



**CollaborationNI**  
working together, stronger together

Unpicking the Commissioning Process  
Collaborating for Commissioning  
**Report**

**April 2015**



**Building  
Change  
Trust**

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## List of abbreviations

CO3	Chief Officers 3 <sup>rd</sup> Sector
CNI	CollaborationNI
DEL	Department of Employment and Learning
DHSSPS	Department of Health, Social service and Public Safety
HSCB	Health and Social Care Board
HSCT	Health and Social Care Trust
LCG	Local Commissioning Group
NEET	Not in Education, Employment or Training
NICE	National Institute for Health and Care Excellence
OFMdfM	Office of the First Minister and deputy First Minister
PHA	Public Health Agency
RPA	Review of Public Administration
VCSE	Voluntary, Community and Social Enterprise

## Introduction to CollaborationNI

CollaborationNI (CNI) was formally launched on 30 March 2011, as a consortium between NICVA, CO3 and Stellar Leadership, commissioned by Building Change Trust. CNI provides practical support and resources across the whole spectrum of collaborative working to voluntary and community sector organisations.

As part of Phase One of CNI, 553 events were held covering training, expert facilitation, legal support sessions, coaching and policy seminars for over 4,000 individuals from 754 organisations.

Phase Two, launched in September 2014, aims to produce a smaller number of deeper collaborations which will influence policy and decision makers. It will see an extension of the debate through a range of policy symposiums which will continue to challenge our thinking, examine current approaches and focus on particular models of collaboration, under a number of thematic areas, including health, social housing, young people, arts, criminal justice and older people.

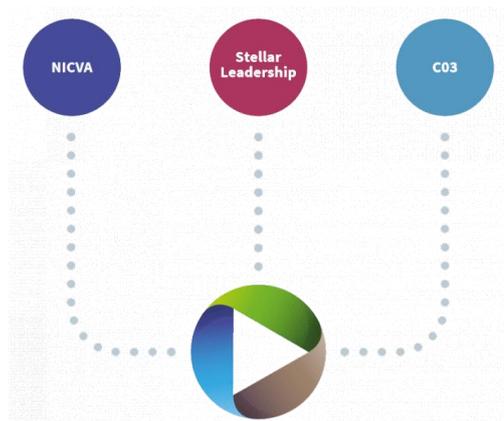
The aim of the policy symposiums is to challenge, inform and develop political and government thinking about the support requirements of the Voluntary, Community and Social Enterprise (VCSE) sector to encourage and cultivate a culture of effective collaboration.

The broad range of discussion will also provide an opportunity for VCSE sector leaders and government officials to learn from good, and not so good, practices in Northern Ireland and elsewhere in building effective collaborations, resulting in improved services and better client outcomes.

The role of CNI is to facilitate discussions on the theme of collaboration in a way that that delivers better outcomes through high quality, professional services.

CNI aims to help the VCSE sector to work better together and has provided a range of different services to over 900 organizations. The support provided by CNI can be categorized into four broad areas:

- Action planning support;
- Legal advice;
- Expert facilitation; and
- Events.



## **Unpicking the Commissioning Process – Collaborating for Commissioning**

The CNI policy symposium was held in the Skainos Centre, Belfast, on Friday 24<sup>th</sup> April 2015, to consider 'Unpicking the Commissioning Process – Collaborating for Commissioning'. 80 attendees from across the VCSE sector, government, and the private sector participated in the symposium and heard examples of good practice, and not so good practice, in Northern Ireland and elsewhere, of building effective collaborations which result in improved services and better client outcomes.

At a national level the amount spent on outsourcing services in the UK has doubled to £88bn since the Coalition Government came to power in 2010. The VCSE sector currently receives four times more money through contracts to deliver services than from grants in the UK.

At a regional level public purchasing through commissioning will continue to have a major influence on the growth of the VCSE sector. The current public sector reform process is an opportunity to increase the role and profile of the sector in the contracting and delivering of public services.

This roundtable provided a timely opportunity to review the benefits and challenges of VCSE organisations collaborating through a consortium or partnership to bid in the new commissioning process. It examined the trends, challenges and opportunities that commissioning presents both at a UK level and at a regional level.

For many VCSE organisations commissioning can be a complete minefield and can appear to be very daunting. However, at its most basic level commissioning is essentially about finding out what the public needs, and then designing and putting into place the services to address those needs. Whilst this may sound straightforward, the commissioning process is not and the symposium aimed to outline the challenges and the opportunities that exist for the VCSE sector.

In terms of public service deliver, the VCSE sector already plays a very active role but the potential for growth is constrained by the processes which are currently in place. For example, the Department of Health, Social Service and Public Safety (DHSSPS) is currently carrying out a review of its commissioning process and this may allow an opportunity for VCSE organisations to play a larger role which restricts the opportunity for change in the short term, but may enable VCSE sector organisations to play a larger role in the future. The past few years have seen a very real shift away from government providing core grant funding to a model of contracted out service delivery. This new model ought to provide an opportunity for VCSE organisations to play a greater role in decisions around commissioning.

The conference heard from three different speakers, who play very different roles in commissioning processes and who each had a unique insight into how the process currently operates and how it may change in the next few years. They were:

- **Eoin Heffernan**, Chief Operating Officer, 3SC;
- **Dean Sullivan**, Director of Commissioning, Health and Social Care Board; and
- **Jo Marley**, Director of Bryson Care, Bryson Intercultural and An Munia Tober.

Following the presentations, delegates were given the opportunity to discuss emerging themes in more detail and to look closer at the commissioning process.

## Economies of Collaboration: Benefits and challenges for VCSE collaboration in bidding for public sector contracts

*3SC is a third sector consortia of six charities which was set up in 2009 to allow third sector organisations to compete for and deliver public sector contracts in a climate of an increasingly challenging commissioning environment. 3SC seek to deliver public services in a way that is both high on value for money and high on social value. Through consortium working 3SC allow partners to collaborate, innovate, and share best practices for collective improvement, rather than competing.*

### **3SC**

3SC is an organisation of 25 staff which bids for, and delivers, public sector contracts, working exclusively for third sector organisations. In practice this means that they do bid writing, financial modelling, solution designing for bids, and contract negotiation on behalf of partners, as well as offering a full range of administration, back office and data security functions and performance management services.

3SC provide their services to a wide range of organisations from the Ministry of Justice, the Welsh Assembly Government, the Department of Work and Pensions and Interserve. They also work with a wide range of VCSE groups, including youth, justice, disability and housing organisations.

3SC is a management agency only and does not compete to deliver services.

That means that VCSE organisations can trust them and there is no concern that 3SC will attempt to take customers away from them. Their *raison d'être* is to act as an honest broker, and by doing so they ensure that their partners can perform to the best of their ability and benefit from engaging in service delivery contracts.

3SC is a social enterprise and it is their goal to make a profit from every contract which they reinvest in their work with VCSE organisations to build capacity and their ability to compete for future public service contracts. In order to make profits to reinvest in the sector 3SC charges a management fee. As 3SC does not make profit unless the consortium does not make a profit it is in their best interest for the consortium to be a success. That management fee only becomes payable on the selling of a profitable contract for the consortium, so it is in all parties interest for 3SC to be a success.

### **Outsourcing Trends and Challenges**

The amount spent on outsourcing of services in the UK has doubled to £88bn since the coalition government came to power in 2010<sup>1</sup>. This market for VCSE organisations is expected to continue to become even more complicated through the further expansion of 'Payment By Results' contracts which creates pressure on VCSE organisations to use their reserves to put themselves in a position to



**Eoin Heffernan**  
**Chief Operating Officer,**  
**3SC**

As 3SC's Chief Operating Officer, Eoin leads on all business development, contract service delivery and communications and marketing activities.

Eoin has secured contracts for 3SC's 3000 member organisations and has published several works including an article on civil society innovation titled *Benevolence in the 21<sup>st</sup> Century: The Beauty of Benevolence*.

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<sup>1</sup> *The Financial Times*, July 2014

compete for these contracts, putting at risk their long term viability. The long term trend appears to indicate that 'Payment By Result' is here to stay as it is being used by the government to deliver services at a reduced cost. The coalition government has made a pledge to award 25% of public service contracts to SMEs, largely through the VCSE sector.

Outsourcing scandals, involving for profit organisations, have increased the value of practical VCSE partnerships in that they can add social value, and not just shareholder value, to contracts. In an obvious attempt to address this we have seen some for profit organisations appearing to adopt some of the values of the VCSE. In March 2015 Sodexo, a French multinational outsourcing company, published their public sector pledge, signing up to:

- Working with the VCSE sector 'first';
- Transparency of revenues- importantly not transparency of profits;
- Paying a living wage to staff;
- Providing 500 apprenticeships by the end of 2016;
- Equal pay for equal work.

The VCSE sector does much of this already by default so when you see multinationals such as Sodexo offering to do this you have to ask why!

### **The Wider Commissioning Context**

The primary commissioning driver is the obvious reality that there is less money available and that commissioners want more for less. As a result of austerity politics and reductions in public spending, there is reduced capacity within the public sector and it is clear that existing approaches are not sustainable and are in need of serious reform. We are seeing open public services with increased competition, open markets and new entrants into the market.

In order for VCSE organisations to successfully bid for and deliver public service contracts it is important that they know what commissioners are looking for. Commissioners want:

- Specialist, local expertise that adds and creates value;
- Integrated services that do not double up on existing provision from government and charitable organisations but are complimentary with other services provided; and
- A healthy third sector that brings new ideas and innovation to the delivery of public services.

### **Case Study: Welsh Access to Work Programme**

It is often said that Access to Work is 'the best government programme that you have never heard of'. In competing for the award of the Access to Work contract in Wales, 3SC put together a group of specialist disability charities to carry out assessments of disabled people in the workplace to remove barriers to employment. The programme was paper based, with paper based assessment, so in order that the service could be rolled out across the country they put the service in the cloud and assessments were carried out via iPad, laptop and the internet. The Access to Work portal was developed and is customer focused in a way that ensures that the charities do not have to carry out any other work other than their assessments. The achievement for 3SC is that the process removes for the charities all security and data concerns and allows them to focus on what they do best. The system does not require the charities to store any personal information and there is no requirement to compile reports for, or to, 3SC as the system does all this work. They have stripped out all

bureaucracy and this has allowed the charities to focus solely on their customer groups. In a marketplace that includes large, for profit multinationals, such as Capita, the consortia has the best quality service, as they allow the charities to do what they do best. They also have the best performance against KPIs- they are the quickest and the most efficient. This high level of efficiency allows 3SC to pay the charities more than they get from anyone else. They pay the highest rate per assessment than anyone else in the market and have changed how assessments are carried out throughout the market. The commissioner has indicated to them that future procurement exercises in the future will be based on how the consortia delivers services.

Eoin outlined that this system was not created by accident and required a smart approach in the early days of the consortium. In order to design the system they spoke to everyone in the market, not just VCSE organisations, so that they could best learn how to deliver customer focused services. They then leveraged the strength of the VCSE sector and, by listening to what they had to say and acknowledging their expertise, they maximised their strengths and engineered a system on that basis. They applied long term thinking to developing a system not just for one contract but for the entire market so that they could influence future contracts.

### **Economies of Collaboration**

For 3SC, consortia is about creating economies of collaboration and ensuring that all partners are able to benefit from shared delivery and shared risk. They are able to aggregate for scale, to cover a wider geographical area, whilst at the same time sharing contact, intelligence and insight. It is however important to remember that collaboration is not consensus. If everyone agrees then you really have to ask yourself whether there is something wrong with the agreement. Collaboration requires leadership and for someone to act as an honest broker who is able to mediate in disputes between partners, in the knowledge that they are trying to do the best job for the customer. This honest broker role is vital in collaboration as often they are the ones who need to make a final decision. The best collaborations also blur the boundaries of organisations, which can be inward looking and adopt a silo mentality. In order to strengthen the partnership individual organisations must look at the bigger picture and give up some level of autonomy. A good collaboration also has a diversification of perspective: ten ten heads are better than one.

Eoin finished of his presentation with the following quote, which he believed summed up the work of 3SC and what collaboration means.

**“Competition makes us Faster. Collaboration makes us Better.”**

**Dean Sullivan**  
**Director of Commissioning, Health and Social Care Board**

Dean trained as an accountant with the National Audit Office in London. He then worked as a management consultant with Price Waterhouse and PA Consulting Group. In 2003 he joined DHSSPS, initially as Director of Secondary Care and then Director of Performance and Planning. He joined the Health and Social Care Board in 2010.

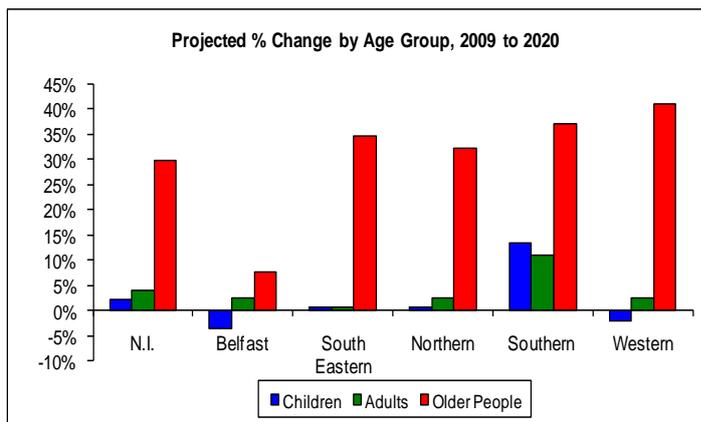
## A Strategic Overview of Commissioning of Health and Social Care Services in NI

The Health and Social Care Board (HSCB) is responsible for managing the health budget in Northern Ireland which is currently £4.6bn per annum, representing 41% of the total NI budget. Through public procurement exercises the Health and Social Care Board procures external contracts to the value of £750m each year, making it a key player in public service contracting in Northern Ireland.

### Context

Whilst it has the largest budget of any government department in Northern Ireland the DHSSPS has to deal with a number of significant short, medium and long term challenges, all of which seriously impact on its ability to respond fully to patient and client needs, and meet public expectations .

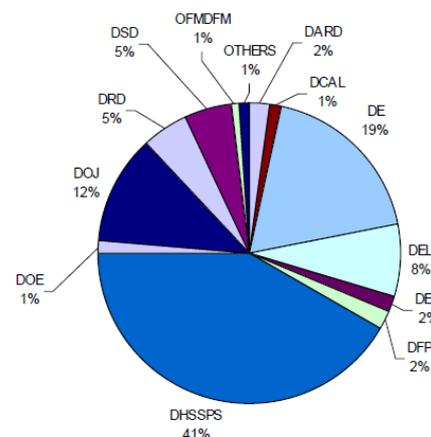
One of the most significant challenges that the HSCB has had to address in its commissioning of services is the large projected increase in the number of older people in our population. Across Northern Ireland between 2009 and 2020 the number of



older people is expected to increase by 30% whilst at the same time the number of children and adults is expected to grow by less than 5%. This will obviously have an enormous impact on the entire health service and it is the role of the HSCB to ensure that the system is able to address these changes and commission health services based on this future demand.

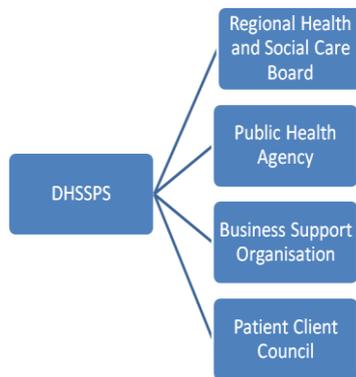
The health and social care system faced significant financial challenges in 2014/15 and there is no realistic prospect of material increase in funding in future years. While efforts have been made locally and nationally to protect health funding, the service faces annual cost increases of some 6% against increased annual funding some 2%. This 6% increase can be attributed as follows:

- 2% increase as a result of pay demands;
- 2% increase due to demographic pressures (see above chart); and
- 2% increase as a result of residual demand- we are not treating more people but it costs more to provide new forms of treatment and intervention.



All of this means that every year the cost of health provision is outstripping investment by up to 4%. This may not sound like a lot but, considering health is the largest section of the Northern Ireland budget means that this 4% gap represents an annual, cumulative funding challenge of £180m. However, this funding challenge also provides an opportunity for the VCSE sector as there is an obvious and pressing need for things to be done differently. This is an opportunity for the VCSE sector to change how services are delivered. There is a huge impetus within the system to do more with less and find new and innovative ways in how services are commissioned and delivered. It is vital that VCSE organisations are able to provide their services on a large scale and have the evidence base to back up their claim to be able to deliver and social care services better than they are currently being delivered.

### Commissioning Structures and Processes



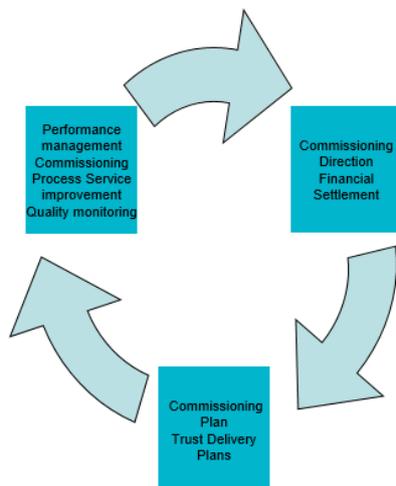
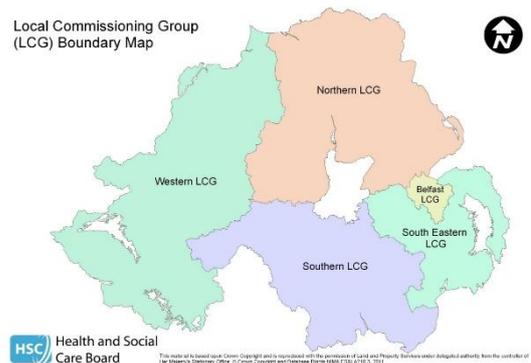
Following Phase 2 of the Review of Public Administration (RPA) in 2009 the regional structure of the health system in Northern Ireland is controlled by four organisations, under the control of DHSSPS. The key functions of the HSCB are:

- Commissioning;
- Resource Management; and
- Performance Management.

The Public Health Agency (PHA), who work very closely with the HSCB on the commissioning of services, has the following functions:

- Improving health and wellbeing;
- Protecting health;
- Commissioning for health improvement and reducing health inequalities;
- Patient safety;
- Enhancing the patient experience; and
- Delivering services and ensuring quality assurances in screening programmes.

To take forward local processes there are five Local Commissioning Groups (LCGs) which are coterminous with the five health and social care trusts but which are no longer coterminous with the revised local government boundaries.



It is the responsibility of the HSCB and the LCGs to identify the population needs and then develop appropriate service models before commissioning the required services from providers. Traditionally these services would have been procured substantially from the Health and Social Care Trusts and primary care providers, but more these services are being commissioned from the private and VCSE sectors, and from the

recently established Integrated Care Partnerships. As part of the commissioning process the volume of activity and outcomes is measured and fed into a monitoring and evaluation process. This process happens on an ongoing basis.

There is an opportunity for the VCSE sector to involve itself in public consultation as part of the creation of commissioning plans and to engage on specific service issues at both a regional and local level, for example the relocating of paediatric congenital cardiac surgery. VCSE organisations also have a role to play as part of health alliances, such as the Health and Social Care Board's Clinical Networks, Rare Disease Partnership and the Long Term Conditions Alliance. The other opportunity for direct involvement for the VCSE sector is through the direct provision of services.

At present the Health and Social Care Board has partnered up with VCSE organisations in a range of areas including:

- **Specialist palliative and end of life care**
  - Transforming the palliative and end of life care programmes through partnership arrangements with Marie Curie, the Northern Ireland Hospice, the Foyle Hospice and the Southern Area Hospice.
- **Long term conditions**
  - British Heart Foundation and Health and Social Care Trust Heart Failure Nurses;
  - Chest Heart Stroke and Stroke Association provide contracted family and survivor support services to the health trusts; and
  - Chest Heart Stroke, Arthritis Care UK and the Southern Health and Social Care Trust run joint self-management programmes.
- **Cancer services**
  - Transforming Cancer Follow Up in a joint venture between the HSCB, PHA, the health trusts and MacMillan Cancer Support;
  - Action Cancer carry out cancer screening sessions; and
  - MacMillan are not directly involved with the provision of services but are providing advice on how services should be delivered in the future so fundamentally reshaping the future commissioning process.

In concluding his presentation Dean wanted to reiterate the point that whilst the health and social care service is in a difficult position and that this presented an opportunity for VCSEs who were reflective and engaging to play a vital role. There has always been a role for VCSEs in lobbying government but he suggested that the relationship is at its strongest when VCSEs and the HSCB are working together both in relation to the identification of need and the development of innovative service models to meet that need and, together, can redesign the service. By being more effective in engagement VCSEs can use their insight and expertise to make things happen in a way that the HSCB cannot. He also pointed out that the onus is not solely with the VCSE sector but there was also a duty on the HSCB to engage closely with VCSE organisations, to encourage better collaborative working.

## VCSE perspective on developing a collaborative approach to participate in the commissioning process

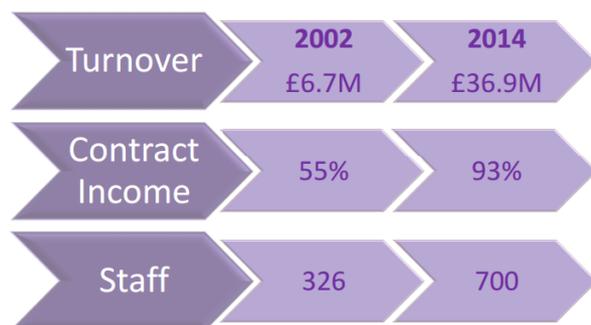
*Bryson Care provides children’s services, support for frail older people and vulnerable adults in the community and advocacy on behalf of people with learning difficulties. Bryson Care employs 200 staff and has an annual turnover of £5m.*

*Bryson Intercultural supports newcomer and vulnerable black and minority ethnic individuals and is the Northern Ireland provider of Asylum Advice and Support. Bryson also supports the Roma community in Belfast, especially in the area of Health, Education and Advice, and employs 10 staff with a turnover of £250,000.*

*An Munia Tober supports Travellers within the Belfast area, providing a range of health, employment and training, housing and youth services. An Munia Tober employs 9 staff and has an annual turnover of £300,000.*

Jo began her presentation by outlining the work carried out by Bryson Charitable Group. As a social enterprise Bryson have to ensure their long term sustainability by adopting a business-based approach to achieve social aims. They do this by tendering and contracting for services, on the basis of full cost recovery, and ensuring that they generate residual profits which can be reinvested for social good. This allows them to be sustainable and strengthens their hand in securing public sector contracts, because one of the first things that government want to know is whether the services that are being delivered on its behalf are durable.

Bryson believe that their model is sustainable as they push for a relationship with government based on business principles and have moved away from relationships based on grant reliance, over which you have very little control.



Bryson is a large group which has grown exponentially over the past twelve years and has seen massive increase in turnover, contract income and staff numbers. Operating in Northern Ireland, the Republic of Ireland and Wales, Bryson operate 37 offices with 700 staff and 130 volunteers providing services to 23,000 people every day. Bryson Care had a turnover in

2013/14 of £5m and its 288 staff and 104 volunteers provided over 250,000 hours of services to 2,500 people.

The main reason that Bryson are involved in collaborative working is that the care sector in Northern Ireland will never be homogenous and that as an organization they are fundamental to addressing the needs of some of the most vulnerable people in our society. Playing a key role in the ‘transformation agenda’ they need to be innovative and this is predicated on doing things



**Jo Marley**  
**Director of Bryson Care,**  
**Bryson Intercultural and**  
**An Munia Tober**

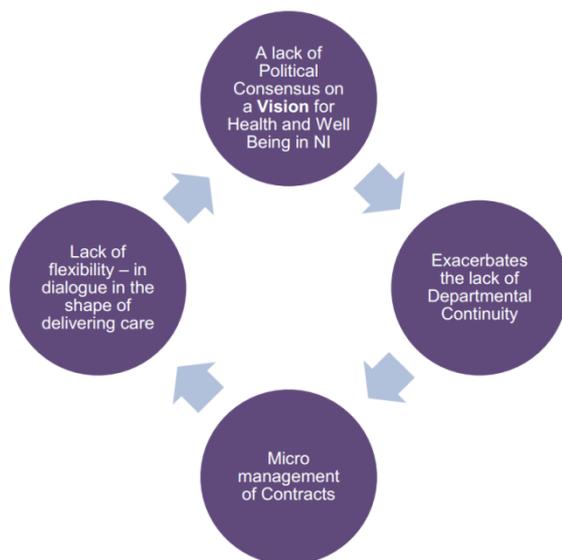
Jo previously worked for 12 years in the legacy North & West Belfast Health and Social Services Trust as a Social Worker, Senior Social Worker, Assistant Principal Social Worker and finally as an Operational Manager before joining the Bryson Charitable Group. Jo has an MSc in Systematic Psychotherapy, a BA (Hons) History and Politics and is a professionally qualified social worker.

differently, doing things together and continuing to be sustainable. Jo pointed out that collaboration is not always easy and in times of crisis there is always an onus to put collaboration to one side and to shift focus back to operational delivery, but the goals of collaboration should always be remembered.

Collaboration offers a number of opportunities to VCSE organisations, the most important of which is allowing organisations to pay their own way and to shift away from the dependency culture which has traditionally existed within the sector. By moving out of their comfort zone and collaborating with others, organisations can be part of a culture of enterprise and innovation. By embracing change they can shift their mindset away from risk aversion and play their part in building a plural, rebalanced economy. Bryson has been in existence since 1906 and the reason that it not only exists, but is thriving today, is that they keep changing how they do things and are 'future looking'; looking for ways to do things together. Very often government is risk averse and is afraid of doing things differently, which allows the VCSE to step in and, by being innovative, find new ways of dealing with problems by delivering services that otherwise government would not risk.

It is vital that the VCSE sector closely examines how it engages with the private sector. The big difference between the VCSE sector and the private sector is what they do with their profits but this is almost a false dichotomy because apart from the underlying difference on that they do with their profits both sectors are known for being innovative and finding solutions to problems.

There is the need for a dialogue about social value and the benefit of having more social clauses. This should be closely tied in with new models of finance and the introduction of market place bonds and social impact bonds into Northern Ireland. The VCSE sector in Britain is far ahead of Northern Ireland when it comes to embracing new sources of finances so there is an opportunity for us to learn from their experiences and maximize the benefits to the sector.



There is a need for a Northern Ireland wide vision of what we are trying to achieve when it comes to the 'ageing agenda'. The NI Executive have still not adequately addressed the issue of welfare reform and this, coupled, with the failure of OFMdFM to make funding decisions for this financial year, has caused a great deal of uncertainty for both VCSE service providers and service users. By having to spend so much time and energy chasing funding sources, there is very little opportunity for VCSE organisations to do what they do best which is deliver service and be innovative.

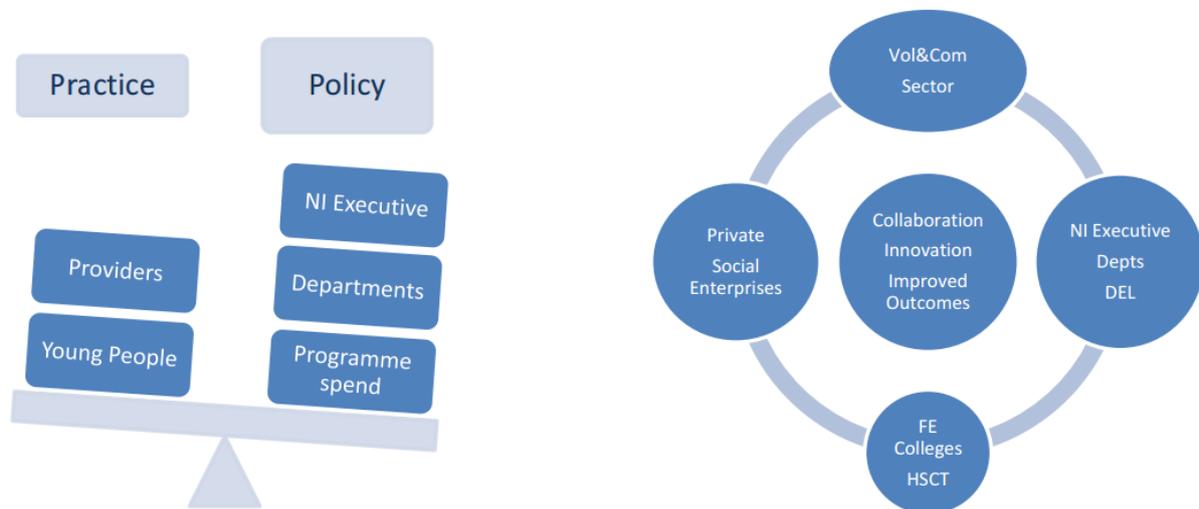
Another issue that Bryson Care have had difficulty with in the commissioning process is that on one hand the VCSE sector provides about 50% of

domiciliary care services in Northern Ireland and as part of this role they must discuss commissioning planning with the local health and social care trust. This is complicated by the fact that very often VCSE organisations have to compete with the same Trust to provide services.

### Case Study:

Bryson wanted to do more to engage with young people who were not in education, employment or training (known as 'NEET'), and so set about creating a link with them to ensure that their voices were heard. Realizing that they would not be able to set up effective mechanisms of engagement alone, they created a linkage between service providers, young people and government.

The first step was to recognize that the Department of Employment and Learning (DEL) had responsibility for the NEET Strategy, following which they brought together a wide number of organisations who represented these young people. As they all had pre-existing relationships with DEL they were able to draw from their own experiences and expertise to quickly draw up a lobbying agenda. The VCSE organisations that were involved were credible and able to show that there was a mismatch between the creation and implementation of policy. By speaking with one, powerful voice they were able to reshape the agenda so that the voices of young people were heard. By using the contacts of the many member organisations they were able to create the NI NEET Youth Forum which was comprised of 20 young people from Belfast, Antrim, Armagh, Derry/ Londonderry and Fermanagh who fed directly into policy development.



They were able to do more than lobby government and became part of the policy creation framework. They attended and spoke at DEL roadshows and secured five seats on the interdepartmental group which oversees the implementation of NEET policy in Northern Ireland. One of the most important impacts that this has had is that the young people themselves have lobbied and worked with senior departmental officials on the issues that directly impact on them- they have been listened to and seen some of their ideas implemented. This is collaboration in its truest sense.

They were able to shape outcomes and crucially were part of identifying what those outcomes should look like as well as being accountable for developing models of best practice. They were also able to access additional monies from outside of Northern Ireland which have assisted in developing a joint measurement tool and they are now very much designed in the co-design of the United Youth consortia. By establishing the direction of discussion from the outset they have been able to align, motivate and inspire people to produce meaningful change.

## Feedback and Key Messages

Following the conclusion of the presentations delegates were asked to complete a feedback form to capture the key messages related to encouraging and maximizing commissioning opportunities for the VCSE sector. The key messages that were identified from the feedback forms were as follows:



### To government

- Identify key outcomes and the most effective delivery mechanism in partnership with the Third Sector. The concepts and implementation of co-design and co-production are building in momentum in other jurisdictions of the UK however, less so here.
- Improve the amount of collaboration within and between government departments in order to develop a more coherent approach to the commissioning of goods and services.
- Commissioning of services and goods should be framed on the users, this requires a different kind of commissioning. This will require a fundamental shift in thinking and approaches.
- There is an economic review as to whether what has been tendered for is actually deliverable
- Ensure that the commissioning process takes account of the need to pay a living wage to the staff delivering services.
- Commissioning needs to encourage cooperation rather than competition.
- Outcome based commissioning, such as Payment by Results, have traditionally centered on supporting those easiest to help, it is important that the future design and delivery models adapted are focused on the end user, understanding the demand and designing services that meets those needs. This creates the ability to shape services to meet local needs.

### To politicians

- We need to find political champions for collaborative working
- Evidence based policies should inform political positions.
- The current approach to public service delivery through traditional commissioning models are not working. The Third Sector has the skills and capacity to become more involved in public service delivery to help improve the lives of individuals and communities. This does not require more resources, but redirecting and radically changing the current approach to public service delivery. The VCSE needs the support of politicians to encourage improved dialogue and joint up working with the public sector.
- We need to have an informed conversation with the public about the future of public service delivery. Decisions such as hospital closures can be 'political hot potatoes'. Utilize the Third Sector to help facilitate these conversations.
- VCSE organisations interested in providing commissioning support are faced with a great deal of local variation. This leaves some unsure of how to enter the market and who to market their services to. Support for the VCSE to become more actively involved needs to be resourced.

### To the VCSE sector

- Collaborate, innovate and speak with one voice.
- CollaborationNI needs to increase and encourage collaboration across the VCSE sector.
- VCSE needs to work together and not compete against one another.
- VCSE needs to develop and build strong links at local government level to encourage a more partnership approaches with our new local councils.
- There are some areas of commissioning support where the VCSE sector offers particular expertise, including needs-assessments, business intelligence, service re-design, and public and patient engagement. However, need to be more explicit about the services they offer and their impact, and need to demonstrate how they can support wider commissioning agendas such as efficiency gains and integration, alongside improving patient outcomes and experience.
- Consider partnering with other relevant VCSE organisations to share resources for sourcing and responding to bids, and to offer commissioners a range of services.

### To funders

- There is a requirement for joint commissioning
- Align funding with desired outcomes based on local needs.



Delegates were also asked how they rated the overall input of the event and 77% of respondents rating the event as Excellent or Very Good.

98% of respondents Strongly Agreed or Agreed that they found the input useful and 96% of respondents Strongly Agreed or Agreed that the input increased their knowledge.