

Dorset VCSA

Assembling the Assembly: Event Feedback

In **March 2024**, a number of VCS representatives gathered together at NHS Dorset's HQ in Dorchester to start to engage in a workshop looking at the development of Dorset's Voluntary and Community Sector Assembly (Dorset VCSA).

The story of the Assembly's formation was shared and a number of questions were set out to be discussed among those attending.

The aim of the day was to sense check the systems that will be used to run the Assembly and help to involve the VCS within the new Integrated Care System for Dorset.

The four areas under discussion were: communication, networking and engagement, representation, and collaboration.

We discussed the following questions:

- **What works?** The things that are great examples are...
- **What doesn't?** The things that aren't right are...
- **What's available?** The things we could build on are...
- **What's missing?** Things would be even better if...

These are the things we heard.

What works?

The things that are great examples are...

Participants considered that the VCS had the following strengths: Networks and networking skills, building relationships in order to influence, identifying common ground etc.

The VCS is good at taking people on journeys, not just one-off interventions.

Transparent and trusting cultures, in which collusion is absent.

We need to continue developing relationships within the VCS and a shared vision.

The Assembly being clear about what its aims are and aren't, the Assembly has to stay in its lane.

The workload of the Assembly also has to be managed, there are other channels which involve the statutory sector working with the VCS on specific issues, we do not want to divert everything through the Assembly, otherwise it will not be able to operate effectively.

The Assembly should not always be the only or easy way into the VCS, we need to be able to push back on issues which we don't think are relevant.

It is about the VCS working better together not just working together. We have to be careful not to create a closed shop.

Consistency works.

We need to produce an "Arrowhead" document outlining concisely the purpose and values of the Assembly and the benefits of the VCS.

A board member explained the role of the Programme Director who is to be recruited for the Assembly, the group approved of the fact that this is not a leadership role, it is about facilitation.

Growing things organically is good. Starting small. Staying close to communities and their needs and capability.

Adapting to changing needs and contexts is at the heart of the VCS.

Agility and speed are key characteristics of the VCS.

What doesn't work?

The things that aren't right are...

Trying to achieve outcomes which have been developed by for example commissioners but without the input of VCS organisations. We need to have more flexibility with outcomes.

It is onerous for the governance board and particularly the representatives from the smaller organisations represented on it, working on Assembly issues; they have had to commit a lot of their time.

Staff changes in the NHS.

The VCS is still undervalued within the statutory sector. Do we define the agenda? Where are we best placed to make a difference, VCS representatives is asked to comment on issues which are not directly relevant e.g., the Ambulance Service, we should not do this. However, it was also recognised that it is difficult to decide on what is left out. It was agreed that pushing back at times is beneficial the VCS cannot align itself entirely with the ICB.

The VCS needs to keep its eye on the bigger picture and not get bogged down in detail.

Whatever the Assembly does, it needs to define it by considering whether the resulting activity will benefit the community.

VCS representatives can be isolated and not supported; it should be about a stronger assembly. Partly because is it possible to ever represent such a varied sector.

There are different definitions of prevention, and we have to move away from it being defined as not using an existing statutory service.

The VCS needs to take responsibility and get rid of the “pyramid”.

We need to move away from tokenism in our involvement in partnership working. The partnerships need to reflect parity between the VCS and other partners.

It hasn't been easy for smaller organisations to connect to others in the VCS and into the wider public sector agendas. People don't know what's happening or how to get involved.

Resourcing for VCS activity is often cyclical, somewhat artificial (always looking to fund something new) and an ongoing headache that removes capacity for delivering support and activities, and short term. This limits resilience and the ability to plan for the future.

What's available?

The things we could build on are...

There needs to be a place-based approach, the ICB recognise that neighbourhoods are important. There are strong local networks in towns like Bridport and Sherborne, these need to be used and built on organically from the ground. Also, local leaders need to be supported.

We need to use existing resources, hubs, organisations and keeping the process flexible and informal.

The group saw the VCS like a galaxy with various gravitational pulls, to assist with this larger VCS organisations should consider how they can help this agenda. We should be celebrating our diversity, the breadth of the VCS.

The Assembly has a role with interpreting issues for the rest of the VCS.

We need to take a strengths-based approach to engaging the VCS, not duplicating work done already by VCS organisations and groups (particularly specialists). There are lots of existing groups, networks, and organisations that need to be included and invited to support this work.

Working from the ground up is key. Listen and learn from communities.

Getting “upstream” with issues. Public sector is often about managing crises, but the VCS can support a more holistic and wellbeing-positive agenda that can reduce crises.

To build strong leadership around issues that the VCS is experienced in and leading on to help set the agendas within the VCS and with partners.

Increasing the social capital of activities with partners, both in the public and private sector.

We need to build on our shared stories. Sharing good experiences and sharing our worries. There are some examples where this happens, but we could do more.

What’s missing?

Things would be even better if...

More focus on inequalities in outcomes needs to be achieved.

The VCS and the NHS together need to develop more effective ways of demonstrating the value of preventative work, it is not just about making the case but when to make the case.

We need to consider the support for the representatives, e.g., what training do they get, mentoring and succession planning.

Also, we need to agree on the values for representation.

And how the Assembly engages with smaller organisations.

We need to widen this process out, so it is not just involving the core group. The core group and the Assembly itself is not necessarily about leadership for the VCS it is about facilitation.

A mapping exercise was suggested, not of VCS organisations but how the VCS is currently organised, e.g., what other networks exist including geographic locality networks, how do they feed into the Assembly or not.

There is a big opportunity to support one another, rather than compete with one another, and create ways of working that increase resilience for everyone in the VCS.

Sharing expertise and resources not only with the VCS but also with our public and private sector partners – e.g. training.

Governance for the work of the Assembly and the VCS isn’t just about turning up at meetings. It needs to be proactive and responsible to the wider VCS and population of Dorset.

We need space to surface issues. The VCS is often the “canary in the coalmine” and spots emerging issues before others. We need more places to share these experiences and work on them together.

There is huge interest in and enthusiasm for change and working together to solve issues and make life better for residents in Dorset.

What next?

The feedback from this event, and from extensive conversations and engagement with the VCS during the formation of the Assembly, has now set the foundations for the operating model of the Assembly.

Listening to and learning from the VCS and our partners, we have set up four areas of work for the Assembly to support the VCS and improve our work together with partners across Dorset, both in the public and the private sectors. These systems have been through the scrutiny of the Governance Board and are now published here on the Assembly website. These will enable the VCS to continue to develop its voice, involvement, and influence within the Integrated Care System for Dorset, and improve the lives of all the residents in Dorset.

This ambition will be supported by the Assembly around these four areas: communication, networking and engagement, representation, and collaboration.

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