



# Common Purpose Common Cause

Southwark's Voluntary and Community Sector Strategy

2017 – 2022

# Acknowledgements

Thanks must go to the members of the VCS Strategy Working Group that was formed to take forward this work. The group oversaw the development of the strategy.

The tripartite membership enabling a coordinated approach to the development of the strategy.

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## Foreword

**Southwark is a great place to live, to learn, work, volunteer and get involved.**

We have a proud history, a solid sense of community and a great ability to transform and renew - sometimes against the odds. Our borough brims confidence and ambition. Our strengths are those of tolerance, cohesion and diversity. And the voluntary and community sector (VCS) embodies all of this, alongside a determined independence, fairness and energy, to deliver the very best for residents in Southwark. That's why it's hard to find anyone who doesn't recognise the value of the voluntary sector in Southwark. That's also why the contribution of this sector is crucial to the future shape of the borough and the wellbeing of its people.

Recognising the changing world, we all live in now, and making good on a Council Plan commitment to enhance the work of the voluntary and community sector, in 2014 the Southwark Health and Wellbeing Board established an independent Early Action Commission. The commission focused on tackling the root causes of preventable problems that, if left unchecked, can ruin lives and trigger demands for costly services. The contribution of the VCS is vital to preventing this happening.

Published in 2015, the Commission's report was welcomed as an important contribution to putting prevention and early action at the heart of service delivery. More specifically the Early Action Commission identified four goals that deliver better outcomes. These were "resourceful communities", "preventative places", "strong, collaborative partnerships" and "systems geared to early action".

The Commission celebrated the positive work of the voluntary, public and private sectors that helps people flourish, reduces demand on costly public services, and creates the right conditions for prosperity and well-being. Despite this good work all partners recognised there are opportunities to be bolder and to go further by making early action the 'norm'.

In light of this, we saw a need to develop a new and different VCS strategy for Southwark, which embeds early action in service delivery; harnesses the unique position and relationships the VCS has in building community resilience; and creates the conditions for collaboration with public and private sector partners to improve the lives of all Southwark residents.

This strategy is ambitious and our goal is to help the VCS to thrive and meet the needs of all our communities.



**Councillor Barrie Hargrove**

**Cabinet Member for Communities and Safety**

# Definitions

**Voluntary and community sector (VCS):** Some voluntary organisations are primarily involved in specific types of service delivery and have much in common with housing and health services. Other community organisations are not involved in providing the direct delivery of a service, but are instead focused on community development and community capacity-building, through advocacy, volunteering and citizenship. Many community organisations bring people together through a common affinity of place, interest, culture or faith. The common denominator is the pursuit of social change, not profit making and benefiting from significant degrees of social action.

**Social action:** Covers people getting together to support a community project or initiative in their local areas, e.g. setting up a new services or amenity to help residents, getting involved as a volunteer, or organising a community event e.g. a street party.

**Public sector:** This term encompasses both Southwark Clinical Commissioning Group (CCG), Southwark Council and other public agencies.

**Local Care Networks (LCNs):** Southwark health and care providers (including Healthwatch Southwark and the VCS) have formed Local Care Networks. Through these formal networks, providers can look at the range of services that they provide for the local population and see how they can work together to better join up care and improve health and wellbeing outcomes. In Southwark, there are two LCNs (north and south), which meet monthly.

**Social value:** Involves looking beyond the price of each individual contract and looking at what the collective benefit to a community is when a public agency chooses to award a contract. Social value asks the question: "If £1 is spent on the delivery of services, can that same £1 be used to also produce a wider benefit to the community?"

**Social investment:** Means 'finance' provided for the VCS, which the investors expect to both get back and to create social impact.' The social investors providing this money include specialist banks, individuals, and charitable trusts, as well as organisations and funds that have been specifically set up to make social investments. Each has

different motivations but what all social investors have in common is: they expect to get their money back, often with interest. Investors also want to see positive social change take place because of their investment. Social investment is not a grant or a donation.

**Co-production:** Involves people who use services or live in a neighbourhood being consulted, included and working together from the start to the end of any project that affects them.



# Why do we need a voluntary and community sector strategy?

The way the public sector and the voluntary and community sector (VCS) work together in Southwark has changed significantly since the last voluntary and community sector strategy in 2007; but all of us agree that it should change further.

This strategy is guided by a compelling vision and a clear, common purpose:

To support a sustainable, confident and resourceful voluntary and community sector that can work alongside the public and private sector to deliver the best outcomes for Southwark residents.

The strategy assumes that austerity, growing demand and complexity in the needs of service users are driving us all to evolve, adapt and innovate. The challenge is, given constrained resources and a rapidly changing environment, how can we enable and support a strong VCS that can provide solutions and different approaches to support Southwark residents?

We believe there is a way this can be achieved through community focused services delivered at a local level and focused on the needs of the local population – delivering services that work for the individual, the community and the public sector. That is why we need a new voluntary and community sector strategy that sets out this common purpose and common cause.

To achieve our vision, we need a new relationship where the public sector, in partnership with the VCS, enables and supports new approaches to secure integrated, more efficient and community-led outcomes. What the strategy does not do is set out commissioning intentions or specifics about what will and won't be funded. That comes later.

This strategy, as well as looking to create more sustainable and productive relationships with commissioned services and larger organisations, will also value the work of the grassroots community sector. We will ensure that these groups are enabled to contribute to the overarching outcomes that we are seeking to achieve for the benefit of all communities in the borough.

Therefore, we have focused on two key strategic objectives to achieve our overall vision:

- **To improve outcomes for residents that reduces and prevents future demand on high cost, high demand services.**
- **To sustain and build strong, cohesive communities where no one group or community is left behind.**

Beneath these objectives sit four priorities that will enhance the work of the VCS to achieve our collective goals. These priorities concern the areas of work which over 200 participants (see Appendix 1) at our listening events told us would have the biggest impact and bring about change where it is needed the most.

# How the strategy was developed

This strategy was developed through a three-way collaboration involving the VCS, Southwark Council and Southwark CCG.

The timing of this co-produced strategy is important as Southwark Council refreshes its Council Plan to achieve a fairer future for all, including incentivising healthier lifestyle choices through providing free swim and gym for all residents.

The Council has also worked jointly with NHS Southwark Clinical Commissioning Group (CCG) to set out a fresh Five Year Forward View of health and social care to 2021. Its purpose is to improve life expectancy and reduce health inequalities in Southwark, by helping more people to take greater control of their own health and ensuring local services are brought together and designed around local population need.

From the outset, all three partners in this three-way collaboration agreed that this strategy should set out a direction of travel that articulates how we can be more than the sum of our parts.

An extensive listening exercise was co-produced and although you never start with a blank bit of paper we were determined to understand what the VCS wanted and expected from this new strategy. We held four 'listening events' where over 200 people attended and participated (see Appendix 1 for a list of attendees). We listened to the opportunities, barriers and challenges facing the voluntary and community sector in Southwark.

The VCS Strategy Working Group then considered the priorities people said were most important to make the changes needed locally and we hope these are reflected in this strategy.

## Our starting point

In developing this strategy, several assumptions underpinned our thinking. These were:

- Tough financial challenges mean we all have a responsibility to reduce duplication between services, commission efficiently and reduce demand on intensive interventions (e.g. hospital and care homes), and invest in enabling people to

have more control over their lives and communities;

- There will be no new money in the future and we must start thinking about shared investments; not individual pots of money;
- A stronger focus on outcomes for residents, working together to improve outcomes and provide a better experience of engagement;
- Ensuring Southwark is a safer and fairer place, where everyone can fulfil their potential and access the opportunities that living here presents - and no-one gets left behind;
- Knowing that there are people affected by complex social issues like mental health or domestic violence, we need to work together to develop new interventions that improve the life-chances of those at greater risk;
- Mobilising community action and making the best use of community resources, universal services, community capability and volunteering, local knowledge and spaces;
- The VCS is independent and is extremely diverse, meaning a one size fits all approach is often inappropriate; it was born out of communities and has a long history of supporting communities and maintaining wellbeing;
- The strategy supports the public-sector equality duty and promotes community cohesion;
- The community sector has a significant role and contribution to play in place shaping through its knowledge of neighbourhoods and engagement methods;
- There is a responsibility on all for the proper use of funding and resources, with an emphasis on accountability, transparency and fairness.

## How the strategy fits in with the overall strategic direction of the Council and the Clinical Commissioning Group

The priorities set out in this strategy are aligned with several the Fairer Future promises set out in the Council Plan as follows:

- **Promise 2:** Free swimming and gyms: We will make it easier to be healthier
- **Promise 5:** Nurseries and childcare: We will help parents balance work and family life
- **Promise 6:** A Greener Borough: We will support environmental initiatives
- **Promise 7:** Safer Communities: We will make Southwark safer
- **Promise 8:** Education, employment & training: We will support residents to develop their skills and confidence, including digital inclusion
- **Promise 10:** Age Friendly Borough: We will help residents get the best out of Southwark whatever their age

The priorities of this strategy also support the following priorities of the Southwark Clinical Commissioning Group's Five Year Forward View:

- Increase healthy life expectancy
- Reduce health inequalities across communities
- Empower people to live well and to take control of their lives
- Achieve this transformation by:
  - Focusing on populations and place-based Local Care Networks rather than traditional organisational silos
  - Focusing resources on activities which create the highest value
  - Focusing on co-producing good health in partnership with people; thinking about how care is delivered not just what care is provided.





# The VCS in Southwark

It is important to recognise that the local voluntary and community sector is not a single, easily defined entity. It is extremely diverse and in all its forms makes up a vital part of the social fabric of Southwark.

There are an estimated 1,200 registered charities in Southwark; 81% have an annual income of less than £500,000. There are an estimated 4,000 'below the radar' grassroots community groups in addition to the more formal, regulated sector.

The models and ways of operating within the VCS are as diverse as the scale of the sector itself. Grassroots organisations run on a voluntary basis make up a large section of the sector, they contribute vitally to communities being empowered, supported, connected and healthy, but often, as volunteer run, work in a very different way to the more formal sector.

The VCS both builds and draws on the capacity of communities to support themselves and the most vulnerable. It enriches lives and makes Southwark a healthier, safer place.

Just under a fifth of people (18%) had been involved in social action once in the last year (2015). 36% of people were aware of people in their areas getting together to support a community project, but were not involved in it.

The VCS supports local economic wellbeing. Like the public and private sectors, the VCS spends money locally, contributing to the local economy. It provides paid employment so that people can support themselves (as well as inspire others into employment through social enterprises). The VCS also develops the skills of volunteers as well as service users, contributing to better job prospects, personal wellbeing, and a diverse economy.

Almost six in ten Southwark residents aged over 16 have volunteered in the last twelve months (56%). This equates to an estimated 131,544 people. Volunteers contribute over 5 million hours each year in Southwark. If they were all paid the London Living Wage it would cost in excess of £47 million per year.

The VCS makes resources go further. Funds contributed by public bodies lever in other money from trusts, businesses and individuals, and many voluntary organisations also generate their own funds. The VCS benefits from donations in kind from other organisations and the value of volunteering has no parallel in any other sector. Distinct from the private sector, the VCS uses all of its resources (directly or indirectly) for the public benefit rather than to make profit for shareholders.

For every £1 invested by Southwark Council in the VCS locally, a further £5 is generated from other sources. In 2015/16 Southwark Council distributed a total of £4.2 million in grants and £15.3 million in contracts to the voluntary and community sector.

The VCS has other distinctive characteristics which bring extra value to its work. For example, community organisations are often run by local people who volunteer their time. They have a personal knowledge of specific needs, they may be trusted by hard-to-reach groups who find it difficult to engage with the public sector, and they could act as a 'critical friend' to policymakers across the public sector. They help people to help themselves as well as providing community focused activities.

Importantly, VCS organisations not only help deliver public services, but also go beyond the minimum of what must be provided by law. As well as providing support to those in crisis who don't know where to turn, they often work in a preventative way, avoiding additional costs to the public sector in the future.

61% of the VCS is working with the general population and/or specific groups of people at risk to prevent problems from arising. One in three is also working with those who have serious difficulties or face crisis.



# Key messages from the Listening Events

A huge amount of information, suggestions and challenges emerged during the development of this strategy. It is impossible to list it all here but we have attempted to condense it into a short summary of what participants said. However, in each section of this strategy that looks at the priorities we will pull out specific references and comments from the listening events.

- **Think local:** ensure the local sector is first and foremost; invest in it and ensure a diverse market.
- Ensure a **range of voluntary opportunities** are open to people both in and not in work – delivered locally by local people.
- Do we have effective services for local people and **do we have the information** needed to provide them?
- Sustainability needs to be built into the strategy. **Outcomes need to be delivered in collaboration.**
- Strategy should be built on **mutual trust, respect and shared values**, with a better understanding of which each is trying to achieve.
- Focus on joint working and community wellbeing. Evidence a **holistic approach and contributions to prevention.**
- Uniqueness of the VCS: **not a substitute for statutory services.** It has its' own qualities, skills and experience. Recognise that the borough is changing and this brings challenges.
- The strategy should lead on an **understanding of what each partner is good at** and play to the strengths of each, for the common good.
- All partners are equal and should show dignity and respect. The **passion and commitment of the VCS** should be recognised.
- Understand the **complex relationships** between the sectors. The strategy should set out the process of how we work together to identify problems and find solutions.



# What will success look like?



To bring about the partnerships and transformation that is required to realise our ambition for this strategy we have identified several priorities. To make a real difference these priorities must be pursued together and build on the good practice already in place.

In five years, we will:

Create better partnership working to improve outcomes for residents

**We will know we have been successful if in five years** we can measure improved outcomes for residents because of greater partnership working and co-production between the public sector, the VCS and residents.

Improve commissioning and grant-giving to focus on outcomes

**We will know we have been successful if in five years'** residents and communities have a greater say in the design and delivery of services and new ways of working and new models of delivery are encouraged and supported.

Make better use of community assets to revitalise communities and create preventative places

**We will know we have been successful if in five years** more assets are community led and can demonstrate their impact in relation to improving well-being and community cohesion.

Enable and support more resilient communities that are connected and more resourceful

**We will know we have been successful if in five years'** residents are supported and encouraged, through social action, to have more control over their lives and their communities.

# Making sure it happens

**A strategy only comes to life if it is implemented.**

To make sure this happens, the public sector and the VCS through an existing Liaison Group will retain oversight of the strategy and take responsibility for ensuring the different elements are implemented, through an implementation action plan.

This group will be made up of VCS representatives and officers from Southwark Council and Southwark CCG. They will hold each other to account for the delivery of this strategy.

The implementation action plan will be reported on annually to Southwark Council's Cabinet and the CCG governing body, and will be presented at Community Southwark's Annual General Meeting. Specific actions will be monitored by the Council/VCS Liaison Group.

We have identified several work streams that we will pursue (in collaboration) to implement this strategy:

- Information and intelligence
- Digital integration
- Commissioning and grants
- Community assets

The groups leading on the development of these work streams will make recommendations (that will form the overall implementation action plan) directly to the Council/VCS Liaison Group.

Too often strategies are produced with people investing a lot of time shaping them - but the outcomes of its implementation are never communicated. We will take a different approach using Community Southwark as our main communication partner. We will report quarterly on what has and hasn't happened and what we plan to do next.





# Delivering the strategy

To achieve the overall vision of this strategy we have identified two key strategic objectives:

**To improve the quality and outcomes for residents that reduce and prevent future demand on high cost, high demand services; and,**

**Sustain and build strong, cohesive communities where no one group or community is left behind.**

These strategic objectives are underpinned by four priorities which will enhance the work of the VCS to achieve our collective goals:

- Better partnership working to improve outcomes for residents
- Improved commissioning and grant-giving to focus on outcomes and be more collaborative, and community-led
- Better use of community assets as a route to revitalise neighbourhoods and create preventative places
- More resilient communities that are connected and more resourceful, where no one group or community is overlooked

We shall look at each in turn, describing the context and how we hope to deliver on these priorities.

## Better partnership working to improve outcomes for residents

The desire to find new ways of working must put co-production and maximising social value at its core. This is what the workshops told us was the most important priority. Many people during the listening events spoke about the need for improved connections between organisations; with a greater understanding of what each other's purpose.

This is positive, but it is also a challenge. It tells us that there is a lot going on locally, that things are dynamic and that keeping up to date with changes is challenging. This is a description of an environment where managing relationships and information requires time, skills and resources. It involves finding ways to support desirable behaviour change so that organisations can face outwards and find what they need for the best interests of

Southwark residents. Taking steps to support this appetite for improved connectivity is a welcome challenge. Listed below are the ways in which we hope to meet these challenges:

**We want to see changes in how we work together and embed the principles of co-production in everything we do to get the best out of working together, and;**

**We want to encourage the VCS to work more in collaboration and to provide mutual support to help improve outcomes for residents.**

To achieve these aims we propose the following principles of engagement that all partners will sign up to be held accountable for.

### The public sector will:

- Commit to early engagement and involve the VCS and residents in the design of public services – co-produced services are the norm
- Recognise the social and added value that the local VCS can bring and consider new models of delivery and ways of working
- Be prepared to fund what works – not just new or 'innovative' approaches
- Establish clear and realistic timescales and deadlines and adhere to them
- Treat the VCS as a respected partner and transform the traditional resource power dynamics in a funder/provider relationship to enable more effective joint problem-solving;
- Recognise that if the VCS is to work more collaboratively and share accountability, investment is required to support the sector to achieve this
- Support and enable a new approach, based on collaboration that goes across organisational boundaries, to be better joined up in its approach to providing person-centred and community outcomes;

### The VCS will:

- Respond to the shift towards outcomes-based commissioning, and focus on demonstrating

outcomes effectively, appreciating the need for measurability in public sector contracts

- Be prepared to readily share information with the public sector to inform their commissioning, engage in co-production, and help to build a picture of the need that exists in the borough
- Share information and resources with each other, work in partnership and focus on the potential for collaboration, as opposed to developing and delivering services unilaterally
- Be ready to think innovatively and laterally about ways to deliver services and participate in new and emerging models of service delivery
- Recognise the downward pressure on costs to commissioning services and the new approaches that will be required to deliver services from fewer resources, but use its independent voice to highlight the needs in communities.

These principles are just the starting point but they will act as the foundation for all partnership working. However, co-production as described in the Early Action Commission must include a wide range of voices. For example, when thinking about new services – such as support for older people - it is important there is early and consistent engagement with housing, planning and policy and public health, amongst others, to help shape those developments.

**We want to see more responsive and joined up ways of working using existing structures (such as the Local Care Networks). Joining up with the aim of harnessing the power and knowledge of local communities to help mitigate against the impact of reductions in local authority and NHS resources.**

We will put in place a more agile, skilful and responsive local system that will harness the power of local communities.

We will work to ensure that the VCS has greater access to data held by the council and NHS Southwark CCG and that an open data approach increases accessibility to information, while taking full account of the safeguarding and confidentiality of personal information.

In addition, we will, support and enable more co-located working and join up on the monitoring of the impact of preventative services.

**We want to enable and foster greater engagement with the business sector. This**

**would lead to more ‘placed based giving’ and ‘crowd funding’ initiatives.**

We all recognise that traditional forms of funding are reducing and this strategy sets down a marker for a new way of considering how we connect business with local communities and residents. Local businesses (both large corporates and SMEs) are as much a part of the community as anybody else, and vital to local economic and social sustainability.

We will support schemes such as Southwark Giving and crowd funding initiatives to work in partnerships with businesses. We want to connect with the private sector so that they can donate their time, talents or resources to make a difference to the lives of Southwark residents.

**Improved commissioning and grant-giving to focus on outcomes and be more collaborative, and community-led**

At the listening events the issues of commissioning and grant giving generated a lot of comments and suggestions. For example, participants wanted to see joint problem-solving at the heart of the commissioning process and to consciously tackle complex issues that we are unable to solve using the traditional funder/provider relationship. There was a strong belief that a mixed economy of grant-giving and commissioning contracts should be maintained and developed.

There was also a desire to explore the options to bring services together either through lead contractor arrangements or through alliance contract approaches. The implication being a move away from a system with many separate contracts and towards inclusive contracts for defined segments of the population that cover all of the various physical health, mental health and social care needs of people within that group.

Finally, participants want to see the development of a wider range of funding arrangements that permit innovation alongside greater stability and security for local VCS organisations that can deliver impact.

Listed below are the ways in which we hope to meet these challenges:

**We want a fuller involvement of stakeholders in the commissioning cycle. To achieve this, we want to develop collaborative commissioning approaches. This will mean greater focus on outcomes.**

The local delivery of outcomes needs to be developed and agreed with many stakeholders engaged in the process. This means going beyond the usual organisations and partners, to include local communities and citizens. We will develop a joint commissioning approach based on the following principles:

- Listening to the voice and experience of people who have used services and bring this into the design and delivery of services to ensure better outcomes;
- Local Area needs analysis as the basis for commissioning decisions, for example, through Public Health information analysis and the collation of service demand information from VCS monitoring data;
- Collaborative working and supporting the development of consortia and other models of partnership working.

Collaborative commissioning is an approach that puts citizens and outcomes at the centre of commissioning and creates stronger relationships between key stakeholders. It looks beyond cost and value for money to put greater emphasis on the social costs and benefits of different ways to run services.

We will create a model of 'outcome-based commissioning' which will open many opportunities to working in partnership across sectors. There will always be a level of expectation and targets set from central government for local areas to deliver, for example through NHS England in relation to NHS Southwark CCG commissioning performance. This level of outcome will continue to set important elements of the strategies to be implemented locally. However, there is scope to look at how those high-level outcomes are translated into action locally.

We want to work together to design and deliver better interventions that allow us to work on solving complex and difficult problems that might not be solved through single service interventions. For example, providing support for people living in the community with long-term health conditions which may mean that they remain at risk of losing their tenure in the community, unless there is a co-ordination of effort across several agencies.

We will work closely with Procurement colleagues to design the most appropriate way to commissioning services (grants versus contracts) depending on local conditions.

We will redevelop the VCS Approved Providers List which will be use across all partners during commissioning processes. The redevelopment must take account of smaller organisations and be proportionate in its approach.

**Where necessary we will invest in supporting local partnerships or consortia to develop capacity and skills to deliver outcomes for residents.**

We will pump prime activities and new ways of working in VCS organisations where they can demonstrate an approach that can have an impact. This method of working will be particularly relevant regarding collective accountability envisaged under Local Care Networks. However, we will commission based on the needs of the local population around health and wellbeing rather than the operational needs of provider organisations.

**We want to change how we use contracts and grants, with a balance between longer funding cycles, and one-off / short term support for innovation. This would help develop different, more efficient and more impactful services for residents. We want to agree a set of core outcomes (Common Framework) for the benefit of the whole community of Southwark against which impact is measured and aligned against Council and CCG plans.**

We will implement a common outcome framework. Each VCS organisation receiving longer-term funding from Southwark Council and NHS Southwark CCG agrees to work towards a set of core outcomes for the benefit of the whole community of Southwark and reports on its impact. These would be drawn from a basket of outcomes. In this way, each a common strategic approach addressing the needs of Southwark are implemented and has greatest impact.

The Common Framework could include the following areas:

- Safer communities including Safeguarding (making every contact count)
- Maximising the income of everyone we work with
- Making sure each person is registered with a Southwark GP
- Improved understanding of rights and responsibilities
- Each person has a named contact with the voluntary sector organisation

- Each person receives information on local core strategic priorities (e.g., healthy eating, free gym and swim access, -wellbeing, safeguarding)
- Each person has the opportunity to be involved in volunteering
- Each person's experience of being involved with the organisation is captured to help improve its approach.

In agreeing and developing a common outcomes framework we hope all those involved can understand, work towards and achieve. For all organisations to have a stake in delivering against a common, agreed set of outcomes will enable a more cohesive partnership to form all working to the common good of local people. This will mean breaking down high level outcomes into smaller chunks that individual organisations then work towards. The role of commissioners will be to bring organisations together around a specific outcome. The impact of political cycles, both local and national, needs to be recognised.

Commissioning cycles need to be better understood so that partnerships can work through changes of direction and circumstances, for example, the reduction in funding to the local authority on work programmes.

We will support the use of social investment models to help lever in additional resources to the borough. The public sector, under the right circumstances, will work in partnership with the VCS to make the most of these opportunities.

### **We will develop a longer-term outlook in terms of grants and commissioning**

- Longer funding periods for grants and contracts (of between one to four years) are agreed with VCS organisations working in Southwark- with one year grants for innovation and with more risk - would mean that outcomes are easier to track and provide evidence for;
- Projects have sufficient time to achieve agreed outcomes;
- Early action and demonstration that future needs are being reduced will be incentivised in the commissioning process;
- Allow sufficient lead-in time for innovative projects and up-front investment to have an impact;
- Commissioners to move towards more facilitative commissioning, with less demand for short-term outputs.

**We want services to be built around the needs of the local community. We also want services to be built around recognition of the value and impact of locally delivered services with local provision being the default position. Using digital technology, we want to transform how we serve and enhance the lives of people in our community so they receive quality information and access to services.**

We will support effective person-centred signposting across the system and explore how we can collectively support and enhance new ways of working across the VCS and public sector, for example into social prescribing, personal budgets and access to VCS services. We will explore both digital and non-digital solutions.

### **Better use of community assets as a route to revitalise neighbourhoods and create preventative places**

The listening events highlighted the need for work between local estates, commissioners and the VCS to develop a comprehensive and coordinated approach to affordable property across the borough. It was felt this was important to secure the tenure and sustainability of the VCS to allow it to work within local Southwark communities and neighbourhoods, including working through the opportunities and responsibilities around asset transfers.

Another clear message from the listening events was the voluntary sector's recurrent frustration at accessing information about premises.

Finally, there is a real desire across the sector and particularly the in new and smaller organisations to build knowledge about the running of buildings. There are escalating pressures on occupiers and landlords to ensure that their premises comply with an expanding range of statutory requirements arising from health and safety considerations; inevitably with a corresponding price tag (and potentially serious liabilities for non-compliance).

Listed below are the ways in which we hope to meet these challenges:

**We want to harness the value of the borough's outside spaces to improve wellbeing, engagement and community cohesion.**

**We want to develop an approach to enabling asset transfer to take place in the right circumstances.**

By preventative places we mean places – neighbourhoods and groups of neighbourhoods across the boroughs – where local conditions help to make communities more resourceful and support early action. Local conditions include physical and economic factors that influence the way people feel about living in a place and the opportunities they find there to lead fulfilling lives and to help themselves and each other.

We want to create more opportunities to use parks, open spaces, schools, underused public buildings, and empty properties for connecting communities, building networks, and doing things together. We also want explore how the use of other community spaces, such as tenants and resident halls, community hubs and settlements and faith based groups, can be used in creative ways to achieve this aim.

This is a crucial means for people to take more control in their communities. We will take stock of existing places and spaces to find out how they are used, how often they are used, and by whom, and link up with residents and groups to explore what could make them more accessible, inclusive and useful. We will explore ways to review rules and regulations to remove unnecessary barriers to local activities and use of public spaces by VCS organisations. As far as possible, we want to enable local people to take control over such spaces.

We want to look at how the council can support the sector in understanding how best to manage the potentially costly property assets they use and prevent them becoming an unmanageable drain on the dwindling resources that might otherwise be channelled into delivering services.

**We want to ensure that the Council and NHS's property portfolio is deployed effectively to take advantage of opportunities for VCS organisations to share premises, for mutual benefit and ultimately to improve services and therefore outcomes for residents.**

We want to particularly focus in underused buildings, on a temporary basis pending redevelopment, and where there is scope to share space.

Whilst the council isn't the only landlord in the market, it does have an important role to play in helping to understand gaps in the market and facilitating provision. For example:

- The Council's regeneration programmes are clear to see. Nevertheless, they may be accompanied

by a net loss of the types of premises that have traditionally accommodated the VCS. We will explore how planning obligations can be used to enable the sector to access affordable, fit for purpose premises in new build developments whilst acknowledging the competing demands on this source (and its dependency on an active housing market);

- We will identify and promote co-location opportunities for VCS organisations to further develop neighbourhood and thematic clusters of interest;
- Exploring ways in which non-residential premises on housing estates can be used to benefit local voluntary and community organisations;
- Brokering VCS access to public premises, across as wide a range of operating partners as possible, where co-location may be an option;

In some cases, the preferred way forward may be to release buildings, or a significant degree of control over them to help lever in additional benefits that conventional leasing might not achieve. The part disposals, management agreements and asset transfer have to play will all be reviewed under as part of the community assets work stream.

We want to deal with difficulties around both the availability of space to occupy and the knowledge base of occupiers in the sector when it comes to managing buildings and discharging tenant responsibilities, particularly around health and safety. Therefore, we will look at ways to improve the availability of information about premises, in terms of the council's buildings and across the sector.

We will bring together advice in a single place by publishing a clear, easy to read document on Southwark Council's website to outline policies on rate relief, lease terms, rents (including rent subsidy and rent free periods), asset transfer and assets of community value.

We will be transparent about the leases the council grants and clear about the rents charged. We will also support VCS organisations better understand the conditions of their lease and any changes that could impact on their tenancy.

**We want placed based strategies to be community-led and developed through co-production and co-design, to create better outcomes for residents.**



Residents are often best placed to decide what would improve the quality of their lives and stop things going wrong; they always have useful knowledge to contribute. Enabling residents to take more control over what happens locally and to have a say is likely to lead to more effective measures and better outcomes for residents. It is well established by public health research that feeling in control is also a factor that contributes directly to wellbeing and reduces risks to health.

We want to develop ways to share learning and develop co-produced engagement strategies with the community designed to uncover what would create the best outcomes for residents across all public-sector areas.

We believe that if communities have some positive experiences of making changes (in the private or public sphere) it can give people a sense of control and self-worth, which in turn generates hope, determination and efficacy. Communities are resourceful if they are full of people who are able to exercise control – as individuals or as groups – over what happens to them. We believe that the public sectors place shaping powers can be used to create local conditions to prevent problems from occurring. We believe that engagement with residents more closely and earlier, in a co-productive way, can promote the well-being of a community and its residents.

To achieve this, we will undertake a rapid review of engagement processes with the wider community in relation to place based decisions and make recommendations on how the process can move on from consultation and informing to co-production. For example, we will review the 2008 Statement of Community Involvement for planning. The aim will be to bring it into line with the principles of co-production outlined in this strategy.

### **More resilient communities that are connected and more resourceful, where no one group or community is overlooked**

During the listening events this area generated a lot of debate. Participants felt that the local VCS has extensive local knowledge, can be responsive and a social connector, or bridge from statutory services to the communities in Southwark. Local issues get picked up sooner and generally understood quicker, which can prevent people reaching a crisis. Many felt that through empowering and supporting local communities, volunteering and social action can be increased and extended to provide support closer to those most in need and where they want to receive it.

Volunteering is what makes the VCS unique. The benefits of volunteering on an individual's wellbeing, their sense of belonging, self-esteem and personal development are well documented but mustn't be ignored. However, financial pressures mean volunteers are often seen as a substitute or cheap alternative to do things that were previously paid for. The message to emerge from our listening events is that volunteering is not free and if the benefits that individuals can bring to communities are to be realised support is needed. Many smaller organisations reported that volunteer management was a real challenge; with many relying on volunteers to manage their volunteers.

Listed below are the ways in which we hope to meet these challenges:

### **We want to unlock resources, time and talents that exist in communities so that these assets can help them become even more resourceful and better connected and create social value.**

Recognising and valuing people as assets, not just treating them problems, has a preventative effect by drawing on their knowledge about what's needed to improve their lives, and by enabling them to feel valued and more positive about themselves. Asset-based approaches are already widespread in Southwark, wherever residents are treated with dignity and respect, where organisations working with them ask them to participate and contribute in kind, and where the starting point for deciding what to do is to find out what assets people already have, rather than what are their needs and problems.

We want to extend and consolidate on this approach as an essential foundation for creating more resourceful communities. Ideally, this involves not only understanding what local "assets" are and where they can be found, but also building upon and supporting efforts to develop and connect local assets and increase their use by local people.

### **We want to enable the development of community connectors. Acting as navigators and supporters for local communities; connecting individuals, neighbourhoods and communities.**

To achieve this community connectors will be embedded in a trusted local organisation acting as a link between community groups, communities and residents to empower them to make better choices and have more control over their lives and where they live. The aim will be to give people tools and confidence to have more control over other aspects of their lives (place, social networks, services etc.).

The overall outcome will in the longer-term lead to positive well-being outcomes. We want to help people and organisations find out about things, connect and participate in local activities. We all aspire to build thriving communities and put more power in the hands of local people.

**We want to enable individuals and groups to be agents of change, ready to shape the course of their own lives. We will achieve this by supporting volunteering and other forms of social action.**

We want to find ways to give people more control and agency over their lives and where they live. There are programmes that focus on self-management and peer support of which the VCS are an important part. However, none deal with the wider social context which is an important factor in enabling people to become more in control of their health and wellbeing.

We understand that community cohesion, resilience and social capital can contribute to improving health and wellbeing, reducing rates of depression and preventing falls, as well as enhancing life-skills, increasing rates of employment and higher education and improving social relationships. These factors largely lie outside the control of any one part of the system, so we want to align formal care and the impact that social action can have on individuals.

We will explore, through the Volunteering Strategy and other mechanisms, how we can support smaller organisations to manage volunteers. There are specific barriers to volunteer management which often limit the numbers of volunteers that can get involved.

# Appendix 1 – List of participants

Name	Organisation
Zahra Abdalla	Aylesbury Everywoman's Centre
Ade Adebambo	Local Accountancy Project
Sam Adofo	Salmon Youth Centre
Samina Akhtar	AINA Women's Group
Matthew Allgood	United St Saviour's Charity
Rita Andrews	Irish In London
Rev Fred Annin	Action Plus Foundation
Mo Awad	
Peter Baffoe	SLM Bermondsey
Dr Paul Baiden-Adams	MCSA
James Banks	Citizen's Advice Southwark
Mark Beach	Blackfriars Settlement
Pat Berry	Sporting UK
Jacky Bourke-White	Age UK Lewisham & Southwark
Lucy Bradshaw	London Bubble Theatre Company
Marcia Bryan	The Camden Society
Catriona Burniston	British Red Cross
Sally Causer	Southwark Law Centre
Adonis Christodoulou	Blackfriars Settlement
Caroline Clipson	Alzheimers Society
Councillor Fiona Colley	Southwark Council
Graham Collins	Community Southwark
Marina Comandulli	Latin American Women's Rights Service
Eileen Conn	Peckham Vision
Liz Cook	
Stephanie Correia	SRA
S Davies	Diocese of Southwark
Chris Deacon	Thames Reach
Durka Dougall	Southwark Clinical Commissioning Group
Stephen Douglass	Southwark Council
Liza Dresner	Resources for Autism
Nick Dunne	Bede House Association
Kevin Dykes	Southwark Council
Karen Edwards	
Alex Evans	Time and Talents Association

Margaret Falodi	Rapid Solutions
Nina Feldman	Involuntary Movement
Louise Flynn	Southwark Clinical Commissioning Group
Charlie Folorusho	
Dick Frak	Southwark Council
Tracey Franklin	Inspire
Stephen Gaskell	Southwark Council
Sue Gillie	
Caroline Gilmartin	Southwark Clinical Commissioning Group
Charlotte Gilsenan	Cambridge House
Devon Goodrich	Time and Talents Association
Sharine Goring	
Sophie Gray	Southwark Clinical Commissioning Group
Christopher Green	Citizen's Advice Southwark
Elaine Gunn	Southwark Council
Pia Hansen	Look Ahead
Councillor Barrie Hargrove	Southwark Council
Amy Harris	Alzheimers Society
Susan Hayes	Super Arts
Gill Henderson	London College of Communication
Rachel Henry	Age UK Lewisham & Southwark
Ginette Hogan	Southwark Council
Matt Jackson	Southwark Council
Dragana Jakovljevic	Morley College
Tina Johnston	Blackfriars Settlement
Michelle Jones	Southwark Council
Nicola Jones	Guys & St Thomas's NHS Trust
Gemma Juma	Link Age Southwark
Ali Kaviani	Involuntary Movement
Síle Kelleher	Better Bankside
Mark Kewley	Southwark Clinical Commissioning Group
Sharon Kitson	Contact A Family
Anna Kouma	Migrant Legal Action
Bruno Lacey	
Samantha Lahai-Taylor	Southwark Council
Stephen Lancashire	Southwark Pensioners Centre
Jin Lin	Southwark Council
Carmen Lindsay	Camberwell After School Project
Councillor Richard Livingstone	Southwark Council

Andrew Lockwood	
Annet Lukkien	Leonard Cheshire Disability
Angus Lyon	Southwark Council
Verinder Mander	Southwark Carers
Alex Margolies	Toucan Employment
Andy Matheson	Southwark Council
Julie Mathias	
Joy Matthews	Together UK
Gordon McCullough	Community Southwark
Elaine McLester	Southwark Council
Alison Miles	
Simon Mitchel	Southwark Council
Rosalind Morgan-Stuart	Latin American Disabled Peoples Project
Noreen Morrin	
Catherine Msoni	Divine Rescue
Debby Mulling	British Red Cross
James Murray	Guys and St Thomas's Charity
William Nicholson	
Ernest Nkrumah	The Ernest Foundation
Carol Nwosu	Sickle Cell and Young Stroke Survivors
Geoffrey O-Amoyaw	
Kathy O'Brien	
Triumphant Oghre	Southwark Council
Shipra Ogra	London Bubble Theatre Company
Ibukun Olashore	Organisation of Blind Africans & Caribbeans
Valerie Oldfield	Wheels for Wellbeing
Alison Palmer	Southwark Clinical Commissioning Group
Mark Parker	
Rajvi Patel	Age UK Lewisham & Southwark
Jonathan Petherbridge	London Bubble Theatre Company
Katherine Pitt	Southwark Council
James Postgate	Southwark Council
Chris Price	Pecan
Sarbjit Rana	Self Management UK
Amparo Rendon	Latin American Cultural Group
Helen Rice	Advising London
Louise Robinson	
Jo Sadler-Lovett	Blue Elephant Theatre
Fiona Sim	Walworth Garden Farm



Hayley Sloan	Southwark Clinical Commissioning Group
Kenyasue Smart	Ileto CPN
Grace Smith	Mental Fight Club
Steve Smith	Community Southwark
Seema Sodhi	Home Start Southwark
Katharine St John-Brooks	Working Solutions
Jay Stickland	Southwark Council
David Stock	Southwark Disablement Association
Jenny Styles	Waterloo Action Centre
Sheila Taylor	
Owen Thomas	Working with Men
Roger Thompson	Action on Hearing Loss
Lorna Tinson	DDL Training
Magdalene Ubogu	DDL Training
Mohamed Umarr	
Susan Underhill	Blackfriars Settlement
Andy Walker	
Rosemary Watts	Southwark Clinical Commissioning Group
Leon White	Together UK
Richard Whitfield	Southwark Clinical Commissioning Group
Alice Wilcock	Greater London Authority
Mike Wilson	Pembroke House
Angela Woodley	Three Cs Support
Katy Wright	Pocklington Trust
Ali Young	Southwark Clinical Commissioning Group
Amber Yusuf	Southwark Clinical Commissioning Group
Anneke Ziemen	Thames Reach

