improve the health of the population through mobilising assets within communities, encourage equity and social connectedness, and increase people's control over their health and lives.
- 1.14 ESCC is now able to draft a Service Specification and proceed with the necessary next steps to procure a new programme. To do this, confirmation of an indicative budget and delegated authority to proceed will be needed.

2. Supporting information

- 2.1 The Literature Review identified the core components of existing projects and contracts which should form the basis of the future Community and VCSE Development Programme and proposes a framework for the development programme.
- 2.2 The Literature Review presents a framework that benefits people, communities and hyper-local groups and organisations. The intention is for this framework to be the basis for the Service Specification for a newly commissioned Community and VCSE Development Programme. However, this framework could also be adopted by the public and VCSE sectors as the basis for the development and delivery of other programmes and contracts.

- 2.3 The co-development team is now undertaking engagement activity that presents the framework and seeks the views of various cohorts from the VCSE and public sectors. Feedback from this engagement will inform the final Service Specification. This hyper-link will take you to the [Engagement Document](#).
- 2.4 Whilst this is taking place, ESCC officers are preparing an Equality Impact Assessment (EQIA) and Data Protection Impact Assessment (DPIA) for the programme which will be subject to standard approval processes.
- 2.5 As this new programme is proposed to be replacing or superseding two existing contracts, with a new resource envelope tailored to meet financial challenges, the options for structuring the programme have been considered.
- 2.6 The preferred option is to tender for 5 lots, with a standard set of contract terms, which mirror District and Borough (D&B) boundaries, as this approach:
- recognises that Asset Based Principles and VCSE Infrastructure are on the same continuum and present a connected model of support and development across all geographies of East Sussex.
 - ensures that the available resource envelope can be deployed in a cost-effective manner enabling better resourcing of the framework.
 - Aligns to Integrated Community Teams (ICTs) boundaries, creating relationships that benefit the development of integrated health and care offer within local areas.
 - Increases the potential for District and Borough Councils to work closely with providers and public sector partners on addressing local needs and building assets.
 - Creates opportunities for collaborative working between and within sectors to address specific or unique local challenges facing people, communities and groups.
- 2.7 With the existing contracts ending at the end of this financial year, there is a need to begin the procurement process in October 2024 and good progress is being made to achieve this.
- 2.8 ESCC is now at a point where next steps depend on the agreement to procure a Community and Voluntary Community and Social Enterprise Development Programme and agreement of the indicative budget available, to begin the procurement process in the second week of October 2024. There is a recognition that a final confirmed budget is subject to the completion of the Reconciling Policy, Performance and Resources (RPPR) and Council budget-setting process.
- 2.9 An indicative budget would enable tender submissions to be operationally realistic and allow for assessments to follow a bid integrity process.
- 2.10 The budget proposed to use for procurement is £539,000 per annum, funded through the Public Health budget. In previous years there has been an investment from NHS Sussex in GIS contracts. The investment from NHS Sussex in 2025/26 for the new programme is to be confirmed by NHS Sussex. It is proposed that the contract is let as a 3-year contract, with options to extend
- 2.11 In arriving at this proposed budget, significant reductions have been made to current funding of the 3 existing programmes (GIS contracts, Making it Happen and Community Networks), to support the RPPR process.
- 2.12 If ESCC does not go out to tender according to the planned procurement timeline, other options will need to be considered, which are less favourable and would include:
- Reaching the end dates of existing contracts. This will result in a loss of staff in the VCSE and considerable uncertainty for those providers, as well as a loss of service to local communities and community groups. It will be much more challenging to reinstate this support at a later date, and therefore this option is not recommended.
 - Extending existing contracts, by 3-6 months. This may also result in some loss of staff and some ongoing uncertainty with incumbent providers. It will also delay savings and therefore increase budget pressures, and therefore this option is not recommended.

3. Conclusion and reasons for recommendations

- 3.1 The co-development of the Community and VCSE Development Programme is progressing well, with a framework that partners agree could form the basis for the new programme and could have wider uses and benefits.
- 3.2 The blending of existing programmes into the new programme would be best suited to the letting of 1 contract and be split into 5 lots based on D&B boundaries.
- 3.3 The indicative budget will be funded from the Public Health fund and represents a significant reduction in funding, contributing to the RPPR process.
- 3.4 The Lead Member is therefore recommended to:
 - 1) Approve the procurement of a Community and Voluntary Community and Social Enterprise Development Programme from 2025;
 - 2) Approve the allocation of up to £539,000 (per annum) from the Public Health fund, subject to confirmation of the available budget through the Council's budget setting processes; and
 - 3) Delegate to the Director of Adult Social Care and Health authority to take all actions necessary to procure and implement the Community and Voluntary Community and Social Enterprise Development Programme.

MARK STANTON

Director of Adult Social Care and Health

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LOCAL MEMBERS

All Members.

BACKGROUND DOCUMENTS

None