

Better Together VCS Forum Notes – 10 February 2026

Agenda Item	Key Issues
Welcome & Introduction	Apologies were received from 1 organisation and 18 people attended. Nicole Kirby took the chair, welcoming everyone to the meeting at the DCA offices in Willington where introductions were made.
Opening Comments	<p>Nicole opened the meeting with a reminder that the Better Together Forum have focused roundtable discussions for each forum meeting form members alongside policy forums biannually which include wider VCSE involvement, public sector partners and other stakeholders. Two consultations were highlighted:</p> <ol style="list-style-type: none"> <li data-bbox="353 539 2042 611">1. The review by the County Council of its Poverty Strategy (2022–2026) in order to shape the next iteration for 2026–2030. Key stakeholders including those with lived experience are encouraged to respond via the Let Talk portal by the 26th March. <li data-bbox="353 651 2042 762">2. NENC ICB County Durham Community Mental Health - Stakeholders Survey – a consultation on the decommissioning of services, specifically in relation to parts of the services provided currently by Age UK County Durham and Pioneering Care Partnership (PCP). Robyn encouraged all BTF members to take part in the consultation, which closes on March 6th.
Roundtable Discussion	<p>Introducing the subject of Neighbourhood Health Nicole explained that initial focus for neighbourhood health work in County Durham is around where it can make the biggest difference for communities experiencing the greatest needs and the poorest outcomes. This includes older people living with frailty, dementia and palliative care needs, as well as adults and children with significant physical, learning and psychosocial needs</p> <p>A video presentation from Lisa Taylor, HWB programme director VONNE was shown. Lisa highlighted changes in which the ICB will move to a strategic commissioning role rather than providing operational oversight, along with three key shifts: hospital to community, treatment to prevention, and increased emphasis on neighbourhood health with VCSE involvement. Lisa explained that each neighbourhood area will strengthen its ways of working with insight and intelligence from the VCSE sector forming a key part of local decision-making. The video of the conversation can be found here.</p> <p>Lisa also highlighted that peer elected reps in the VCSE partnership programme raised a challenge: if the ICB isn't directing things, how does the VCSE secure a place at the table? This is less of an issue in County Durham due to the strong voice and influence DCA brings to the County Durham Care Partnership and wider regional forums.</p> <p>This point formed a significant part of the roundtable discussions which were noted as follows:</p> <ol style="list-style-type: none"> <li data-bbox="353 1441 974 1476">1. Uncertainty and the Need for System Clarity

- Concerns about what happens in the gaps as responsibilities shift.
- Lack of clarity around planning, guidance and outcomes creates risk for the VCSE.
- A clear safety net is needed if the sector's contribution is genuinely valued.

2. Ensuring VCSE Representation and Voice

- Shared responsibility is required to ensure the VCSE remains part of key system conversations.
- Questions remain about how the VCSE secures a seat at the table if the ICB is no longer directing activity.
- Resourcing VCSE capacity to participate meaningfully is essential.

3. Communications and Shared Intelligence

- Strong communication mechanisms are needed so all relevant agencies are included.
- Better flow of intelligence between the VCSE and NHS is needed to close gaps in the service-user journey.
- National vs. local VCSE roles must be clearly communicated to avoid duplication and confusion.

4. Collaboration, Alliances and New Structures

- Interest in developing a formal VCSE alliance or collaborative model to strengthen operational influence.
- Existing models (e.g., regional Healthwatch collaboration; Scarborough model) show this can work well.
- Establishing such structures requires additional resource, as VCSE organisations are already stretched.

5. Articulating VCSE Value

- A lack of understanding persists regarding the VCSE's impact and contribution—commissioners may need “re-education.”
- Research could help demonstrate outcomes, show impact on health improvement/stabilisation, and build an evidence base.
- Understanding where large funded organisations (e.g., REED Wellbeing) sit (particularly those with established pathways and resources).

6. Leadership and Use of Existing Resources

- The system needs clarity on who is providing leadership and what that leadership should look like.
- Tools such as heat-mapping, reviewing ‘hub’ outreach, and using existing intelligence (VONNE/DCA) can support consistency and planning.
- Primary care frustration linked to resourcing changes remains an important contextual factor.

Related References and Useful Examples

- **Rethink Webinar** – offers insight into how national VCSE organisations engage with ICS structures.
- **Assura Project** – is aiming to co-create a framework for VCSE outcomes within health commissioning and is delivered through the VCSE Partnership Programme.

	<p>Next Steps</p> <p>DCA will be reviewing resources and are happy to host further discussions exploring the concept of developing a new VCS structure/alliance.</p>
<p>Partner Updates</p>	<ul style="list-style-type: none"> • Durham Mental Health Alliance are looking for a new Chair. Information on the structure and services for the Alliance will be circulated with these notes. • Teesdale Day Clubs – expanding on the original luncheon club format, the focus has moved to the provision of activities around health and social experiences, particularly for men (breakfasts) but the challenge of rural travel remains for women participating in activities. • Citizens Advice County Durham are looking for a treasurer. With funding through the National Lottery Community Fund, CACD are developing some ‘on tour’ sessions and asked for these to be shared when they are promoted. Their client base remains steady despite financial support arrangements changing. They are looking for venue hosts. • Wheels to Work have noted the mental health benefits of those travelling to work through the use of their service, particularly those who have been given cycles. • Healthwatch are winding down in the light of NHS changes but expect to be functioning until the end of the year. • Alzheimer’s Society highlighted the availability of Dementia Friends sessions for anyone wishing to take part. • Age UK County Durham – launch of Chapter 50 in Weardale with workshops on keeping well and financial and retirement planning. Now expanding in Aycliffe. • County Durham Furniture Help Scheme – warehouse of preloved articles available in Chilton. Outreach Service available. • Oases – forest bathing sessions for mental health support for both adults and children is available.
<p>Date of Next Meeting</p>	<p>The next meeting of the Better Together Forum meeting will be at 1:30pm on Tuesday 28th April at DCA Offices in Willington.</p>