

Communities & Third Sector Commissioning Prospectus 2017-2020



*Brighton and Hove
Clinical Commissioning Group*



**Brighton & Hove
City Council**

Contents

1. Overview.....	3
2. The commissioning plans, funding, outcomes and objectives	11
3. The Outcomes and Maximum Funding Available	13
4. How to Apply	33
4.1 Overview of Requirements.....	33
4.2 Timetable	45
4.3 Process.....	46
4.4 Evaluation	48
5. Checklist.....	50
6. Terms & Conditions	51
7. Acronyms.....	52
8. Glossary	52

1. Overview

1.1 Introduction

Welcome to the Communities and Third Sector Commissioning Prospectus published jointly by Brighton & Hove City Council and the local NHS.

Public services are under increasing pressure as a result of both increasing demand and reducing resources. The Third Sector remains key to helping the council and its partners respond to this challenge. To support the required changes the council has reviewed its Third Sector investment and commissioning arrangements to ensure they are delivering maximum value for money, meeting community need and effectively supporting the Voluntary and Community Sector to improve and thrive. In doing this the council at its Neighbourhood, Communities and Third Sector Committee in July 2016 agreed a Third Sector Investment Programme which has two constituent parts: a three year Communities and Third Sector Commissioning Prospectus and an annual Communities Fund.

The Communities and Third Sector Commissioning Prospectus 2017 -2020 builds on the achievements and learning from the council's discretionary grant programme, the current Financial Inclusion Commission, the existing Communities and Third Sector Commission 2014-2017 and other relevant commissions.

It has been developed in collaboration with the Voluntary and Community Sector (VCS) through a range of meetings and discussions between October 2014 and June 2016 including dialogue specifically with current commissioned providers, large events open to CVS organisations of all sizes, and locality based evening drop-ins for small groups facilitated by community development providers.

As a result Brighton & Hove City Council and NHS Clinical Commissioning Group are pooling their investment and resources and working in partnership to deliver this prospectus. The prospectus brings together investment from different parts of the Council (Communities, Equality and Third Sector Team, Adult Social Care and Public Health) and the local NHS Clinical Commissioning Group (CCG).

The approach and funding investment shows the commitment of the City Council and the CCG to working in partnership with communities and the Third Sector to support growth and development. We want to cultivate a climate that develops flexible and creative responses to address the increasing and changing needs of people in Brighton and Hove.

The prospectus focuses on key outcomes for the city influenced by the findings of the independent Fairness Commission. This means that we are moving away from our current funding model which is directed more to service areas and moving towards outcomes. Also, the way existing programmes are currently structured does not fully reflect current needs of our communities.

Our new approach will allow more flexibility and a more effective use of resources to have greater impact on the outcomes we want to influence within the city.

We appreciate that this is a change of approach by the council and the CCG and this may pose some challenges and difficulties for organisations facing change and a potentially

uncertain future. The new approach should provide opportunities, not present barriers. In the consultation process we have received many comments highlighting organisations' concerns and we hope that we have been able to address them as far as we can in this prospectus.

Commissioning through the prospectus aims to balance a fair and transparent procurement process with the advantage of welcoming partnership working in order to achieve agreed outcomes. Cross cutting in its approach, it builds on the assets of the Third Sector, promoting enterprise and social value. It seeks to remove barriers and promote diversity in the sector, allowing new approaches, particularly community based responses to issues. Underpinning the new programme is a set of principles developed in collaboration with the VCS since October 2014 which emphasise standards of accountability, transparency and best use of resources, with success being measured on improving outcomes for residents.

The Communities and Third Sector Prospectus aims to invest partnership that can deliver the deserved outcomes. We expect applications to the fund to show very clearly how their proposals will help achieve the outcomes. To help in the process we have developed a guide. Please see attached documents entitled “**Guide to Selecting and Measuring Outcomes**”.

The outcomes have been checked against the findings of the independent Fairness Commission. Many VCS groups and organisations gave evidence to the Fairness Commission. We are therefore confident that this Communities and Third Sector Commissioning Prospectus is targeted on the most important issues facing Brighton & Hove during the next few years.

This will be a three year programme. It is important that organisations have the opportunity to deliver an effective programme over a period of years confident that resources will continue to be there to support them.

Before applying to the Communities and Third Sector Prospectus, applicants should refer to:

- Brighton & Hove City Council's Corporate Plan
- Brighton & Hove Adult Social Care: The Direction of Travel 2016 - 2020
- Brighton and Hove CCG's Operating Plan 2016/17, Strategic Commissioning Plan 2012-2017 and the Patient and Public Participation Strategy
- Brighton & Hove City Council Communities and Third Sector Policy
- Brighton & Hove City Council's Community Development Strategy
- Brighton & Hove Fairness Commission Findings
- The Public Services (Social Value) Act 2012
- The Equality Act 2010

1.2 Informing the Commission: Key Policy and Strategic Documents

1.2.1 Prospectus Commissioning Outcomes

In Brighton and Hove we see commissioning as the process by which commissioners ensure that appropriate services are available at the right quality and cost to meet needs and deliver strategic outcomes now and into the future. The Communities, Equality and Third Sector Commissioner and the NHS CCG Head of Engagement have worked with a range of stakeholders to develop this prospectus and ensure that the activity invested in delivers against the city's strategic plans.

The Communities and Third Sector prospectus commissioning outcomes have been developed and informed through a range of processes:

- Use of comprehensive evidence to understand the needs of our communities in relation to the City Council's Corporate Plan, findings from 'Taking Account 3 (2013) – social and economic audit of the Third Sector in Brighton and Hove, community development and engagement, residents involved in running Third Sector organisations and groups and the findings of the Fairness Commission.
- An Equality Impact Assessment which drew on the findings of 'Taking Account 3' as well as census data, evidence from evaluation of the Three Year Strategic Grants programme and performance monitoring of the current infrastructure, community development, engagement and representation and influence work.
- A range of engagement events and meetings with Third Sector organisations where we listened to their views and experiences.
- Joining up delivery where appropriate across the council, NHS CCG and our partners; maximising all resources available.
- Using good practice and innovation to add value and maximise resources.

The programme is based on achieving high level outcomes set out in the Council's Corporate Plan and in the NHS Clinical Commissioning Group's Strategic Commissioning Plan and Operating Plan 2016/17 as well as against the various strategies of the city. These outcomes provide the framework for the delivery of all the council's & NHS CCG services in the future and seek to achieve some radical changes. The individual outcomes which we will expect from voluntary and community organisations which are supported by this new funding programme will be more targeted but will contribute towards achieving the higher level outcomes.

Focussing on outcomes promotes the results and positive changes which are important to people either individually or as a community. It shifts the focus from processes such as numbers of service users, opening hours or website hits to the impact on people's lives and their experience of the services which they use.

This is not new. Many organisations funded by the council during the past few years will have experienced a greater focus on demonstrating the impact of their activities in their reporting back. This programme develops this approach further and before applying we would recommend that applicants familiarise themselves with the following:

1.2.2 Brighton & Hove City Council's Corporate Plan

The council's purpose is to provide strong civic leadership for the wellbeing and aspiration of the city. It places great importance on the relationship between the council and the communities it serves and sees that there is a need to strengthen our partnership delivery arrangements and build collaborative, trustful and empowering relationships between council and citizens.

The four strands of the council's purpose are:

- A good life: Ensuring a city for all ages, inclusive of everyone and protecting the most vulnerable.
- A well run city: Keeping the city safe, clean, moving and connected.
- A vibrant economy: Promoting a world class economy with a local workforce to match.
- A modern council: Providing open civic leadership and effective public services

More information about Brighton & Hove City Council is available on our [website](#).

The prospectus is aimed at creating a more business-like footing with the VCS through better; more coordinated commissioning by the council. In line with the corporate plan, the prospectus aims to invest in strategic Voluntary and Community organisations;

- So that there are opportunities for more citizens to play an active role in the creation and provision of services for their local community;
- To improve engagement with communities of interest and identity to foster good relations across the city, and tackle discrimination and prejudice.
- So that there are opportunities for the council to collaborate more with the VCS, with other public services and businesses to find common and jointly owned solutions;
- To tackle financial exclusion through coordinated support across the council, and through our VCs partnerships;
- To continue work to create a better understanding of the needs of Trans, Black and Minority Ethnic and disabled people, and use it to tailor service provision;
- To support early intervention and prevention for vulnerable families to ensure better long term outcomes and reduce the cost of expensive interventions once families reach crisis.

1.2.3 Brighton & Hove Adult Social Care: the direction of travel 2016-20

BHCC Adult Social Care are currently undergoing a significant period of change. Alongside increasing financial challenges and statutory duties, the Care Act provides the framework through which the council must operate in meeting the care and support needs of adults and carers in the city.

Personalisation is at the heart of the change. This includes engaging with local people in service design and development, working with people to assess their individual needs and design support plans, ensuring all eligible service users have a personal budget and people are supported to receive this as a direct payment, developing a care market that can respond creatively to people's needs and aspirations and supporting people to use direct payments creatively and collectively within their communities. Delivering this vision is wholly aligned to local authorities duties under The Care Act.

These outcomes can only be achieved through partnership working between the council, local NHS organisations, other statutory agencies, the private and Voluntary and Community Sector and most importantly people who use services and their carers.

1.2.4 Brighton & Hove Clinical Commissioning Group

The CCG is driven by the desire to improve the health of all the residents of Brighton and Hove.

The CCG values are:

- We are accountable to the people of Brighton and Hove as well as our member practices
- We are committed to making decisions openly in a way that is easily understood
- We place patients, their families and the public at the centre of everything we do
- We value innovation, and will create an environment that supports good ideas
- We take time to celebrate achievements
- We listen to, and respect, patients, the public, staff and clinicians
- We value the highest standards of excellence and professionalism in the provision of healthcare that is safe, effective and focussed on patient experience
- We value and uphold the NHS Constitution in all that we do.

The CCG values opportunities to work in partnership with the city council, other statutory sector organisations and the VCS. We are committed to working with local communities to understand their health needs, and work collaboratively to develop responsive and effective ways to support wellbeing.

More information on the CCG is available at: <http://www.brightonandhoveccg.nhs.uk/>

1.2.5 Brighton & Hove City Council Communities and Third Sector Policy & Community Development Strategy

Agreed in December 2013, the [policy](#) supports and sits alongside the city's Power of Volunteering Pledge, the Community Engagement Framework, as well as the BHCC Community Development Strategy and Social Enterprise Strategy. The BHCC Communities and Third Sector Policy has an overarching outcome:

'To ensure that the city has an increasingly efficient and more effective Third Sector; one that is ready and able to bid for and deliver public services, that enables citizens and communities to have a strong voice in decision making about public services and supports community resilience and well-being through independent citizen and community activity. That the council's culture and systems enable a collaborative and productive relationship with the Third Sector making the best use of its flexibility, creativity and added value'.

This outcome is followed by five objectives:

- 1) **Sustainable and Effective Third Sector:** Ensure that Third Sector groups and organisations in the city have access to high quality, local infrastructure support. This support will enable them to be more efficient, effective and sustainable in increasingly complex funding environments and service users demand.

- 2) **Effective and Inclusive Community Engagement:** Ensure that Third Sector groups and organisations are able to deliver high quality community engagement with Communities of Identity, Interest and Place. In particular, engaging with marginalised groups and communities and people not previously engaged; so that communities are better able to inform council decision making.
- 3) **Strong Communities:** Ensure that Third Sector groups and organisations are able to deliver high quality community development using an asset based approach; such that it improves community well-being, resilience and builds social capital.
- 4) **Better Collaboration:** Ensure high quality collaboration between communities, the Third Sector and the council to improve the design and delivery of public services and maximise the impact of public investment.
- 5) **Sustainable Resourcing and Support:** Ensure the availability of high quality council resource and support that will continually improve strategic and operational work between the council and the sector.

1.2.6 Brighton & Hove City Council Community Development Strategy

The 2011 Community Development Strategy provides a framework for commissioning and implementing Corporate Plan commitments. The council Community Development Strategy adopted the following definition of Community Development, (which is taken from The Federation of Community Development - <http://www.fcdl.org/home>).

“Community Development is a long-term, value based process which aims to address imbalances in power and bring about change founded on social justice, equality and inclusion. The process enables people to organise and work together to:

- *identify their own needs and aspirations,*
- *take action to exert influence on the decisions which affect their lives,*
- *improve the quality of their own lives, the communities in which they live, and societies of which they are a part.”*

The council believes that people in communities can drive change and development processes themselves. It recognises that community development plays a key role in unlocking some of the barriers that exist to make this happen; particularly for the most disadvantaged people and places.

The council’s community development approach is based on the principles of equality and solidarity and as such community development resources will be targeted at those people and communities who are more disadvantaged and/or experience discrimination. The strategy can be found at [http://present.brighton-hove.gov.uk/Published/C00000120/M00003227/AI00023767/\\$Cabinet%20Report%20for%20Community%20Development%20Strategy%20&%20Neighbourhood%20Governance%20enc.%201.docA.ps.pdf](http://present.brighton-hove.gov.uk/Published/C00000120/M00003227/AI00023767/$Cabinet%20Report%20for%20Community%20Development%20Strategy%20&%20Neighbourhood%20Governance%20enc.%201.docA.ps.pdf)

1.2.7 Fairness Commission

The [Fairness Commission](#) was set up to find out how to make Brighton & Hove a fairer and more equal place to live and work. Launched in September 2015, it was set up by the council as an independent body. The [12 commissioners](#) on the Fairness Commission

explored issues that cause inequality and [listened to the concerns](#) of residents, community organisations and businesses across the city. The Fairness Commission released its report on 27 June 2016. The report provides recommendations to the council and its partners to increase opportunities for the city's residents. Before applying for this funding it would be useful to identify if your intended activity responds to any of the Fairness Commission recommendations and if so make sure you explain why, as well as ensure that the intended outcomes are in line with the prospectus outcomes. The full report is available at <http://www.brighton-hove.gov.uk/sites/brighton-hove.gov.uk/files/Report%20-%20Fairness%20Commission.pdf>

1.2.8 Equalities

The Equality Act 2010 simplifies and strengthens the law around tackling discrimination and inequality. The public sector equality duty ensures that all public bodies play their part in making society fairer by tackling discrimination and providing equality of opportunity for all. It ensures that public bodies consider the needs of all individuals in their work, and the impact of all their functions, when shaping policy, delivering services and in relation to employees. The Equality Duty covers the following protected characteristics and, by association, those who care for them: Age, Disability, Sex, Gender Reassignment, Race, Religion and Belief, Sexual Orientation, Pregnancy and Maternity, and Marriage and civil Partnership (in respect of having due regard to eliminate discrimination).

Some groups and communities in the city find it more difficult to have their voices and experiences heard, and therefore may require additional support and resource in order to feed back, participate and help shape and improve local services.

Commissioners are committed to engaging with the widest possible range of people and groups in order to inform the development, commissioning and review of services. Therefore, successful bids for funding through the prospectus will have considered the unique and diverse make-up of the city's communities, and will ensure that their proposed service can demonstrate that it is accessible and that it reflects need.

Guidance on the public sector Equality Duty and procurement can be found here:

<http://www.equalityhumanrights.com/advice-and-guidance/public-sector-equality-duty/guidance-on-procurement/>

Further statistical information about the citizens and Third Sector of Brighton and Hove is available through Community Insight and the Joint Strategic Needs Assessment (JSNA) at:

<http://www.bhconnected.org.uk/content/local-intelligence>
<http://www.bhconnected.org.uk/content/needs-assessments>

1.2.9 Social Value

The Public Services (Social Value) Act 2012 encourages all public bodies to consider how the services they are commissioning might improve the environmental, social and economic well-being in the area. It expects commissioners to think about how scarce resources can be allocated and used to best effect and reminds them to look not only at

the price of a service but also at the collective benefit to a community as a result of a service being commissioned.

In July 2016 Brighton and Hove City Council's Neighbourhood, Communities and Equalities Committee and the Clinical Commissioning Group Governing Body endorsed a new 'Social Value Framework' for the city and a new Social Value Guide for Commissioners, Contract & Procurement Teams and Providers. Please see attached documents entitled "**Brighton and Hove Social Value Framework**" and the "**Brighton & Hove City Council Social Value Guide for Commissioners/ Contract & Procurement Officers & Suppliers.**"

As part of this commissioning process, we have conducted engagement and consultation processes with key stakeholders, which have highlighted the opportunities for this work to add to and further develop social value in the city. In commissioning these services Brighton and Hove City Council and the Clinical Commissioning Group acknowledge the key environmental, social and economic benefit that the applicants will bring to the successful delivery of these outcomes for citizens of Brighton & Hove.

Consequently, whilst funding applications will still be evaluated against value for money and quality criteria they will also be critically measured in terms of the contribution they will make to social value in the city.

2. The commissioning plans, funding, outcomes and objectives

2.1 Overview of the Outcomes

In this prospectus we are investing in strategic partnerships between Third Sector organisations that bring significant changes for beneficiaries in the following areas:

- **Strategic Outcomes** – Investment to fund core and/or project costs between two or more Third Sector organisations that are working or starting to work in partnership to deliver against one of the stated strategic outcomes.
- **Third Sector Infrastructure** – To ensure that Brighton and Hove’s Third Sector groups and organisations in the city have access to high quality, local infrastructure support which will enable them to be more effective, equitable, efficient and sustainable in delivering change for citizens in the city.
- **Community Development** – Delivers high quality community development provision, using an asset based approach that improves community health and well-being, resilience and builds social value.
- **Community Engagement** - To enable effective engagement with marginalised groups and communities and people not already involved, so that communities are better able to inform council decision making.
- **Community Banking Partnership** – To enable not-for-profit organisations in the city to deliver a Community Banking Partnership which integrates provision to low income households and includes the provision of money advice, access to Banking, Credit, Deposit, Education in terms of financial capacity, Food and Fuel efficiency (Also known as the ABCDEFF Framework).

We wish to see that all organisations bidding to deliver this work have carefully considered how they may work in partnership to ensure a consistent, joined up approach for the benefit of the citizens of Brighton & Hove.

2.2 The principles

Applicants should be aware that in planning your delivery against these outcomes the following set of principles have been agreed and your bid will be assessed against these criteria and will form part of the assessment criteria for all applications. Please see section 4.4 for details on the evaluation criteria.

1. Collaborative arrangements and partnerships between Third Sector organisations which will result in a developed partnership over the period of funding
2. Partnerships and collaborations that
 - a) have equality, inclusion and diversity embedded in their activities, governance and management arrangements
 - b) provide opportunities for public involvement and for volunteering
 - c) promote technology-enabled solutions and digital inclusion
3. Models of delivery that
 - a) are accountable to their beneficiaries
 - b) embed and promote principles of safeguarding
 - c) lead to a decrease in demand for public services

4. Services that are resilient and well-equipped to meet future needs, with creative and innovative, modern and enterprising business models that attract funding from a range of sources
5. Prevention and early intervention activities related to the outcomes
6. Approaches to achieving the stated outcomes that deliver social value- i.e. : *“Additional benefit to the community from a commissioning/procurement process over and above the direct purchasing of goods, services and outcomes”* which contributes to:
 - a) Increased community resilience
 - b) Increase in education and training opportunities
 - c) Improved employment opportunities and experiences
 - d) Increased impact of volunteering
 - e) Minimisation of environmental impact
 - f) Supporting the Brighton and Hove Living Wage

2.3 Funding

The funding period is from the 1st April 2017 to 31st March 2020. Funding will be subject to an annual review, achievement of defined targets and annual council and CCG budget setting in February of each year.

	Year 1 1 April 2017 – 31 March 2018	Year 2 1 April 2018 – 31 March 2019	Year 3 1 April 2019 – 31 March 2020
Communities & Third Sector Team (BHCC)	£1,797,000	£1,691,180	£1,591,609
Adult Social Care (BHCC)	£ 73,152	£ 73,152	£ 73,152
Public Health (BHCC)	£ 50,000	£ 50,000	£ 50,000
NHS CCG	£ 319,000	£ 319,000	£ 319,000
Total	£2,239,152	£2,133,332	£2,033,761

In order to provide commitment and some security for the delivery of these outcomes, investment through this prospectus will be offered on a three-year basis to enable Third Sector organisations to develop their services and improve their capacity to meet emerging need.

The council &/or CCG may at its discretion withhold some of the funding available if as a result of the Equality Impact Assessment, or through a shortfall in applications received, it has identified gaps in provision or there is potential for a lack of suitable provision through any proposed decommissioning activities.

3. The Outcomes and Maximum Funding Available

Section 1: Strategic Outcomes

This is the City Council's principal investment to fund core and/or projects between two or more Third Sector organisations that are working or starting to work in collaboration or in partnership to deliver against one of the stated strategic outcomes. The funding aims to maximise the use of existing strengths, assets and resources of Third Sector organisations for the benefit of local residents; improve life chances and opportunities for residents to ensure that they are not held back because of background, circumstance or identified community and to increase opportunities for residents from different backgrounds to be more connected and more involved in local social action, to help themselves and each other.

1.1 Enable adults with complex needs and/or long term health conditions, who are at risk of exclusion and social isolation, to fulfil their potential socially and economically in the city, so that they have the tools to self-manage their health conditions (where possible) effectively, improve their resilience, independence and connections in the city.

Target groups:

- People who experience additional vulnerability or risk of exclusion linked to their protected characteristics: age, sex, gender identity, sexual orientation, disability, learning disabilities, marital status, ethnicity, faith;
- People in poverty or on low income;
- People who experience additional vulnerability or risk of exclusion because of language barriers and/or interpreting needs;
- Carers;
- People struggling with addictions;
- Individuals in insecure housing or at risk of homelessness or homeless;
- Survivors and/or perpetrators of domestic violence & sexual violence;
- Ex-offenders;
- Individuals not in work or at risk of unemployment.

1.2 Enable children, young people (0-25 years) and families¹ who have multiple disadvantages and/or complex needs to fulfil their potential and reduce their risk of exclusion and social isolation by building their resilience, independence and connections, so they can participate in the social and economic life of the city.

Target groups:

- Teenage parents and families;
- Children in care and/or leaving care;
- Carers and young carers
- Children living in in-work and out of work poverty;
- Households with children and/or adult(s) (including parents) with a disability including ADHD and Autism and learning disabilities;
- Women;
- BME children and families;
- Refugees and asylum seekers;

¹ Families include people with no dependents

- LGBT children, young people and families;
- Young people at risk of exclusion from school or not in employment, education or training;
- Households with individuals with, or at risk of, mental and physical ill health including self-harm and/or trauma;
- Survivors and/or perpetrators of domestic violence & sexual violence;
- Family members including children at risk of sexual exploitation;
- Families where a child is at risk or on the child protection register or has a children-in-need plan;
- Families and/or young people struggling with addictions.

1.3 Create safe and more inclusive neighbourhoods and community space that encourages greater use and ownership by citizens. Encourages neighbourliness and community cohesion, the feeling of safety, reduces crime and disorder and promotes and improves health and wellbeing.

Target groups and issues:

- IMD top ranking neighbourhoods;
- Pockets of deprivation;
- Marginalised communities;
- Areas where households will be most affected by the 20k Benefit Cap: Queens Park, East Brighton, Moulsecoomb and Bevendean, Hollingdean and Stanmer, Hangleton and Knoll, Goldsmid, St Peter's and North Laine, and South Portslade.

1.4 Enhanced community wellbeing, improving people's sense of belonging through greater, more inclusive and innovative cultural and leisure opportunities for people that improve people's physical and mental wellbeing and resilience.

Target groups:

- People who experience additional vulnerability or risk of exclusion linked to their protected characteristics: age, sex, gender identity, sexual orientation, disability ethnicity, faith, marital status and paternity and maternity status;
- Low income families and individuals – of all ages.

1.5 Supporting innovative action to make best use of energy, resources and facilities, support positive engagement of people with the environment and enable healthy and sustainable communities.

Themes:

- Supporting individuals and communities that are vulnerable and/or at risk of exclusion;
- Improving the built or natural environment;
- Water and energy efficiency and renewable energy;
- Recycling / re-use, green fuel / affordable transport;
- Conservation, wildlife;
- Local and healthy food;
- Not-for-profit social / environmental enterprise;

Total maximum funding available for Strategic Outcomes 1 to 5	Year 1 (subject to budget setting February 2017)	£870,000
	Year 2 (subject to budget setting February 2018)	£817,800
	Year 3 (subject to budget setting February 2019)	£768,732

Section 2: Partnership between Third Sector Infrastructure Support, Community Development & Community Engagement

The Council and NHS Clinical Commissioning Group want to commission Third Sector infrastructure support, community development and engagement that support partnership and collaborative leadership.

By this we mean developing a genuine **partnership** between the providers and the council and CCG that recognises the unique role of each but which seeks to find new ways to work together. **Collaborative leadership** refers to cultivating more equal relationships (recognising differences) between the Third Sector and statutory bodies; to skilfully manage relationships in ways that help organisations to succeed in delivering activities for and with their beneficiaries that have positive impact; to help define and develop shared purposes (whilst recognising differences) for organisations; supporting residents and communities to find solutions and to work with Brighton & Hove City Council & the NHS Clinical Commissioning Group in collaborative, inclusive and innovative ways.

There is recognition in the City Council's Third Sector Policy that the council's culture and systems need to alter so as to enable a collaborative and productive relationship with the Third Sector so as to make best use of the Third Sector's flexibility, creativity and added value.

This investment seeks to:

- a) support an increasingly efficient and more effective Third Sector, which is providing services and activities for local communities, able to bid for and deliver public services and brings inward investment to the city;
- b) deliver capacity building that enables communities to have a role in decision making about public services in the city and supports community resilience and wellbeing through resident and community and voluntary activity;
- c) build on the successful community development work in the city to recognise that it is the capacities of local people and their community and voluntary activity that builds powerful communities;
- d) jointly commission a range of neighbourhood and equality based community development support which includes the delivery of a small grants approach to community health initiatives and is open to the provision of flexible support for smaller areas across the city;
- e) facilitate effective city wide engagement activity that enables communities to evidence and articulate their needs, ambitions and assets, working closely with the Council and CCG to drive up the quality of services and make better use of resources.

Outcome 2.1 : Partnership arrangements between 2A) generic and specialist capacity building services, 2B) community development, 2C) Healthy Neighbourhood Fund and 2D) organisations that engage effectively with people, eliminate duplication, maximise different expertise, knowledge, learning, resources and networks, and provide a clear, understandable and accessible pathway of support for different sizes and types of groups and organisations in the city.

As a result of these partnership working arrangements

a Enable effective work with council services and clinical commissioning/ health and wellbeing

structures;

- b Improve the connections between community development organisations, engagement work and generic and specialist capacity building services;
- c Increase inward investment/funding to support the work;
- d Improve the equality standards and diversity practice of organisations which are part of the partnership;
- e Evaluate the impact of working collectively in achieving the outcomes;
- f Provide accessible, inclusive and effective digital platforms and face-to-face delivery to ensure effective volunteering, staffing and support for community groups, voluntary organisations and resident involvement in neighbourhood and citywide developments.

2A. Generic Capacity Building (Infrastructure) Outcomes

Please make sure you address Outcome 2.1

2A.1 Third Sector Organisations and Community Groups have the capacity (e.g. skills, knowledge, resources) and access to equipment, to deliver public services and sustain their not-for-profit activities to complement and/or jointly deliver outcomes for residents with Brighton & Hove City Council and NHS B&H Clinical Commissioning Group

As a result of the Third Sector infrastructure, Third Sector Groups and Organisations are more efficient and effective and

- a. The Sector receives relevant support for all types of organisational structures;
- b. Increase their knowledge of current local, regional and national government developments affecting their work;
- c. Improve their governance and management structures;
- d. Increase their knowledge, skills and qualifications;
- e. Increase understanding and ability to deliver safe, sustainable, quality services;
- f. Improve their fundraising and increase income generation from a variety of income sources;
- g. Improve their ability to evidence and articulate their impact, value for money and social value;
- h. Improve their equality and diversity practice across all groups and organisations to include a diversity of people in their organisational structures and activities; particularly BME, LGBT, disabled (including carers) people and individuals of faith;
- i. Increase their capacity to effectively use digital, IT and social media.

2A.2 There are effective and efficient Third Sector partnerships/collaborations to deliver services, either commissioned by the public sector or funded independently, that meet the needs and ambitions of the city's communities

As a result of the third sector infrastructure services, third sector groups and organisations collaborate with one another and/or with public sector organisations and or businesses to develop effective partnerships and collaborations that:

- a. share knowledge, expertise and experience to enable change;
- b. maximise resources when delivering services and activities;
- c. maximise impact of services and activity for citizens;
- d. maximise inward investment;
- e. sustain and enable trusted relationships and partnerships.

2A.3 Groups and organisations across the sectors effectively recruit, use and support volunteers in their service delivery and organisational structure

As a result of the Third Sector Infrastructure Service, organisations across the sectors:

- a. provide more accessible, high-quality volunteering opportunities for people by addressing particular barriers to volunteering for LGBT people, BME people and disabled people;
- b. improve their volunteering recruitment practices, support and co-ordination of volunteers;
- c. maximise opportunities for engaging volunteers from businesses;
- d. contribute towards meeting the ambitions of the city's Power of Volunteering.

Performance and Performance Indicators will be measured against the NAVCA Quality

Quality Indicators	Award Standards. Organisations should hold or be working towards the NAVCA Quality Award Volunteer related activity should have or be working towards volunteer centre quality accreditation
What we are looking for	Delivery of a co-ordinated model that enables flexibility and ongoing dialogue with key decision makers in the council & CCG in relation to the future planning of, and delivery related to council and CCG strategic objectives. Evidence of a cost effective model that intersects with the community development and engagement outcomes Clear pathways of support that make sense to community and voluntary organisations Clear pathways of support developed for ward councillors working with community groups and/or voluntary organisations Effective collaboration and understanding between faith based VCS and other parts of the sector. Developing an effective engagement model with the Health and Social Care Faith Forum that enables the city council and CCG to engage with faith groups.
What we are NOT looking for	An uncoordinated infrastructure model which is NOT integrated with all community development providers and community engagement providers and outcomes
Target groups and organisations	To provide flexible support to all Third Sector groups and organisations with priority given to those groups and organisations supporting communities of interest/identity working with <ul style="list-style-type: none"> ▪ BME people ▪ Disabled people including carers ▪ LGBT people ▪ Parents and families ▪ Third Sector groups and organisations who have not been involved or engaged previously ▪ Faith based groups and organisations supporting social justice and work with the Health and Social Care Forum
Total maximum funding available subject to annual budget setting.	Year 1 = £411,000 (£320,000 CETS and £91, 000 CCG) which includes core costs This includes £10,000 for faith work Year 2 = £391,800 (£300,800 CETS and £91,000 CCG) which includes core costs This includes £9400 for faith work Year 3 = £373,752 (£282,752 CETS and £91,000 CCG) which includes core costs This includes £8836 for faith work

2B. Community Development

Please make sure you address Outcome 2.1

2B.1 Delivers high quality outcome led community development provision and resources, using an asset based approach that improves community well-being, resilience and builds social capital

As a result of community development, activity shows:

a Improved public sector and resident area based approaches that build on the skills, abilities

<p>and practical assets within communities and neighbourhoods;</p> <p>b Increased and diverse partnership working across sectors to assist and improve delivery of neighbourhood and community priorities;</p> <p>c Increased understanding and practice of inclusion and equality in all community and neighbourhood activity;</p> <p>d Increased support for intersectional identities;</p> <p>e Effective bridging role between communities and cross sector organisations including the council and CCG, without developing dependency;</p> <p>f Effective initiatives at a neighbourhood level that integrate with and deliver citywide strategic objectives.</p>	
<p>2B.2. Building the capacity of communities of interest, identity and place to work collaboratively, and to develop groups and services that identify and meet their need - independent of and with public services</p>	
<p>As a result of community development:</p>	
<p>a. Complex community agendas are facilitated towards collective solutions where residents are leading the change and solutions</p> <p>b. People of identity/interest are able to participate individually and collectively, to address their priorities and drive change at a local level</p> <p>c. People and groups learn, use and share skills, knowledge, expertise and abilities through their community activity.</p> <p>d. Residents will have improved access to and use of resources, information and training particularly in relation to digital technologies</p> <p>e. Communities will have a clear achievable local plan that sets out the vision and priorities for the area. This will include:</p> <p>e.1 Health and wellbeing;</p> <p>e.2 Communities run self-sustaining project activities and services that respond to the local plan;</p> <p>e.3 Relationships are improved across all communities and stakeholders, including public sector staff, businesses and councillors.</p> <p>f. Individuals are supported to be active citizens, volunteers and to take up Public Service volunteer opportunities</p>	
<p>2B.3 Delivers engagement activity which contributes and shapes neighbourhood based working in conjunction with the city council and CCG</p>	
<p>As a result of community engagement:</p>	
<p>a Communities are supported to research and articulate their needs and issues and feed them into public sector decision-making mechanisms and structures.</p> <p>b Individuals participating in engagement are supported to develop their capacity or access other development/capacity building opportunities within or external to the Third Sector group/organisation</p> <p>c Engagement activities include working with service providers, citizens and groups to develop further coproduction and collaboration approaches to service development and redesign.</p>	
<p>What we are looking for</p>	<p>Community development that enables residents, public services, voluntary sector and businesses to work collaboratively and empower residents and communities to develop solutions and drive change</p> <p>Evidence of a cost effective model that intersects with the infrastructure and engagement outcomes</p> <p>Clear pathways of support that make sense to communities, small groups and voluntary organisations and ward councillors working with them</p>
<p>What we are NOT looking for:</p>	<p>We do not want community development providers to be leading community work; this is about empowering and supporting individuals and groups to drive change themselves.</p> <p>An uncoordinated community development model which is NOT integrated</p>

	with infrastructure and community engagement providers and outcomes.			
Target groups	To provide flexible support to individuals and community groups to access community development support. This would include: <ul style="list-style-type: none"> ▪ BME people ▪ LGBT people ▪ Parents and families ▪ Disabled people and carers ▪ Older people ▪ People who have not been involved or engaged previously ▪ Economically excluded communities ▪ Faith based groups and organisations supporting social justice at a neighbourhood level ▪ Prevention work in relation to crime types both in the public and private sphere 			
Areas		Year 1	Year 2	Year 3
	Bevendean	£21,000	£19,740	£18,556
	Bristol Estate & Whitehawk	£38,500	£36,190	£34,019
	Hangleton & Knoll	£39,300	£36,942	£34,725
	Hollingdean	£38,440	£36,134	£33,966
	Moulsecomb & Bates Estate	£30,310	£28,491	£26,782
	Portslade & Portland Road	£29,610	£27,833	£26,163
	Queens Park & Craven Vale	£29,340	£27,580	£25,925
	Tarner & Eastern Road	£37,500	£35,250	£33,135
	Flexible city wide support	£31,000	£29,140	£27,392
	Core Costs	£36,000	£33,840	£31,809
Total maximum funding available subject to annual budget setting.		£331,000	£311,140	£292,472

2.C Healthy Neighbourhood Fund

Please make sure you address Outcome 2.1

The Healthy Neighbourhood Fund (HNF) is a health development fund that runs in neighbourhoods and is led by residents. The HNF contributes to reducing inequalities in health by ensuring resources are targeted to priority communities living in identified neighbourhoods (as outlined below). It contributes towards the national Public Health Outcomes Framework objectives around health improvement, addressing the wider determinants of health and preventable ill health.² For detailed information about the health of people in Brighton and Hove please refer to Community Insight at <http://brighton-hove.communityinsight.org/> and the JSNA at <http://www.bhconnected.org.uk/content/needs-assessments>

It will be expected that the provider will manage the funding allocation to the specified neighbourhoods in Brighton & Hove and work with the neighbourhoods to identify people / groups that are most appropriate to receive funds from the HNF in line with the expected health outcomes. In addition, the provider will ensure effective accounting systems, effective delivery, and co-ordinate review and reporting of how the fund has been used.

2C.1 An effective and resident involving neighbourhood based health funding programme

² <http://www.phoutcomes.info/>

delivered in 11 neighbourhood areas of Brighton & Hove.	
As a result of the Healthy Neighbourhood Fund:	
<ul style="list-style-type: none"> • Communities are more aware of and informed about local health issues; • Communities have a range of health projects, initiatives and activities funded in their neighbourhoods, developed using a range of approaches; • Local people are involved in the HNF decision-making process regarding the allocation of funds, to embed knowledge and skills relating to health; • Where possible an asset-based approach is used - building on local strengths, developing individual/group capacities, good practice and 'what works'³; • Links are made with relevant health promoting services in the city; • Projects, initiatives and activities are supported with monitoring and evaluation processes. 	
What we are looking for	<ul style="list-style-type: none"> • A provider to administer and ensure accountability and involvement of local residents in the allocation and use of funds which deliver resident led health and wellbeing activities, projects and initiatives that address the following criteria; <ol style="list-style-type: none"> 1. Improving diet, nutrition and helping to reduce obesity by developing cooking skills, food growing etc. 2. Encouraging active living & increasing exercise 3. Mental health & wellbeing; promoting the 5 ways to emotional wellbeing, stress and relaxation, improving self-esteem. 4. Activities that support healthy ageing and improve health-related quality of life for older people and reducing isolation. 5. Projects that raise awareness of the health messages and services about alcohol, tobacco, drugs and sexual health. • An inclusive range of projects reflecting the local population, addressing issues of place and of interest and identity. • Projects to be informed by information available from Brighton & Hove Connected Community Insight. http://www.brighton-hove.communityinsight.org/ • People supported to develop health knowledge and skills e.g. local people attend health related training such as the Royal Society for Public Health courses see; https://www.brighton-hove.gov.uk/health-training-and-making-every-contact-count⁴ • Relevant links with Public Health and other commissioned health and wellbeing services such as: <ul style="list-style-type: none"> ○ Health Trainers & Healthy Lifestyles team, including Active for Life and Healthwalks ○ Healthy Living Pharmacies

³ Community engagement. NICE guidelines [PH9] 2008 see; <http://www.nice.org.uk/guidance/ph9> , Can a neighbourhood approach to loneliness contribute to people's well-being? by Angela B. Collins and Julie Wrigley, is available as a free download at www.jrf.org.uk

A guide to community-centred approaches for health and wellbeing. Prof. J South. PHE and NHS England 2015. http://eprints.leedsbeckett.ac.uk/1229/1/A_guide_to_community-centred_approaches_for_health_and_wellbeing.pdf

⁴ <https://www.gov.uk/government/publications/making-every-contact-count-mecc-practical-resources>

	<ul style="list-style-type: none"> ○ Fuel Poverty Programme ○ Brighton and Hove Food Partnership ○ Carers Support ○ Older people's Locality Hubs and Citywide Connect ○ Alcohol/substance misuse services ○ Sexual health services ○ MIND, and the Wellbeing Service <p>See: https://www.brighton-hove.gov.uk/content/health</p> <ul style="list-style-type: none"> ● Ensure a reflective practice approach, including identification of shared learning, reflection on impact, project evaluation and any potential cumulative community benefits from cross-community projects. 	
What we are looking for	The HNF is a health development fund. Funds should only be awarded for explicit health intentions.	
What we are NOT looking for:	The Fund should not be used for the purchase of equipment except where it is pivotal for delivery/provision or participation in health activities, nor for items such as lockers, signs or landscaping equipment that could be provided by non-health funding pots.	
Areas	Bevendean	£ 4,000
	Bristol Estate & Whitehawk	£ 5,500
	Coldean	£ 2,000
	Hangleton & Knoll	£ 4,000
	Hollingbury	£ 2,000
	Hollingdean	£ 4,000
	Moulsecoomb & Bates Estate	£ 4,000
	Portslade & Portland Road	£ 6,000
	Queens Park & Craven Vale	£ 4,000
	Tarner & Eastern Road	£ 5,000
	Woodingdean	£ 2,000
Total funding for neighbourhoods		£ 42,500
An additional 17% will be paid to the provider/s in addition to the sum for each neighbourhood. This is towards community development, management and administration costs.	<p>The amount for each area includes; the restricted HNF grant fund, 10% admin contribution for the HNF 'forum' (or equivalent) and a sum allocated for an evaluation/ celebration event.</p> <p>The remaining HNF will be used for shared development events</p>	
Total maximum funding available subject to annual budget setting.	Year 1	£50,000
	Year 2	£50,000
	Year 3	£50,000

2D. Community Engagement

Brighton & Hove City Council & NHS B&H CCG want to empower individuals through the provision of information, providing them with a "voice" in the shaping of local council and health services and Third Sector activity, as well as to work with communities to support

and develop effective partnership working. We want individuals and groups to have a sense of “belonging”, resilience and wellbeing as a result of engagement activity.

Through this prospectus, the city council & CCG want to ensure that Brighton and Hove’s Third Sector is a key point for the engagement of those using local services, where individuals are enabled to feed back their views and experience and where they can be involved in shaping future solutions. We want engagement activity that helps not only to make recommendations but also works with commissioners and communities and statutory partners to help shape solutions to these recommendations. This can be supported through making the best use of local:

- Residents’ skills, knowledge and experience
- Voluntary and Community Groups and organisations, businesses and statutory organisations
- Service user accountable structures, for example, user led organisations
- Networks
- Volunteers

We know that there are communities, and sections of communities, which find it harder to engage, and have not been engaged through existing mechanisms. We want to ensure that individuals are reached, and are able to be involved in shaping activities for themselves as well as shaping local services.

Within this section, the council and CCG want to ensure that appropriate engagement and work is carried out by relevant communities of identity and so as to maximize resources we have pooled funding from different parts of the council and CCG so that there is a more coordinated approach as identified in the evaluation work carried out as part of the prospectus. We have therefore broken the work into lots. Within each lot we are looking for an appropriate partnership and/or collaboration to be developed over the funding period. Please read the details in each lot carefully as there are different expectations depending on which lot/s you apply for.

2D.1-3 Deliver effective citywide engagement activity that enables communities to evidence and articulate their needs, ambitions, and assets, and support co-designed solutions. To work closely with the City Council and CCG to improve quality of services, make better use of resources and to support the Council and CCG to use feedback to effect change

As a result of community engagement:

- a. Communities are supported to research and articulate their needs and issues, and feed into council and Clinical Commissioning Group decision making;
- b. City Council and CCG are provided with intelligence about community(ies) experience of council/CCG and council/CCG commissioned services with actionable recommendations for change;
- c. Engagement activities include developing potential plans/activities that enable service providers and/or citizens to find solutions to recommendations;
- d. Communities improve their understanding of and use of digital media and other appropriate methodologies in relation to community engagement;

- e. Communities are supported to understand and engage with the mechanisms and structures to enable co-production by target groups in council and CCG decision making and redesign processes;
- f. People's intersectionality is understood and reflected in the engagement activity, recommendations and solutions;
- g. There is evidenced engagement of individuals and communities which have not already been involved;
- h. There is a sharing of best practice around engagement and collaborative solutions;
- i. Individuals participating in engagement are supported to develop their capacity or access other development/capacity building opportunities within or external to the Third Sector group/organisation, and to be involved strategically in council/CCG workstreams.

<p>What we are looking for</p>	<p>Partnership work between organisations within each lot. The development of a clear framework for engagement that supports change and enables feedback loops to be developed. A capacity building and sustainable approach with the appropriate groups of people. Peer led approaches that build citizens', voluntary and community sector and public sector's understanding of each other's roles. Participation of engagement organisations in the regular Health & Council Engagement Forum. Ongoing expansion of reach across the groups, communities and individuals in the city. Development of intersectionality based approaches. Good practice examples of where involvement and collaboration has resulted in change for people 2 x BHCC themed engagement (topic based with capacity to do solution based work development). 4x CCG themed engagement (topic based). Feedback of key issues for these communities aside from identified topics. Community engagement activity that is integrated with community development and the capacity building of groups and organisations An integrated approach that enables different communities of identity to be involved in engagement processes.</p> <p>We are looking for a working arrangement that produces and delivers on recommendations that are solution focussed and use community assets, in addition to recommendations aimed at the public sector which support the commission, service redesign and delivery of council and CCG services.</p>	
<p>Target groups</p>	<p>Our priorities are:</p> <ul style="list-style-type: none"> • marginalised groups and communities or those people facing barriers that prevent, or deter them from, being involved • People who have not been involved or engaged previously 	
	<p>Specific requirements</p>	<p>Total Maximum Funding available subject to annual budget setting</p>

<p>Lot 1: Lesbian, Gay, Bisexual and Transgender People, which incorporates a Trans led community health engagement and Trans awareness programme.</p>	<p>Please make sure you address Outcome 2.1</p> <p>A Trans led community health engagement and a Trans awareness programme. Up to two CCG themes & one Council theme will be explored over the annual cycle period.</p>	Year 1	LGBT = £34,000 Transgender People = £10,000	CETS team £22,000 CCG 22,000
		Year 2	LGBT = £32,920 Transgender People = £9,760	CETS team £20,680 CCG £22,000
		Year 3	LGBT = £31,905 Transgender People = £9,534	CETS team £19,439 CCG £22,000
<p>Lot 2: Black and Minority Ethnic (BME) people ages 16 plus understanding that there are different communities and experiences.</p>	<p>Please make sure you address Outcome 2.1</p> <p>The approach needs to align to the requirements of Brighton & Hove's BME demographic) Identified BME communities are able to feed into and be involved in Council and CCG service design, delivery and improvement.</p>	Year 1	£50,000	CETS team £25,000 CCG £25,000
		Year 2	£48,500	CETS team £23,500 CCG £25,000
		Year 3	£47,090	CETS team £22,090 CCG £25,000
<p>Lot 3: Gypsies and Travellers</p>	<p>Please make sure you address Outcome 2.1 with a focus on neighbourhood based approaches.</p>	Year 1	£25,000	CETS team £5,000 CCG £20,000
		Year 2	£24,700	CETS team £4,700 CCG £20,000
		Year 3	24,418	CETS team £4,418 CCG £20,000

2D. Lots 4-6				
Lot 4: Disabled People	A partnership/collaboration between disability organisations that enables the above outcomes to be delivered emphasising the lived experience of disabled people	Year 1	£45,000	CETS team £23,000 CCG £22,000
		Year 2	£43,620	CETS team £21,620 CCG £22,000
		Year 3	£42,323	CETS team £20,323 CCG £22,000
Lot 5: Carers including young carers & parent carers of children with disabilities	A collaboration/partnership between carer organisations that enables the above outcomes to be delivered with an emphasis on the lived experience of all types of carers There is an expectation that the engagement work supporting carers of people with learning disabilities and parent carers of children with learning disabilities will support the Learning Disabilities Partnership Board activity	Year 1	£51,397	Adult Social Care team £19,397* CCG £32,000 * £8,400 is to support the Learning Disabilities Partnership Board activity
		Year 2	£51,397	As above
		Year 3	£51,397	As above
Lot 6: Deaf and hearing impaired	This funding is to develop a deaf led effective engagement model to ensure deaf and partially hearing people are able to take part in city consultations and develop	Year 1	£8,000	Adult Social Care & CETS £3,000 CCG

	collaborative solutions by embedding the outcomes above 2 x CCG engagement themes and 1 x city council theme.			£5,000
		Year 2	£7,940	Adult Social Care & CETS £2,940 CCG £5,000
		Year 3	£7,884	Adult Social Care & CETS £2,884 CCG £5,000

Lot 7- 9: Community Engagement Health Outcomes

2D.7-9 Deliver effective citywide engagement activity that enables communities to evidence and articulate their needs, ambitions, and assets and support co-designed solutions. To work closely with the Clinical Commissioning Group to drive up quality of services, and make better use of resources.

As a result of community engagement:

- a. Communities are supported to research and articulate their needs and issues, and feed into Clinical Commissioning Group decision making and where appropriate feed into council developments as a result of findings
- b. CCG are provided with intelligence about community(ies) experience of local NHS services with actionable recommendations for change
- c. Engagement activities include developing potential plans/activities that enable service providers and/or citizens to find solutions to recommendations
- d. Communities improve their understanding of and use of digital media and other appropriate methodologies in relation to community engagement
- e. Communities are supported to understand and engage with the mechanisms and structures that enable community voice in CCG decision making and redesign processes
- f. People's intersectionality is understood, and reflected in the engagement activity, recommendations and solutions
- g. There is evidenced engagement of individuals and communities which have not already been involved
- h. There is a sharing of best practice around engagement and collaborative solutions
- i. Individuals participating in engagement are supported to develop their capacity or access other development/capacity building opportunities within or external to the Third Sector

group/organisation, and to be involved in CCG developments				
What we are looking for	<p>The development of a clear framework for engagement. Capacity building, sustainable, approach with the appropriate groups of people. Peer led approaches that build citizens, voluntary and community sector and public sector's understanding of each other's roles. Participation of engagement organisations in the regular Health & Council Engagement Forum. Ongoing expansion of reach across the groups, communities and individuals in the city. Development of intersectionality based approaches. Good practice examples of where involvement and collaboration has resulted in change for people.</p> <p>4x CCG themed engagement (topic based). Feedback of key issues for these communities aside from identified topics.</p> <p>Community engagement activity that is integrated with community development and the capacity building of groups and organisations.</p> <p>An integrated approach that enables different communities of identity to be involved in engagement processes. Ideally we are looking for a joint working arrangement that produces and delivers on recommendations that are solution focussed and use community assets, in addition to recommendations aimed at the public sector which support the commission, service redesign and delivery of CCG and Council services where relevant.</p>			
Target groups	<p>Our priorities are:</p> <ul style="list-style-type: none"> • marginalised groups and communities or those people facing barriers that prevent, or deter them from, being involved • People who have not been involved or engaged previously 			
	Specific requirements	Total Maximum Funding available subject to annual budget setting		
Lot 7: Older People (aged 70+, housebound/isolated/ care homes/senior housing).	<p>The defined population are able to feed into, influence and develop solutions related to design, delivery and improvement of local NHS services.</p> <p>Please note that a partnership is required for this lot.</p>	Year 1	£22,000	CCG £22,000
		Year 2	£22,000	CCG £22,000
		Year 3	£22,000	CCG £22,000

Lot 8: Young People 16-25 years of age	The defined population are able to feed into, influence and develop solutions related to design, delivery and improvement of local NHS services Integration with the emerging developments of youth services and other relevant structures in the city to maximise the effect of partnership working	Year 1	£20,000	CCG £20,000
		Year 2	£20,000	CCG £20,000
		Year 3	£20,000	CCG £20,000
Lot 9: Mental Health Service Users (Adults and Young People 16 years and above)	Mental health service users – both children and young people and adults are able to feed into, influence and develop solutions related to design, delivery and improvement of local NHS mental health and wellbeing services. Please note that a partnership is required for this lot.	Year 1	£40,000	CCG £40,000
		Year 2	£40,000	CCG £40,000
		Year 3	£40,000	CCG £40,000

Lot 10: Adults with learning difficulties

2D.10 Deliver effective citywide engagement activity that enables people with Learning Disabilities to evidence and articulate their needs, ambitions, and assets and support co-designed solutions. To work closely with the city council and Clinical Commissioning Group to use feedback to help improve the quality of services, and make better use of resources.

As a result of community engagement:

- a. An effective learning disability partnership model is delivered;
- b. Experiences and views of people with Learning Disabilities and their carer/s are gathered in relation to the 4 planned agreed themes in the Adult Social Care Learning Disabilities Plan (linked to the Learning Disabilities strategy) using a variety of mechanisms as appropriate;
- c. Key decision makers at the city council and the CCG are provided with intelligence about people with Learning Disabilities and their carers' views and experiences of council/CCG commissioned services with agreed actionable recommendations for change;
- d. Create ongoing opportunities via a network of groups for people with Learning Disabilities to develop their leadership and self-advocacy skills in order to contribute to engagement processes, the representation of others and their ability to co-design solutions;
- e. People with Learning Disabilities in the city are supported to have their say about social care, health and other services in Brighton and Hove;
- f. People with Learning Disabilities and their carer/s are involved and supported to understand changes to Adult Social Care & Health services;

- g. People with Learning Disabilities intersectionality are understood, captured and reflected in the engagement activity, recommendations and solutions. There is evidenced engagement of individuals or communities which have not already been involved;
- h. People with Learning Disabilities and their carer/s are supported to understand and engage with the mechanisms and structures that enable their voice in the council and CCG decision making and redesign processes;
- i. There is a sharing of best practise and engagement and collaborative solutions with other engagement mechanisms across the city;
- j. People with learning disabilities and their carers provide feedback to the region wide Transforming Care Plan as appropriate;
- k. Individuals participating in engagement are supported to develop their capacity and access other development/capacity building opportunities within or external of the Third Sector.

What we are looking for

The development of a clear framework for engagement.
 Capacity building, sustainable, approach with the appropriate groups of people.
 Peer led approaches that build citizens, voluntary and community sector and public sector's understanding of each other's roles.
 4 x CCG themed engagement (topic based).
 4 planned agreed themes in the Adult Social Care Learning Disabilities Plan.
 Feedback of key issues on health and social care for these communities aside from identified topics.
 Participation of organisations in the regular Health & Council Engagement Forum.
 Ongoing expansion of reach across the groups, communities and individuals in the city.
 Development of intersectionality based approaches.
 Good practice examples of where involvement and collaboration has resulted in change for people.
 Community engagement activity that is integrated with community development and the capacity building of groups and organisations.
 Ideally we are looking for a joint working arrangement that produces and delivers on recommendations that are solution focussed and use community assets, in addition to recommendations aimed at the public sector which support the commission, service redesign and delivery of council and CCG services.

Total maximum funding available subject to annual budget setting

Lot 10: Adults with	Year 1	£58,000	Adult Social Care £38,000 CCG £20,000
----------------------------	--------	---------	--

learning difficulties	Year 2	£58,000	Adult Social Care £38,000 CCG £20,000
	Year 3	£58,000	Adult Social Care £38,000 CCG £20,000

Lot 11: Service user experience with homecare services

2D.11			
To provide a 'lay assessor' perspective on service user experiences with homecare services			
Expected Outcomes			
<ul style="list-style-type: none"> a. Effective interviewing process with homecare users from specific providers to highlight their experience of the services they are receiving; b. Effective relationship with city council Commissioners to identify appropriate providers for interview work to be undertaken with; c. Reports regularly presented to ASC Commissioner, summarising the reported experiences of people in receipt of homecare services by individual providers and any specific issues raised by the services user or carer during the interview process; d. The city council will have intelligence about the communities' experience of homecare commissioned services; e. Effective safeguarding and/or escalation of concerns investigated by the Commissioning Support Unit or dealt with through the most appropriate channel. 			
What we are looking for	<p>Interviews to be undertaken with a sample of identified homecare users from specific providers.</p> <p>Provider to work with city council in agreeing the format which will be used to record the service users and/or carer's experience of the homecare services they are receiving.</p> <p>A process that ensures that following investigation, any outstanding issues will be raised with the homecare provider and any remedial action required monitored by the Commissioning Support Officer.</p>		
Total maximum funding available subject to annual budget setting			
Lot 11: All adults in receipt of homecare services	Year 1	£13,000	Adult Social Care £13,000
	Year 2	£13,000	Adult Social Care £13,000
	Year 3	£13,000	Adult Social Care £13,000

SECTION 3: Community Banking Partnership Outcomes

The Brighton & Hove Financial Inclusion Strategy is ambitious and complex and the council has therefore adopted a number of delivery approaches which stretch across a number of external partners and processes.

This commission seeks to invest in a Community Banking Partnership which uses a lead partnership model of Third Sector organisations that together with the council's money advice and welfare advice services develops over the three years an integrated model that supports financial inclusion in the city across the following four outcomes:

3.1 Provision of a package of integrated services and solutions involving partnership between Third Sector organisations that achieves a well coordinated, seamless 'Community Banking Partnership' to low-income households that is accessible, high

<p>quality, effectively coordinated and sustainable and delivers</p> <ul style="list-style-type: none"> ○ Money Advice: ○ Banking: Access to basic banking, bill and debt repayment services ○ Credit: Access to affordable loans ○ Deposits: Access to savings facilities and incentives to save ○ Education: Improving financial capability and money management skills, increased awareness of the dangers of loan sharking and illegal money lending ○ Food and Fuel: integrating work round fuel efficiency and healthy food as part of household budgeting
<p>As a result:</p>
<ul style="list-style-type: none"> a. The Community Banking Partnership is effectively coordinated and developed to meet resident need. b. Services are branded, advertised and coordinated through a seamless consistent approach c. There are consistent monitoring and evaluation processes that demonstrate impact and a business case that is shared by partners. d. Commissioned and funded organisations come together regularly to ensure joined up working and collaboration. e. Effective working with Credit Unions, banks and other providers of social welfare advice' and employment schemes are in place to support a holistic approach to money advice that benefits residents f. A broad range of partners (including small and equality community groups) are involved throughout the life of the partnership and benefit from the work in order to reflect the needs of communities most affected by financial inclusion. g. Social media applications are used to communicate with the BME sector h. Services are sustained through the acquisition of additional funding sources.
<p>3.2 Provides high quality accessible money advice that meets the needs of people and places and reaches communities experiencing the highest levels of financial exclusion in Brighton and Hove.</p>
<p>As a result of advice services:</p>
<ul style="list-style-type: none"> a. Clients are able to simply and easily access information and advice at times and in places that are suitable to their needs. b. Clients are supported to use the right channel for their needs, including face to face, telephone and online. c. Clients are provided with quality accredited one to one support for complex issues and problems. d. Clients are supported to increase their confidence and ability to manage their own financial wellbeing e. Clients are financially better off as a result of reduced expenditure by rescheduling debts and increased income by maximising earnings, benefits and tax credits
<p>3.3 Provides high quality financial capability programmes delivered in areas and/or groups experiencing the highest levels of financial and digital exclusion in Brighton and Hove.</p>
<p>As a result of the financial capability programme:</p>
<ul style="list-style-type: none"> a. Clients are more able to 'make ends meet' by being more able to manage money and able to live within means. b. Clients are more able to cope with unexpected events and make provision for the long term.

- c. Clients are more aware of the financial products that are on offer and able to choose those that are most appropriate to circumstances.
- d. Clients are more resilient, informed and know how to (and are able to) get help, support and information.
- e. Clients are motivated to change their financial behaviour and sustain this.
- f. Clients are supported in relation to income maximisation
- g. Clients are more able to use the internet to appropriately support all of these goals.

3.4 Provides a capacity building programme which embeds financial inclusion skills, knowledge, policy and practice in key public, community, voluntary, and private sector organisations.

As a result of capacity building:

- a. Key organisations, workers and volunteers access financial inclusion awareness and training courses to ensure skills, knowledge and practice are embedded in the city's workforce.
- b. Key organisations, workers and volunteers use and promote financial inclusion literature and materials to raise awareness of the issues facing vulnerable people in the city.
- c. Key organisations adopt financial inclusion policy and practice.
- d. Strategic partnerships in the city have an awareness and understanding of financial inclusion issues.
- e. New forms of partnership and collaboration emerge for financial inclusion outcomes.

What we are looking for	Priority will be given to applications that include community organisations in the delivery of the services The delivery of a single point (telephone and digital) of contact for initial needs assessment that is accessible to all Ideally the delivery of the Moneyworks branding and processes
Total maximum funding available subject to annual budget setting	Year 1 £200,000
	Year 2 £190,000
	Year 3 £180,500

4. How to Apply

4.1 Overview of Requirements

The council & NHS CCG invites bidders to respond to this prospectus for an initial period of three years, with provision for a further extension of up to two years.

This document sets out the requirements and the selection criteria to be used in the council's evaluation of bids and provides information regarding how the procurement process will be managed.

Item	Detail
Contract length	3 Years
Extension Options	Up to 2 years
Quantity/volume or value	Estimated value £6,406,245 over a 3 year period Y1: £2,239,152* Y2: £2,133,332* Y3: £2,033,761* Y4: subject to Council budget setting processes Y5: subject to Council budget setting processes * subject to Council budget setting processes

SE Shared Services eSourcing Portal	This prospectus is being run using the online tendering portal South East Shared Services eSourcing ("the Portal").
Bidders' request for clarification or further information	Any communication you may have regarding this prospectus must be sent using the messaging facility in the South East Shared Services Esourcing site. If you are experiencing technical difficulties with the site, please contact the SE Shared Services technical support or phone 0845 557 8079. The deadline for questions to be received is included in the timetable in section 4.2. All relevant questions and answers will be rendered anonymous by the council and shared with all bidders using the messaging facility in the portal before the date noted in section 4.2 below unless deemed by the Council to be commercially sensitive.
Bidding application	Completed applications must be uploaded to the Portal by the return deadline stated in the table in section 4.2. Please ensure you allow sufficient time to upload your submission, particularly if it contains large files, as the council & CCG cannot accept submissions uploaded after the deadline.
Council Point of Contact	Name: Rachel Maddison Job Title: Procurement Advisor Telephone: 01273 291241 Email: rachel.maddison@brighton-hove.gov.uk Please note, all communications should be conducted via the Portal.

4.1.1 General Application Process

Before you begin to complete the application forms, please read through the assessment questions below to assess your organisation's suitability to apply to the Communities and Third Sector Commissioning Prospectus. You will need to have the required policies in place by 1 April 2017 to be successful in being awarded a Funding Agreement. You will also need to provide evidence that your organisation and the partnership will have appropriate policies, procedures and practice as laid out below.

Eligibility Criteria

Please use this checklist to see if you are eligible. If you are unable to provide or have the appropriate documentation, policies or evidence, then you may not meet the essential criteria and may not be eligible to apply for funding. This checklist also explains whether the criteria requested is a pass/fail or for information as part of the process. Please note you will be asked to fill a similar form out when you apply on-line.

You will need to have a constitution, management committee and the required policies in place

or in progress by the application submission date of 1 st November 2016
Note: Each partner in a joint and severally liable application needs to demonstrate that they meet these eligibility criteria.
Does your organisation have in place:
An approved constitution or Memorandum and Articles of Association
A formally-appointed Management Committee or Board of Directors which meets regularly
Board Approved policies and procedures:
Health and Safety Policy and Procedures (Pass/Fail)
Safeguarding Adults and Children Policy and Procedures (Pass/Fail)
DBS checking protocol (if working with vulnerable adults or children) (Pass/Fail)
Complaints Policy and Procedures (Pass/Fail)
Equality Policy and Equal Opportunities monitoring (Pass/Fail)
Disciplinary and Grievance Procedures (Pass/Fail)
Quality Assurance (If applying as a lead partner or consortium please ensure the quality assurance process includes how to quality assure the work of partners) (Pass/Fail)
Business plan / Development plan (Pass/Fail)
Management, staffing and volunteer structure chart (Info Only)
If you are employing staff do you have contracts of employment for payroll staff including terms and conditions of employment (Pass/Fail)
If you work with volunteers do you have a Volunteer Policy and Procedure where applicable (Pass/Fail)
Environmentally sustainable policy (for information)
Financial and banking policy and procedure
Any other relevant policies or procedures (please state)
Business Conduct Questions
Does the organisation have any outstanding legal actions against it? (Pass/Fail)
Does your organisation provide a minimum of the Living Wage for all paid staff? (Pass/Fail) Details about the Brighton & Hove Living Wage can be found here, and more information regarding the Living Wage can be found at this website http://www.brighton-hove.gov.uk/content/business-and-trade/brighton-hove-living-wage-commission/our-commitment-living-wage
Have any senior members of your organisation been involved in any firm that has been liquidated or gone into receivership? (Pass/Fail)
Within the last five years has your company been subject to any actions by the Health & Safety Executive or Environment Agency in respect of any suspected breach of legislation? (Pass/Fail)
Within the last three years, has any adverse finding been made against your organisation by an Employment Tribunal, Employment Appeal Tribunal or any court, in relation to any claim made by your current, former or potential employees? (Pass/Fail)

Can your organisation provide the following financial evidence?
Please provide a copy of your organisation's accounts for the last two years* and upload to the Portal. These accounts should be audited if this is a requirement for your organisation. (Pass/Fail)
Has your organisation met the terms of any banking facilities and loan agreements during the past year? (Pass/Fail)
Has your organisation met all its obligations to pay its creditors and employees during the past year? (Pass/Fail)
An agreed reserves policy (for information)
Finance
What is your organisation's current financial position? Select one option either a or b below and fill in the amounts from your accounts or projection.
a) Information from the latest accounts approved by your organisation
b) A 12-month projection because you have been running for less than 15 months
Account year ending (Day Month Year)
Total expenditure for the year
Total income for the year
Surplus or deficit at the year end
Total savings or reserves at the year end
Have your accounts been independently audited?
Insurance
Do you have the following types of insurance? If so please state the level of insurance
Public liability insurance
Employers Liability
Professional indemnity insurance

*** NOTE - if your organisation is unable to provide two years of data please contact the Council via the Portal. If you are awarded investment, we may ask for a copy of the relevant policies before we issue a funding agreement. If you have ticked "No" to any of these self-assessment questions, or if you are unsure, please contact the Procurement Team.**

4.1.2 General Prospectus Application Conditions ("Conditions")

(i) Application of these Prospectus Conditions – In participating in this procurement process and/or by submitting a bid it will be implied that you accept and will be bound by all the provisions of this prospectus. Accordingly, bids should be on the basis of and strictly in accordance with the requirements of this prospectus.

(ii) Third party verifications – Your bid is submitted on the basis that you consent to the council carrying out all necessary actions to verify the information that you have provided, and the analysis of your bid being undertaken by one or more third parties commissioned by the Council for such purposes.

(iii) Information provided to potential bidders – Information that is supplied to potential bidders as part of this procurement process is supplied in good faith. The information contained in the prospectus and the supporting documents and in any related written or oral communication is believed to be correct at the time of issue but the Council will not accept any liability for its accuracy, adequacy or completeness and no warranty is given as such. This exclusion does not extend to any fraudulent misrepresentation made by or on behalf of the Council.

(iv) Potential bidders to make their own enquires – You are responsible for analysing and reviewing all information provided to you as part of this procurement process and for forming your own opinions and seeking advice as you consider appropriate. You should notify the Council promptly of any perceived ambiguity, inconsistency or omission in this prospectus and/or in any of its associated documents and/or in any information provided to you as part of this procurement process.

(v) Amendments to the Prospectus – At any time prior to the prospectus return deadline, the council may amend the prospectus. Any such amendment shall be issued to all potential suppliers, and if appropriate to ensure potential bidders have reasonable time in which to take such amendment into account, the prospectus return deadline shall, at the discretion of the council, be extended. Your bid must comply with any amendment made by the council in accordance with this paragraph (v) or it may be rejected.

(vi) Compliance of Prospectus submission – Any services offered should be on the basis of and strictly in accordance with the prospectus (including, without limitation, any specification of the council's requirements, these prospectus conditions and the Contract) and all other documents and any clarifications or updates issued by the council as part of this procurement process.

(vii) Disqualification – If:

- you breach these prospectus conditions
- there are any errors, omissions or material adverse changes relating to any information supplied by you at any stage in this procurement process
- any other circumstances set out in this prospectus, and/or in any supporting documents, entitle the council to reject a bid and/or
- you have done or procured the doing of any of the acts specified in the Non-Collusion certificate

The Council shall be entitled to reject your bid in full and to disqualify you from this procurement process. Subject to the “Liability” Prospectus Condition in paragraph (xi) below, by participating in this procurement process you accept that the Council shall have no liability to a disqualified potential supplier in these circumstances.

(viii) Application costs – You are responsible for obtaining all information necessary for preparation of your bid and for all costs and expenses incurred in preparation of the bid. Subject to the “Liability” Prospectus Condition in paragraph (xi) below, you

accept by your participation in this procurement process, including without limitation the submission of a bid that you will not be entitled to claim from the Council any losses, costs, expenses or liabilities of whatsoever kind that you may incur in bidding for this procurement irrespective of whether or not your bid is successful.

(ix) Rights to cancel or vary this procurement process - By issuing this prospectus, entering into clarification communications with potential bidders or by having any other form of communication with potential bidders, the Council is not bound in any way to enter into any contractual or other arrangement with you or any other potential bidder. It is intended that the remainder of this procurement process will take place in accordance with the provisions of this prospectus but the Council reserves the right to terminate, suspend, amend or vary (to include, without limitation, in relation to any timescales or deadlines) this procurement process by notice to all potential bidders in writing. Subject to the “Liability” Prospectus Condition in paragraph (xi) below, the Council will have no liability for any losses, costs, expenses or liabilities of whatsoever kind that you may incur as a result of such termination, suspension, amendment or variation.

(x) Consortium Members and sub-contractors – It is your responsibility to ensure that any staff, consortium members, sub-contractors and advisers abide by these Prospectus Conditions and the requirements of this prospectus.

(xi) Liability – Nothing in these Prospectus Conditions is intended to exclude or limit the liability of the Council in relation to fraud or in other circumstances where the Council’s liability may not be limited.

4.1.3 Confidentiality

Bidders shall use this prospectus and any other information furnished to them under this prospectus solely for the purposes of responding to this prospectus. All such documents and information bidders receive shall remain the property of the Council, shall be kept confidential and shall be returned to the Council on request. Reproduction of any part of this prospectus is authorised only for the preparation of the response. Bidders shall ensure that all such copies are destroyed when no longer required in connection with this prospectus.

Bidders shall not transfer, assign or distribute this prospectus to any other organisation or company or person who is not involved in applying to the prospectus without the written permission from the Council’s Corporate Procurement Department. A failure to gain the required authority will prevent consideration of the bid.

4.1.4 Application Return

Bidders should note that the prices quoted in their applications shall remain valid for acceptance for a minimum of 180 days from the application return date. Bidders are to include a statement to this effect

Bidders shall ensure that their application is compliant with all statutory and other provisions to be observed and performed in connection with any subsequent award of contract.

Bidders must complete all sections of the application for submission at the time of bidding for the prospectus to receive full consideration. No documents or variances supplied after the return date shall be considered unless expressly requested by the Council.

4.1.5 Post Application Clarification

The Council may enter into post application clarification following receipt of the application.

The council reserves the right (but is not obliged) to seek clarification of any aspect of a bidders application during the evaluation phase where necessary for the purpose of carrying out a fair evaluation. Bidders are asked to respond to such requests promptly. Vague or ambiguous answers are likely to score poorly or render the bid non-compliant.

4.1.6 Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE)

Bidders should be aware of the TUPE regulations when submitting their bids. In some cases, where work that has been awarded to one contractor is subsequently awarded to another contractor then this may constitute a relevant transfer for the purpose of TUPE.

TUPE provides that where there is a relevant transfer (or part of one) the new employer take over any employment liabilities and the responsibility for the employment contracts of employees, who then transfer on their previous terms and conditions of service.

Bidders should seek legal advice as to whether TUPE will be likely to apply to any proposed contract, and if so, bidders must reflect the financial implications of such a transfer in their bid. In such cases, the Council will be neither transferee nor transferor for the purpose of TUPE.

Information relating to current staff provided by the current Contractors will be made available on receipt of a bidder's signed Non-Disclosure Agreement. Bidders will be expected to deal with the incumbent Contractor(s) on all TUPE issues that may arise.

Any requests for further information relating to non-council employees should be made via the council within the process for bidders' questions. Requests for

meetings with other employers should also initially be made through the council in order to allow an effective coordination of requests.

If TUPE applies then the staff will transfer under TUPE on the transfer of the service and this is irrespective of whether or not they have the correct licence for the new service. The new service provider will be responsible for, including meeting the costs of, any subsequent redundancies that may occur as a consequence of the transfer.

It is possible that TUPE may not apply if the current service is fragmented to a significant degree between multiple contractors. Contractors should seek their own legal advice on this.

Bidders' pricing models must include the costs associated with the TUPE transfer of the employees. If the costs associated with the TUPE transfer (including pensions) are subsequently found to be lower than envisaged, the successful bidder shall make a corresponding reduction in the contract price.

Please note, TUPE only applies to section 3 of the Prospectus: the Community Banking Partnership.

4.1.7 Bidders Briefing

There will be a bidders briefing to provide information to all those who are interested in submitting an application. The briefing date for the prospectus is **13 September 2016 from 9.45am to 11.30am - Brighton Friend's Meeting House, Ship Street, Brighton BN1 1AF.**

Questions raised during the bidders briefing, or at any time from when the prospectus is published, will be recorded. A list of these questions and the corresponding answers will be sent to all registered bidders via the e-procurement messaging facility. The final date for receiving questions and the deadline for publishing the questions is detailed in the timetable at section 4.2.

4.1.8 Partnership/Collaboration bids

The Council and CCG require all bidders to be working in partnership and/or in collaboration. For legal and for contracting reasons the word consortium is used to illustrate the type of partnership/collaborative arrangements that can be entered into between two or more Third Sector organisations when applying under this prospectus. Due to this, each application must identify which consortium arrangement applies in the case of their partnership and/or collaboration. For the purposes of the prospectus the Council and CCG will accept the following arrangements. Section 4.1.9 below explains any preferred options within the prospectus.

Nominate a 'lead bidder' for the consortium:

The lead bidder will be directly responsible to the council and CCG and should complete the full application form. A single response for the scored questions should be submitted on behalf of the partners. Each partner should complete the 'Organisation Details section. As part of their submission, bidders should provide an overview of how the partnership is working, indicating the lead bidder and the estimated percentage/volume of the works and services that each bidder will be

taking on if successful. Each consortium member must sign the declaration form that will form part of the application process.

OR

Joint and several liability consortium:

One application will be filled in on behalf of all partners. The Council will have a relationship with all members of the consortium. It is usual for one consortium member to be nominated to co-ordinate the consortium bid – which may be referred to as the lead organisation. However, in these circumstances, the lead is for administrative purposes only and all members of the consortium are equally responsible for the delivery of the project. So all organisations taking part will be involved in completing all parts of the application and it is the cumulative strength of both the financial and technical capability that is assessed at this stage. Whilst there is a lead partner for bid co-ordination purposes, this organisation is not solely liable as the Council enters into an agreement with all the members of the consortium; thus all members are jointly and severally liable. As such, if one of the members of the consortium defaults, the Council is able to recover from the other members of the consortium.

It is important that the consortium only fill in one questionnaire form on behalf of all the partners and that the JSL finance section is filled in with clear finance figures for each member. Each JSL member will also need to fill in the 'Organisation Details', 'Eligibility Checklist' that includes the 'Board Approved policies and procedures', 'Business Conduct Questions', 'Financial Information', 'Evidence and Insurance section' and sign the 'Declaration'.

As the CTS prospectus programme is to try and strengthen the way organisations work together and in keeping with the principle "Collaborative arrangements and partnerships between third sector organisations which will result in a developed partnership over the period of funding", in the event of a member of the consortium defaulting provided a case can be made for covering the lost outcomes/outputs this can be renegotiated provided the arrangements are in line with the original application.

It is for the consortium members to assess whether their proposed arrangements are appropriate and sustainable. This is not the responsibility of the Council.

OR

Form the consortium as a single legal entity:

If bidders are proposing to form a consortium as a single legal entity, each member should complete the 'Organisation Details', Eligibility Checklist that includes the Board Approved policies and procedures, Business Conduct Questions, Financial Information, Evidence and Insurance section and sign the declaration. The remainder of the prospectus should be completed once on behalf of the consortium as a whole. As part of the submission, bidders should provide a consortium structure chart and relevant details. All consortia must be established before contract award.

4.1.9 How to apply within the outcomes

Communities & Third Sector Commissioning Prospectus Section	Strand	Type of Partnership	Notes
Section 1	Strategic Outcome 1	Choice of Lead Bidder for the Partnership or Joint and Severally Liable	It is suggested that applicants choose a primary outcome that most appropriately links to the changes you you're your application will make for your beneficiaries. You can identify a second outcome if appropriate.
	Strategic outcome 2	Choice of Lead Bidder for the Partnership or Joint and Severally Liable	
	Strategic outcome 3	Choice of Lead Bidder or Joint and Severally Liable	
	Strategic outcome 4	Choice of Lead Bidder for the Partnership or Joint and Severally Liable	
	Strategic outcome 5	Choice of Lead Bidder for the Partnership or Joint and Severally Liable	

Section 2	2.1 Partnership arrangement		Must be delivered with 2.A, 2B 2C and HNF, Community Engagement Lot 1, Community Engagement Lot 2 and Community Engagement Lot 3
	2.A.1, A.2 and A.3 Generic capacity-building (infrastructure) outcomes	Lead Bidder for the Partnership only and all outcomes from 21.to 2D 3 need to be addressed in your application,	Must delivered with 2.1, 2B,2C, Community Engagement Lot 1, Community Engagement Lot 2 and Community Engagement Lot 3
	2.B.1, B.2, B.3 Community Development		Must delivered with 2.1, 2A, 2C, , Community Engagement Lot 1, Community Engagement Lot 2 and Community Engagement Lot 3
	2.C.1 Healthy Neighbourhood Fund (HNF)		Must delivered with 2.1, 2.A, 2.2B, Community Engagement Lot 1, Community Engagement Lot 2 and Community Engagement Lot 3
	2D Community Engagement Lot 1		Must delivered with 2.1, 2.A, 2B, 2C, Community Engagement Lot 2 and Community Engagement Lot 3
	2D Community Engagement Lot 2		Must delivered with 2.1, 2.A, 2B, 2C, Community Engagement Lot 1 and Community Engagement Lot 3
	2D Community Engagement Lot 3		Must delivered with 2.1, 2.A, 2B, 2C, Community Engagement Lot 1 and Community Engagement Lot 2
	2D Community Engagement Lot 4		Choice of Lead Bidder for the Partnership or Joint and Severally Liable
	2D Community Engagement Lot 5	Choice of Lead Bidder for the Partnership or Joint and Severally Liable	Can join the Lead bidder arrangements for 2.1
	2D Community	Choice of Lead Bidder for the	Can join the Lead bidder arrangements for 2.1

	Engagement Lot 6	Partnership or Joint and Severally Liable	
	2D Community Engagement Lot 7	Choice of Lead Bidder for the Partnership or Joint and Severally Liable	Can join the Lead bidder arrangements for 2.1
	2D Community Engagement Lot 8	Choice of Lead Bidder for the Partnership or Joint and Severally Liable	Can join the Lead bidder arrangements for 2.1
	2D Community Engagement Lot 9	Choice of Lead Bidder for the Partnership or Joint and Severally Liable	Can join the Lead bidder arrangements for 2.1
	2D Community Engagement Lot 10	Choice of Lead Bidder for the Partnership or Joint and Severally Liable	Can join the Lead bidder arrangements for 2.1
	2D Community Engagement Lot 11	Choice of Lead Bidder for the Partnership or Joint and Severally Liable	Can join the Lead bidder arrangements for 2.1
Section 3	Community Banking Partnership	Lead bidder for the Partnership	Can support a strategic outcome

4.2 Timetable

Please find an indicative timetable below:

Task	Date
Issue of prospectus	1 September 2016
Bidders briefing	13 September 2016 9.45am to 11.30am - Brighton Friend's Meeting House, Ship Street, Brighton BN1 1AF
Last date for bidders' questions	18 October 2016
Date for bidders questions to be submitted on the portal	25 October 2016
Prospectus return date and time	1 November 2016 3.00pm
Notification of preferred bidder status, subject to budget approval	Late December 2016
Award of Agreements	March 2017
Commencement	1 April 2017

4.3 Process

Step 1 – Registering on the Portal

Please register on the Council's e-procurement system (The Portal) which can be accessed via <https://www.sesharedservices.org.uk/esourcing>
The prospectus is being run completely on this Portal.

Step 2 – Preparing your application

Please read through the whole of the prospectus before you complete your application. Please make sure you are clear on what type of partnership you are going to apply using as this will influence which forms to fill in. Please also read the terms and conditions so that you are aware of the agreement you will sign if you are successful in your application.

Step 3 – Submitting your application

The prospectus is made up of two parts:

Part 1

- An online form titled '**BHCC Communities & Third Sector Commissioning Prospectus Questionnaire**'. All partners must complete this in joint and severally liable partnerships, and only the lead for lead partners/separate legal entities)
- Financial spreadsheets:
 - '**CTS Income Projections for proposal**'. This needs to be filled in by all partners in a joint and severally liable partnerships, and only the lead for the lead bidder partners/separate legal entities)
 - A budget spreadsheet. There are separate sheets for joint and severally liable partnerships ('**CTS Prospectus Budget Spreadsheet JSliable**') and lead partners/separate legal entities ('**CTS Prospectus Budget Spreadsheet Lead Partner**'). Please make sure you fill in the correct one

Part 2

- Downloadable word document which contains the question section of the application. This is titled '**Communities and Third Sector Prospectus Quality Application Form**'.

NOTE - For joint and severally liable partnerships, only one partner will need to submit this, however all partners should work on it.

Please make sure you complete all sections of the application in full and with the correct details, and that you include the correct financial information. We cannot consider applications for funding which are incomplete. All documents need to be uploaded to the Portal by the deadline as stated in section 4.2.

There are maximum word limits for some answers. It is important that you do not exceed these as text over the limit will be ignored.

Please see chapter 5 for a checklist

Submission deadline

All applications **must** be submitted through the Portal by 3pm on 1 November 2016.

There are four stages in the evaluation and award process. At each stage a judgement will be made by the evaluation panel about whether the application can progress to the next stage.

Stage 1 Eligibility Screening

Stage 2 Scoring

Stage 3 Clarification

Stage 4 Award

Stage 1 - Eligibility screening

Initially your application will be screened to ensure that all the essential criteria are met and that your proposal addresses the required outcomes. Applications that meet the required criteria and are clearly linked to the outcomes will continue to the next stage.

Stage 2 Scoring

During the next stage your application will be evaluated by the relevant evaluation panel. The panel will assess the effectiveness of your application to deliver the outcomes, and will score how well it delivers the three criteria of quality, social value and value for money. Please see the evaluation guidance section for a simple description of the weighting criteria associated with each question. Applications will be ranked by their total score.

Stage 3 Clarification

Following scoring the applications taken forward may be subject to a clarification process. You may be e-mailed through the portal to answer any queries the panel has on any aspect of your application form. All applications that have been successful up to this point will be reviewed by the relevant evaluation panel and where there is any overlap or duplication the strongest application will be chosen. In some cases a process of negotiation may take place.

At the completion of this stage the evaluation panel will have decided which applications have been successful.

Stage 4 Awards

Due to the city council budget setting process notification of Awards will be given in December 2016, subject to final confirmation of budget in February 2017. Following notification of the awards there will be a standstill period of 10 days. The funding agreements will be awarded to all successful applicants in March 2017. All unsuccessful applicants will receive feedback outlining the main reason for not awarding funding. This is intended to help organisations to make further improvements, which may lead to a successful application another time.

4.4 Evaluation

Bids will be evaluated on price (30%) and quality (70%). Social Value will be evaluated in the quality section.

4.4.1 Quality Evaluation Criteria

There are three types of question - bidders must ensure they answer each question as part of their submission, even if it is not scored:

- 1. For information only** – these questions are not scored or evaluated but help give the Council more information about bidders.
- 2. Pass/Fail** – these are about criteria that the Council considers essential to perform the contract. Bidders must pass all of these questions to be considered for full evaluation.
- 3. Scored** – these relate to this specific contract and allow the Council to differentiate between submissions for the purpose of awarding the contract.

Scored questions are scored on a scale of 0-5, according to the table below:

Score	Performance	Judgement
5	Meets and exceeds criteria	Excellent
4	Meets the criteria	Good
3	Meets the criteria in most aspects, fails in some	Satisfactory
2	Fails to meet the criteria in most aspects, meets it in some	Unsatisfactory
1	Significantly fails to meet the criteria	Poor
0	Completely fails to meet the criteria	Not to be considered

Scored questions will be assessed by the evaluation panel, who will agree on a single moderated score for each question. Scored questions will carry a **weighting**, as indicated in each question.

The formula used to calculate the weighted scores for each scored question is:

$$\text{Question Weighted Score (\%)} = (\text{Bidder's score} / 5) \times \text{Question Weighting.}$$

The weighted scores for each question will then be added together to give an overall weighted score for each submission.

Question	Quality Criteria	Percentage weighting	Word Count
1	Partnership	20%	800

2	Activities	15%		1000
3	Need	15%		800
4	Beneficiaries	15%		500
5A	Difference	20%	40%	1000
5B	Key Outcomes		30%	30 per outcome e.g. for 3 outcomes the word count would be 90
5C	Reporting Indicators		30%	About 30 per indicator and about 25 per level
6	Progress towards achieving outcomes	15%		350

4.4.2 Price Evaluation Criteria

Price will be evaluated based on the total cost of delivering activity against the outcomes for the initial three-year term of the agreement. Bidders should ensure their pricing proposals fall within the limits of the maximum amounts of funding

A bidder's total price will be compared to the total prices of other bids during evaluation to arrive at a score for price. The formula used to calculate the weighted scores for pricing is:

$$(\text{Lowest Price Received} / \text{Bidder's Price}) * 30$$

5. Checklist

	Lead Bidder Partnership	Joint and Severally Liable partnership
Questionnaire Form (Part 1) BHCC Communities & Third Sector Commissioning Prospectus Questionnaire	Only lead partner needs to complete	Only one form needs to be submitted and ALL partners need to contribute to this
Finances (Part 1) (CTS Income Projections for proposal)	ALL partners need to submit any relevant financial documents (see 4.1.1 for details of what needs to be evidenced)	ALL partners need to submit any relevant financial documents (see 4.1.1 for details of what needs to be evidenced)
Income Projections (Part 1) CTS Income Projections for proposal	Only lead partner needs to complete	A form needs to be submitted by each partner
Costing Spreadsheet (Part 1)	Only lead partner needs to complete (CTS Prospectus Budget Spreadsheet Lead Partner)	One form needs to be submitted by ONE partner that captures each of the partner organisations costings involved in the consortium (CTS Prospectus Budget Spreadsheet JSliable)
Quality Question Form (Part 2) Communities and Third Sector Prospectus Quality Application Form	Only lead partner needs to complete Get signatures of declaration from everyone	Only one form needs to be submitted by ONE partner capturing each and all partners information Get signatures of declaration from everyone
TUPE Confidentiality Agreement	Needs to be completed if applying for the Community Banking Partnership TUPE information will then be sent to the bidder	n/a

6. Terms & Conditions

Please see attached document titled '**CTS Funding Agreement**'

The terms and conditions provide the council, the CCG and the successful providers with a funding agreement which is similar to a service level agreement. The Funding Agreements available through this prospectus cover the period 1 April 2017 to 31 March 2020 (subject to Annual review and to successfully meeting the requirements for the commissioned service through the monitoring arrangements).

It is important that you read this and ensure that your Management committee and responsible officers can agree to sign this agreement.

7. Acronyms

BHCC - Brighton & Hove City Council

BME - Black and Minority Ethnic

CCG - Clinical Commissioning Group

CVS - Community and Voluntary Sector

DWP - Department for Work and Pensions

HIP - Health Improvement Project

LGBTQ - Lesbian, Gay, Bisexual, Transgender and Queer

LGBTU - Lesbian, Gay, Bisexual, Transgender and Unsure

PHE - Public Health England

8. Glossary

Black and Minority Ethnic –a term applied to individuals or communities who are identified (or self-identify) as Black or are from a minority ethnic culture or racial group. The term includes gypsies and travellers. Asylum seekers and refugees are sometimes included in this category although this is not always accurate as it often depends how these people self-identify themselves. Migrants and Economic Migrants are also sometimes included within this category.

B&H CCG – Brighton and Hove Clinical Commissioning Group. GP lead organisation that has responsibility for commissioning local health care.

Commissioning Teams– City Council officers responsible for assessing need and planning, commissioning and putting in place community services.

Communities, Equality and Third Sector team- The City Council department responsible for communities and third sector policy and development, community engagement, neighbourhood support, targeted community work aimed at reducing inequality and the council's Third Sector Investment Programme

Equality Act (2010) – The Equality Act brings together all the legal requirements on equality. It replaced all the existing equality law. As an employee or when using a service everyone has the right to be treated fairly. The Act protects people from discrimination on the basis of certain characteristics. These are called 'protected characteristics'. These are Age – people of all ages, Disability, Gender reassignment – people who propose to start, have started or have completed a process to change their gender, Marriage or civil partnership, Pregnancy and maternity, Race - this includes ethnic or national origins, colour or nationality, Religion or belief - this includes no belief, Sex (gender) –

men/women and boys/girls, Sexual orientation – heterosexual, lesbian, gay or bisexual people.

Funding agreement – A service level agreement. See Section 4.1 for more details.

Intersectionality - The study of overlapping or intersecting social identities and related systems of oppression, domination, or discrimination. The theory suggests that—and seeks to examine how—various biological, social and cultural categories such as gender, race, class, ability, sexual orientation, religion, caste, age, nationality and other sectarian axes of identity interact on multiple and often simultaneous levels. **LGBT** – Lesbian, gay, bisexual and transgender, or people who adopt one or more of these identities.

Milestone – a key success or achievement that indicates progress towards delivering the objective.

Objective – specific things that will be done to support the delivery of an outcome.

Outcome – the desired impact (the things that will be different) for beneficiaries as a result of delivering the service.

Output – a tangible or quantifiable product or result of an activity that can have a value in itself and/or lead to the desired objective or outcome.

Portal – the e-procurement system used by the Council, and delivered by South East Shared Services

Public Health Team- The City Council department responsible for promoting health equality across the city.

Qualitative data- data that measures the experience.

Quantitative data- data that has numerical significance.

Social Value – the National Association of Voluntary and Community Action (NAVCA) notes Social Value as about maximising the impact of public expenditure to get the best possible outcomes, considering more than the financial transaction. It includes, but certainly isn't limited to: happiness, wellbeing, health, inclusion, and empowerment. These types of value often accrue to different people, communities, government department or organisations and are not always easy to measure.

Social return on investment – a broader concept of value that incorporates the consideration of social, environmental and economic costs and benefits.

Target – a specific and measurable activity that will help deliver an objective.

Trans - used as an umbrella term to describe people whose gender identity differs from their assigned sex at birth. The term **trans man (FtM)** is used to refer to a person who was assigned female at birth but has a male gender identity. Trans men may plan to transition or may be transitioning or have completed transition to live as a man. A **trans woman (MtF)** is a person who was assigned male at birth but has a female gender identity and therefore may plan to transition, be transitioning or have transitioned to live as a woman. Both these transitions may or may not involve hormone treatment and various surgical procedures.

Transsexual describes a person who wishes to undergo, has undergone or is undergoing transition. It is most commonly used in relation to clinical practice.

Third sector – Comprises not-for-profit and non-governmental organisation. It is a term which encompasses the voluntary and community sector (VCS) and not-for-private-profit organisations, e.g. social enterprises (SE) and charities. These can also be referred to as civil society organisations or not for profit sector.

Universal services – mainstream services, for example, leisure, learning and general advice services that are accessible to everybody, including people who need social care and support.