Berkshire West Clinical Commissioning Group (BWCCG)

Voluntary and Community Sector (VCS) Strategy 2018-2020

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This strategy will be reviewed by 31st March 2020.
1. **Introduction**

The voluntary and community sector (VCS) has a key role to play in supporting communities to shape the services of the future. NHS Berkshire West CCG recognises that a whole system change is required to meet the needs of its local population and make effective use of health funding.

NHS Berkshire West CCG recognises that the sector is close to communities and can create and engage in conversations that enable people to both shape services that meet their needs and enable communities to take more ownership of their own health and social care needs.

The challenges to public funding and increasing demand on local services means it is more important to transform how voluntary and community services are commissioned.

2. **NHS National Policy and Context**

2.1 The NHS Five Year Forward View recognises the role that the sector can play in supporting people to manage their own health and encouraging the emergence of ‘peer-peer communities’. It lays out the need for “stronger partnerships with charitable and voluntary sector organisations”, stating that “rather than being seen as the ‘nice to haves’ and the ‘discretionary extras’, our conviction is that these sort of partnerships and initiatives are in fact precisely the sort of ‘slow burn, high impact’ actions that are now essential.”. The need for flexible investment models and longer term funding reflect similar issues being raised in local conversations with the sector.

3. **The Berkshire West Vision**

The CCG’s vision is to develop a strong, sustainable and influential voluntary and community sector that provides leadership, with sound processes to achieve quality standards thus making a positive contribution towards achieving health outcomes, and working with the NHS at a time when resources are limited and use of funds needs to be maximised. This means working together with the voluntary sector to develop effective partnerships to achieve improved health outcomes for the people of Berkshire West. This will entail collaborating with the voluntary sector to develop care pathways that can demonstrate impact on the population from prevention, an example of a preventative service is the ‘Prevention to Admission service that the CCG commissions. BWCCG will endeavour to maintain open lines of communication between the four localities to ensure that there are open transparent and consistent processes for commissioning from the VCOs.

4. **Building Health Partnerships with the Local Authorities**

Berkshire West CCG has strong partnerships with the 3 local authorities and jointly commissions services from the voluntary sector. This work has led to a more coordinated approach to commissioning the Voluntary and Community Sector. The VCS strategy will further strengthen these relationships to jointly commission in the future.

In recent years, the voluntary and community sector has actively supported the local authorities and CCG to transform services, notably in the following areas:

- Carers Information and Advice
• Youth Counselling
• Social Prescribing
• Stroke Association
• Younger People with Dementia
• Alzheimers

NHS Berkshire West CCG has thus far taken a traditional approach to supporting the VCS in the way it has grant funded and commissioned services to date. This strategy looks at ways to strengthen and redefine our relationship with the Voluntary and Community Sector (VCS) and support communities in a way that is flexible, responsive and meets local needs whilst demonstrating value for money. The strategy aims to:

• create resilient communities that are self-supporting. This will enable the reduction and demand on health and social care services and better outcomes for people.
• use the capacity and skills of the VCS to co-produce services that meet community needs.
• work with the three infrastructure organisations to develop an outcome and impact focussed approach to commission from the voluntary and community sector.

5. Objectives

As detailed below, there are 3 key objectives of this strategy that have been developed in partnership with the three Infrastructure Organisations following the 3 listening events that took place across Berkshire West. Berkshire West CCG is committed to developing robust and productive relationships with the voluntary and community sector (VCS).

Berkshire West CCG is keen to ensure that this strategy leads to action that enables us to make progress against the objectives underpinning this strategy and a 12 month action plan has been agreed to achieve these objectives. (Table 1 - Page 8 & 9 below)

Objective 1

• More effective communication between BWCCG and the VCS to identify ways that the sector can contribute to, influence and support new ways of working and encourage innovation in achieving health outcomes.

Objective 2

• Develop opportunities to understand the role, capacity, skills and capacity that VCS organisations can play in contributing to the Integrated Care System (ICS) strategic priorities. Increased support to VCOs to become effective partners in the provision of services which deliver better health outcomes for people across Berkshire West.

Objective 3

• Continued to listening and responding to the voices in June 2018 of different communities and population groups, in particular those who are marginalised or under represented.
6. Background & Development of the Strategy

The three Infrastructure Organisations hosted a series of Listening Events with VCOs operating in Berkshire West to build upon relationships between BWCCG and the VCS. Feedback from these events was used to co-produce this Strategy. The events established a consensus around outcomes, principles and actions needed to further develop the relationship between the VCS and BWCCG. Listening activity was also undertaken with BWCCG leads and much resonated with what VCOs told us. These include:

- Developing opportunities to understand the role that VCO organisations can and do play locally in contributing to the CCG’s commissioning plans, that enables coproduction throughout the commissioning cycle and longer term investment in the VCS.
- Establishing systematic and sustainable routes of communication and engagement between the CCG and VCS.
- Utilising proportionate, VCS friendly NHS funding and procurement processes.
- Enabling the sector to evaluate its effectiveness, demonstrate where it could reduce NHS costs, and lead to clarity on the advantages of investing in the sector.

7.1 This strategy sets out why NHS Berkshire West Clinical Commissioning Group (BWCCG) values the role of the Voluntary & Community Sector (VCS) in improving health and wellbeing and explains why we wish to work in partnership with the sector on this shared goal.

7.2 The strategy recognises that partnerships between BWCCG and VCO go wider than commissioning, contracting and grant processes. We believe that by investing time and resources in building strong relationships, we will be in a position to jointly deliver maximum benefit to the citizens and communities of Berkshire West.

7. BWCCG within the Integrated Care System (ICS) strategic priorities (Appendix A- Glossary)

BWCCG is the statutory body responsible for commissioning local health services, including the localities of North and West Reading, South Reading, West Berkshire and Wokingham. It is now part of an emerging (ICS) which includes other partners.

This VCS strategy sets out a change in the way that the Integrated Care System (ICS) will work with the sector. It sets out opportunities to harness local knowledge and partnership work to support better health outcomes. The ICS is currently comprised of:

- Berkshire West Clinical Commissioning Group (CCG)
- Royal Berkshire Hospital Foundation Trust - An acute hospital,
- Berkshire Healthcare Foundation Trust - A community / mental health Foundation Trust
• Providers of GP services in Berkshire West which are configuring themselves into four locality / neighbourhood aligned ‘alliances’

The ICS also works closely with South Central Ambulance Trust and the three local authorities in West Berkshire, Wokingham and Reading to drive integration between health and social care. The local government chairman of this parallel programme, The Berkshire West 10, has a seat on the ICS leadership group to ensure the two programmes are mutually supportive.

The ICS’s objectives are to achieve an improvement in the health and wellbeing of the population in Berkshire West.

It is often much easier for Voluntary and Community Organisations (VCOs) to engage communities in the design of services. The CCGs and our partners within an Integrated Care System (ICS) will need to be transparent about our commissioning intentions and processes. The aim is to provide more opportunities to identify community led solutions. The Partners within the ICS will:

• aim to co-design and co-produce at every opportunity with VCS and communities
• consider the contribution of the VCS when developing the local market
• communicate our commissioning timelines

8. ICS Priorities:

8.1. Develop a resilient urgent care system that meets the on the day need of patients and is consistent with our constitutional requirements.

Key projects: Emergency department streaming; High Intensity User project; Develop Integrated Urgent Care & Launch 111 online; Produce an Urgent and Emergency Care Strategy for Berkshire West; Urgent Treatment Centre at West Berkshire Community Hospital; Demand & Capacity Model for bedded care; Wellbeing service Common Point of Entry

8.2. To redesign care pathways to improve patient experience, clinical outcomes and make the best use of clinical and digital resources.

Key project: Outpatients Programme; iMSK; Medicines utilisation; Cardiology; Respiratory; Long Term Conditions (Care planning and Integrated Falls pathway); Ophthalmology; Phlebotomy

8.3. Progress a whole system approach to transforming primary care to deliver resilience, better patient outcomes and experience and efficiency.

Key projects: Deliver the enhanced access requirements set out by the Five Year Forward View and ICS Memorandum of Understanding; Implement networks / neighbourhoods of practices each with a registered population of 30-50k covering the three localities in Berkshire West; Strengthen the workforce through better recruitment and retention to support sustainability and expansion of primary care; Develop and work with provider Alliances to provide greater resilience and capacity in addition to enabling the implementation of new care models.

8.4. Develop the ICS supporting infrastructure to deliver better value for money and reduce duplication.
Key projects: Develop the ICS implementation plan; Progress the workforce projects identified by the ICS Workforce Group; Work with Kings Fund to Agree the ICS Vision and Objectives; Agree vision for PHM and implement a solution; Agree and deliver ICS public engagement programme; Develop and implement a new contractual form

8.5. Deliver the ICS financial control total agreed to by the Boards of the constituent statutory organisations.

Key projects: Credible financial recovery plan for 19/20 and 20/21; Progressing transparency of cost information at SLR level.

9. The Voluntary & Community Sector in Berkshire West

9.1 A range of different terms are used to describe voluntary and community sector organisations including third sector organisations, charities, not for profit organisations, social enterprises and non-government organisations. Organisations can vary in size from small volunteer run groups to national or international bodies with a large paid workforce.

9.2 It is estimated that there are at least 2,500 organisations operating in the voluntary and community sector across Berkshire West. This estimate includes formally recognised charities, social enterprises and co-operatives, and a large number of community groups that are not formally incorporated. The largest proportion of these organisations is made up of ‘micro’ community groups which are categorised as those with an income of less that £5,000 per annum.

9.3 Most VCOs are small-to-medium in size, frontline-facing and user-led.

9.4 Most have a low level of management resources to engage in developing partnerships and consortia’s NHSE data submissions, bidding for large contracts etc. Whilst there is significant interest within BWCCG for VCOs to ‘scale up’ in order to deliver across Berkshire West, it is not a natural footprint for local VCOs which were set up to address local need in their town or neighbourhood. For many, their charitable objects would legally prevent them from working outside their current areas.

9.5 The local voluntary sector is delivery-focused across a diverse range of thematic service areas: condition (e.g. Parkinson’s; stroke) population profile (e.g. BME; older/younger people) geographic (e.g. Wokingham area-only) – and sometimes a mix of all of these.

9.6 In 2016 the estimated income of the UK voluntary sector was £73.1 billion.

9.7 In West Berkshire alone, the sector engaged 4,855 volunteers in 2017 who contributed an estimated 614,200 hours of their own time each week. It is estimated that volunteers working within the West Berkshire voluntary sector contributed the equivalent of £7,677,500 worth of ‘Gross Value Added’ (GVA) to the economy.

10. The benefits of working with the Voluntary and Community Sector

10.1 BW CCG recognises the crucial role that the sector can play in supporting the health and wellbeing of the Berkshire West population. In particular, the sector is in a unique position to contribute to BWCCG’s strategic priorities for the following reasons:
• The sector delivers a range of services and activities that have a positive impact on the health of local people and in preventing illness. VCOs typically occupy the space in patient pathways before and after NHS interventions.
• The sector provides a broad range of services and activities that have the potential to reduce costs to the NHS, by reducing demands on healthcare services such as GP practices and hospitals.
• It provides space for individuals and communities who are often marginalised to come together, to exercise power and to have a voice. It can support BWCCG to reach into communities less likely to access NHS services.
• VCOs usually take a whole-person and whole-life approach involving the wider determinants of health, rather than a specific condition or age group. Social prescribing is a good example of this.
• It has access to a local pool of capital assets (buildings and equipment); volunteers and goodwill/neighbourliness; employment opportunities (first step back/into work). There is a well-documented link between volunteering, networking and improved health and resilience to illness.
• It attracts significant external investment to improving health and wellbeing in Berkshire West. For example In 2017/18, Involve Community Services helped VCOs attract an additional £800,000 worth of funding into Wokingham charities.
• It is a source of innovation and experimentation that can respond quickly to meet health need.
• The sector is well-placed to inform and enrich all elements of the commissioning cycle – from identifying and meeting population needs and gaps in provision to service review, co-production and evaluation.

11. The principles that underpin BWCCG’s relationship with the VCS and how we will demonstrate them

Respect and value each other and play to our respective strengths

• Recognising what the VCS has to offer
• Open and transparent communications
• Ensuring self-management, prevention and support for independence is a fundamental element of all pathways
• Utilising the skills, knowledge and expertise of the VCS to inform service redesigns
• Welcoming constructive challenge

Take a long-term view

• Contributing to the provision of support for small to medium VCOs to manage effectively and demonstrate outcomes
• Creating space for innovation and new ideas
• Commissioning services over a longer term
• Developing a Voluntary Sector Alliance Model to free up vital NHS resources and deliver improved outcomes for people
Make life as easy and simple as possible for each other

- Using measurable outcomes that reflect VCS approaches to service delivery
- Developing a consistent approach for commissioning from the VCOs across BWCCG
- Evaluating approaches and developing a robust local evidence base
- Developing appropriate investment models
- Sharing skills, knowledge and understanding and building local capacity within the VCS
- Supporting and encouraging collaboration and partnership working
- Planning ahead with clear timetables for consultations, coproduction and procurement
12. **Action Plan** (Table 1)

We have agreed a series of actions with voluntary and community sector partners which have key milestones and named leads against each of the objectives. (Note: VCS Liaison Group comprises VCS Infrastructure Leads and BWCCG Joint Commissioning Team.)

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<th>Objective 1</th>
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<tbody>
<tr>
<td>More effective communication between BWCCG and the VCS to identify ways that the sector can contribute to and support new ways of working and encourage innovation in health.</td>
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<tr>
<th>Proposals</th>
<th>Agreed Actions</th>
<th>Lead</th>
<th>Timescales</th>
<th>What will success look like?</th>
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**Objective 2**

Increased support to VCOs to become effective partners in the provision of services which deliver better health outcomes for people across Berkshire West.

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<th>Lead</th>
<th>Timescales</th>
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Objective 3
continued listening and responding to the voices of different communities and population groups, in particular those who are marginalised.

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13. How we will monitor and evaluate progress

13.1 We will use the plan outlined in section 5 to monitor progress against agreed actions. Regular updates will be provided to the VCS Liaison Group to provide assurance that progress is being made.

13.2 In developing the strategy, those involved have been keen to ensure that the strategy is action focused and will lead to a fundamental shift in the way in which the CCG works with the voluntary and community sector to plan and deliver local health services. In addition to the action plan, it is proposed that the framework outlined below is used to provide evidence of change and progress against a number of outcome measures.

15.0 Assessment Framework for Change

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<tr>
<th>Objective</th>
<th>Desired Outcomes</th>
<th>Evidence</th>
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<tr>
<td>1. More effective communication between BWCCG and the VCS to identify ways that the sector can contribute to and support new ways of working and encourage innovation in health.</td>
<td>Effective relationships established between VCS and CCG  VCS involvement in strategy development and service redesign</td>
<td>Contacts recorded with VCS organisations  Joint ventures being developed  VCS input evident in strategies and business cases</td>
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<tr>
<td>2. Increased support to VCOs to become effective partners in the provision of services which deliver better health outcomes for people across Berkshire West.</td>
<td>Greater proportion of CCG budget allocated to VCS  Procurement and assurance processes and documentation appropriate to the size and scope of the investment.</td>
<td>Proportion of CCG budget allocated to VCOs  Contracts held with VCOs  Evidence that large providers of services are utilising budgets to fund joint work with VCOs.  VCS input to service pathways can be evidenced  Grant agreements-by-default and safeguarding assurance process for small-to-medium VCOs.</td>
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<td>3. Increased listening and responding to the voices of different communities and population groups, in particular those who are marginalised.</td>
<td>Service user experience is collected and used to improve the quality of local services  VCS evidence used to inform the JSNA</td>
<td>Evidence of data &amp; intelligence from VCS organisations being used in Quality &amp; contract meetings  Evidence of change/ improvement to services as a result of service user feedback</td>
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## Appendix A

### Glossary

<table>
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<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>BFHT</td>
<td>Berkshire Healthcare Foundation Trust</td>
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<tr>
<td>BW</td>
<td>Berkshire West, covering Reading, West Berkshire and Wokingham Local Authority areas</td>
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<tr>
<td>BWCCG</td>
<td>Berkshire West Clinical Commissioning Group responsible for commissioning local health services in Berkshire West, including the localities of North and West Reading, South Reading, West Berkshire and Wokingham.</td>
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<tr>
<td>BWICS</td>
<td>Berkshire West Integrated Care System includes Berkshire West Clinical Commissioning Group; Berkshire Healthcare Foundation Trust; Royal Berkshire Foundation Trust and Primary Care Provider Alliances, covering four distinct localities – South Reading, Wokingham, Newbury and North and West Reading Alliances</td>
</tr>
<tr>
<td>Commissioning</td>
<td>Commissioning involves deciding what services are needed for diverse local populations, and ensuring that they are provided.</td>
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<tr>
<td>Common Point of Entry</td>
<td>The Common Point of Entry (CPE) is the main access point for specialist mental health support. People can also refer themselves if they think they need support due to their mental illness, or their GP or professional can refer them to this service.</td>
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<tr>
<td>Five Year Forward View</td>
<td>The NHS five year forward view, published in October 2014 by NHS England, set out a positive vision for the future based around seven new models of care.</td>
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<td>GP Alliance</td>
<td>GP alliances bring groups of GP practices together, forging closer links and working more closely together, to ensure services remain sustainable.</td>
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<tr>
<td>High Intensity User</td>
<td>Individual with a high dependency upon unscheduled care services.</td>
</tr>
<tr>
<td>ICS</td>
<td>Integrated Care System comprises NHS organisations to take collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve.</td>
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<td>VCS infrastructure organisation</td>
<td>Second-tier organisation which supports VCOs – and is a VCO in its own right. Typical activity includes offering training and 1-2-1 support in legal, fundraising, governance and generic management best-practice.</td>
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<tr>
<td>IMSK</td>
<td>Integrated Musculo. Skeletal Service for people with problems with muscles, bones and joints</td>
</tr>
<tr>
<td>Long Term Conditions</td>
<td>A Long Term Condition is defined as a condition that cannot, at present be cured; but can be controlled by medication and other therapies. Examples of Long Term Conditions are diabetes, heart disease and chronic obstructive pulmonary disease.</td>
</tr>
<tr>
<td>New Care Models</td>
<td>Through the new care models programme, complete redesign of whole health and care systems are being considered. Introduced by the NHS’s Five year forward view in 2014 and launched in 2015, it aims to break down the traditional barriers between health and care org</td>
</tr>
<tr>
<td>Patient pathways</td>
<td>The patient pathway is the route that a patient will take from their first contact with an NHS member of staff (usually their GP), through referral, to the completion of their treatment. It also covers the period from entry into a hospital or a TreatmentCentre, until the patient leaves.</td>
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<tr>
<td>Planned Care</td>
<td>Routine services with planned appointments or interventions in hospitals, community settings and GP practices.</td>
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<td>Primary Care</td>
<td>Primary care services provide the first point of contact in the healthcare system, acting as the ‘front door’ of the NHS. Primary care includes general practice, community pharmacy, dental, and optometry (eye health) services.</td>
</tr>
<tr>
<td><strong>Urgent and emergency Care</strong></td>
<td>Emergency care is provided in a medical emergency, when life or long term health is at risk, for example, such as fractures and head injuries, serious injury or bleeding, severe breathing difficulties, heart attacks etc. Urgent Care is either based on a hospital site or stand-alone in the community. It provides patients with urgent advice or treatment in cases that are not life-threatening or life-changing.</td>
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<tr>
<td><strong>VCO</strong></td>
<td>Voluntary and community organisation including formally recognised charity, social enterprise and co-operative, but also includes a large number of more informal organisations that are not formally incorporated.</td>
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<td><strong>VCS</strong></td>
<td>Voluntary and community sector the collective term for VCOs. NB: whilst VCS is used as shorthand to cover all VCOs, they vary significantly, are largely independent of each other and do not ‘speak with one voice’.</td>
</tr>
<tr>
<td><strong>BWVCS Liaison Group</strong></td>
<td>Berkshire West Voluntary and Community Sector Liaison Group comprises officers from the BWCCG Joint Commissioning Team and leads from the three VCS infrastructure organisations in Berkshire West.</td>
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Appendix B

List of attendees at VCS Listening Events

Involve/CCG Listening Event – Wokingham Borough
6th June 2018

Attendees: representatives attended from the following organisations:
- Me2Club,
- Berkshire MS Therapy Centre,
- Berkshire Youth,
- Parenting Special Children,
- All Saints Wokingham,
- COATS, Wokingham Volunteer Centre,
- Stroke Association,
- Healthwatch Wokingham,
- CAB,
- Autism Angels,
- Dingley’s Promise,
- Homestart Wokingham,
- CCB,
- YPWD,
- Cornerstone Comm Centre,
- Reading Refugee Centre,
- Berkshire Carers Hub, Mencap,
- Alzheimer’s Society,
- Christ Church Woodley,
- CCG/ GP representatives
- Public Health

BW CCG Listening Event in Reading – 20th June 2018

Attendees: representatives attended from the following organisations: (29 attended out of 40 booked - plus 4 CCG)
- Sustrans
- Reading Community Learning Centre
- Macmillan Cancer Support
- Faith Christian Group
- Age UK Berkshire
- Creative Support
- Autism Berkshire
- South Reading Patient Voice
- Citizens Advice Reading
- Home-Start Reading
- The Mustard Tree
- Berkshire West Your Way
- Reading Mencap
- Stroke Association
- Age UK Reading
- Reading Families Forum
- Dimensions
- Alliance for Cohesion and Racial Equality
- Reading West SDA Church
No 5 Youth Counselling  
Healthwatch Reading  
Reading Refugee Support Group  
RVA Social Prescribing  
Berkshire West CCG x4

**BW CCG Listening Event at Newbury College**  
**Wednesday 27th June 2018**  
**Organisations represented: (17 attended out of 18 booked - plus 4 CCG)**

- Berkshire Youth  
- Children and Young People’s Forum  
- West Berkshire Public Health and Wellbeing  
- Home-Start WB  
- Swings and Smiles  
- Rose Road  
- Patient Information Point  
- Remap Berkshire  
- Stroke Care  
- Time 2 Talk  
- West Berkshire Therapy Centre  
- Enrych  
- Recovery in mind  
- HealthWatch West Berkshire  
- Macmillan Cancer Support  
- SEAP Advisory  
- Homeless Forum  
- BIG Lottery - observing  
- Volunteer Centre West Berkshire
Appendix C) The NHS commissioning cycle

![Diagram of the NHS commissioning cycle](image_url)

Courtesy of The NHS Information Centre for health and social care. Full diagram available at: www.ic.nhs.uk/commissioning