

FEEDBACK FROM 17 JULY 2014 STAKEHOLDER EVENT

To: Health and Wellbeing Board

Date: 2 October 2014

From: Dr Liz Robin, Director of Public Health

1.0 PURPOSE

- 1.1 To share the key themes from the stakeholder event hosted by the Health and Wellbeing Board on 17 July 2014.
- 1.2 To share the feedback received from attendees.
- 1.3 To share the action plan to take forward the suggestions and comments made at the stakeholder event.

2.0 BACKGROUND

- 2.1 A half-day stakeholder event hosted by the Cambridgeshire Health and Wellbeing Board (HWB) was held on Thursday 17 July, 12.45pm – 4.30pm at Cambridge Golf and Conference Centre in Hemingford Abbots.
- 2.2 The purpose of the event was to explore ways the Cambridgeshire Health and Wellbeing Board and the local voluntary and community sector (VCS) can work better together to address local health needs.
- 2.3 Invitations to the event were kept to a targeted list of Health and Wellbeing Board members, Health and Wellbeing Board Support Group members and representatives from the voluntary and community sector. The event was attended by approximately 45 people.

3.0 THEMES FROM THE EVENT

- 3.1 After a series of presentations and case studies, delegates were asked to discuss what they believed to be the key challenges facing the voluntary and community sector in Cambridgeshire. The broad themes raised were:
 - Bidding, commissioning and funding
 - Capacity
 - Communication and language
 - Knowledge and skills
 - Resources
 - Size of the VCS in Cambridgeshire
 - Volunteers

3.2 Delegates were then asked to discuss several topics focussed on better working between the HWB and the voluntary and community sector. The topics were:

- Working better together to address mental health needs
- Working better together to address the needs of children and young people
- Working better together to address the needs of older people
- How can we keep procurement processes proportionate?
- How can we address the lack of informal communication between the statutory and voluntary and community sector (eg shared resources)?
- How can we address the lack of capacity for the voluntary and community sector to engage in all initiatives?
- How can we raise awareness of the variety of voluntary and community sector organisations and their role in contributing to health and wellbeing?

3.3 Detailed notes from each of these discussions are included in the full report from the stakeholder event, attached at [Appendix A](#).

3.4 An action plan to take forward the suggestions and comments made at the stakeholder event is attached at [Appendix B](#).

3.5 Feedback from the stakeholder event was largely very positive, with the section on case studies and the group workshops receiving particularly good comments. More detailed comments are included towards the end of the full event report, attached at [Appendix A](#).

4.0 ALIGNMENT WITH THE CAMBRIDGESHIRE HEALTH AND WELLBEING STRATEGY

4.1 This stakeholder event is aligned to Priority 6 – work together effectively.

5.0 IMPLICATIONS

5.1 No significant implications.

6.0 RECOMMENDATION

6.1 To consider and note the:

- key themes from the stakeholder event
- feedback received from attendees
- action plan to take forward the suggestions and comments

Source Documents	Location
None.	N/a

Appendix A: Full stakeholder event report

HEALTH & WELLBEING BOARD STAKEHOLDER EVENT

How can the Health and Wellbeing Board and voluntary and community sector work better together to address local health needs?

Thursday 17 July 2014

Introduction

A half-day stakeholder event hosted by the Cambridgeshire Health and Wellbeing Board (HWB) was held on Thursday 11 July, 12.45pm – 4.30pm at Cambridge Golf and Conference Centre in Hemingford Abbots.

The purpose of the event was to explore ways the Cambridgeshire Health and Wellbeing Board and the local voluntary and community sector (VCS) can work better together to address local health needs.

Invitations to the event were kept to a targeted list of Health and Wellbeing Board members, Health and Wellbeing Board Support Group members and representatives from the voluntary and community sector. The event was attended by approximately 45 people. The full attendance list is included at [Annex 1](#).

Programme

The programme for the stakeholder event was as follows:

- 12.45 Arrival and registration
- 13.00 Welcome and introduction
- 13.05 Health and Wellbeing Board progress and challenges 2013/14 – Dr Liz Robin
- 13.25 The state of the voluntary sector and how it contributes to the health and wellbeing agenda – Julie Farrow
- 13.35 Case study 1 – Mind in Cambridgeshire, Sarah Hughes
- 13.45 Case study 2 – Sharing Parenting, Suzanne Pearson
- 13.55 Case study 3 – Better Health Network, Linda Collumbell and Hilary Johnys
- 14.05 Voluntary and community sector challenges
- 14.35 Break and refreshments
- 14.55 Workshops:

Part one (planned)

- Working better together to address mental health needs
- Working better together to address the needs of children and young people
- Working better together to address the needs of older people

Part two (topics agreed on the day)

- How can we keep procurement processes proportionate?
- How can we address the lack of informal communication between the statutory and voluntary and community sector (eg shared resources)?
- How can we address the lack of capacity for the voluntary and community sector to engage in all initiatives?
- How can we raise awareness of the variety of voluntary and community sector organisations and their role in contributing to health and wellbeing?

15.55 Feedback from workshops

16.20 Next steps – Cllr Tony Orgee

Notes from discussions on the voluntary and community sector challenges

After a series of presentations (slides available on request), delegates were asked to discuss what they believed to be the key challenges facing the voluntary and community sector in Cambridgeshire. There was then an opportunity to share these thoughts with the wider group and ask any questions of the panel.

The key issues raised were:

Bidding, commissioning and funding

- Bidding/tendering processes should be kept as streamlined as possible. The process should be proportionate to the size of the contract/project.
- Submitting a bid – particularly for smaller organisations – can be a drain on resources, eg when required to gather performance data.
- Collaborating with other VCS organisations can be a challenge. Some of the larger organisations can be seen as ‘predatory’, with charities often suffering, though this isn’t always the case.
- Financial uncertainty and pressures.
- Commissioning often takes place at a county level, whereas VCS organisations often have a much more local focus.
- Issues with small VCS organisations lacking capacity to bid for large contracts. The CCG and other commissioners are set up to deal with large contracts.
- The Health and Wellbeing Board’s lack of focus on the prevention agenda

- It's important to commission smaller organisations to support infrastructure – people helping people.
- Lack of coordination of contract monitoring, especially for smaller organisations.

Capacity

- Lack of capacity to engage with the various initiatives and every organisation. This is particularly true of smaller VCS organisations.
- Lack of time to develop partnerships.
- How can VCS organisations grow?

Communication and language

- The language used by statutory organisations can be a barrier for the VCS, eg the use of acronyms.
- The VCS should be engaged early, with honest conversations between statutory organisations and the VCS
- There is a lack of informal communication between the VCS and statutory sector, eg rarely share the same building, which can be beneficial for joint working.
- Different departments not speaking to each other.

Knowledge and skills

- VCS needs some investment in organisational development for management infrastructure.
- A lack of understanding of the different layers of the VCS.

Resources

- Various toolkits and processes should be made widely available to support collaborative working, eg template policies, template memorandums of understanding, guidance documents.
- A simple case study template for all VCS organisations to use would be a helpful resource, particularly when developing strategies.
- Evidence of the contribution of the VCS in Cambridgeshire should be collected.

Size of the VCS in Cambridgeshire

- Lack of knowledge about other VCS organisations in Cambridgeshire and beyond.
- The sheer number of VCS organisations in Cambridgeshire can confuse people and commissioners – who should they be speaking to?
- The number of similar VCS organisations also means some are competing against each other for clients and funding.

Volunteers

- Attracting sufficient volunteers.
- The challenge of attracting volunteers from all age ranges.

Notes from the workshops

The first set of workshops focused on the question of how the Health and Wellbeing Board and the voluntary and community sector can work better together to address particular health needs. Having heard case studies relating to older people, children and young people and, mental health, delegates were first given an opportunity to discuss further solutions in these areas in more depth.

A summary of the discussions for each topic are shown below.

Working better together to address mental health needs

- There needs to be a forum for mental health.
- The CCG's partnership forum is not strategic. A strategic viewpoint and improvement in this area is essential.
- There needs to be representation of the third sector, not just the Council for Voluntary Services (CVS).
- We need secondary care to be a part of the conversation too.
- Some things can be covered generically by the CVS, but some things need specialist expertise.
- We need to bring together one partnership board/forum for mental health – not lots of different ones.
- It needs to have the right process. Could use the domestic violence board as a model.
- The Cambridgeshire Learning Disability Partnership Board could be a useful model too.
- Improved conversations are needed.
- We could make better use of social media and virtual communication.
- Engagement with the service user network.
- Strategic five-year planning – resourced for VCS representatives to feed back to colleagues.
- Are there too many five-year plans?
- Needs to feed into the CCG's, local authorities' and Health and Wellbeing Board's strategic plans.
- Also needs to feed into mental health partnership boards.

Working better together to address the needs of children and young people

- Explore establishing a pot of funding for voluntary sector projects using a collaborative approach, eg working with umbrella organisations.
- Need a less bureaucratic approach for pilots/small projects – people should just be able to get on with it.
- Need to link processes with the Children's Trust.

Working better together to address the needs of older people

- Do we know what older people want? What does the Health and Wellbeing Board know and need to know about older people?
- The VCS can add value to a lot of services for older people.
- Do commissioners and other organisations know what is available?
- How does want link with need?
- Older people's Joint Strategic Needs Assessment.
- Is everything that is delivered by the VCS consistently understood by commissioners?
- One-stop-shop / multi-disciplinary teams / single point of access.
- Where does the statutory responsibility sit? Need to make sure this is still met.
- Common approach, terminology, forms etc for VCS.
- The Better Health Network is a good pilot.
- Link with VCS, particularly around isolation and social inclusion. The Health and Wellbeing Board should look at commissioning work in this area. This is where the VCS can add real value.

For the second set of workshops, each group was assigned one of the themes from the earlier session on the challenges facing the VCS. The purpose of these discussions was to explore how the Health and Wellbeing Board and the VCS could work better together to address this particular challenge.

A summary of the discussion from each workshop is shown below.

How can we keep procurement processes proportionate?

- Encourage consortium work/partnerships.
- The Health and Wellbeing Board is not a direct commissioner – though some members are – but the Board could help organisations via Grant Finder, Big Lottery Fund etc.
- Bids often need to be submitted at short notice.
- Monitoring questions used in the bidding process, eg time spent. Who uses this monitoring? The process needs to be proportionate.
- Time required for bid vs. value of contract.
- Contestability.
- There should be short forms with the value of the contract limited.
- Be realistic with what we are asking of the VCS – manage expectations.
- Could Cambridgeshire County Council's legal team come up with a proportionate procurement framework that is within the law and could be used by the whole public sector in Cambridgeshire?
- How would sub-contracting work for the VCS in the older people's procurement?
- There needs to be more collaboration between the VCS to position itself better to be the preferred bidder.

- There could be a toolkit of information and processes stored on the Cambridgeshire County Council website, where smaller organisations could dip in and out of proposals, rather than starting from scratch every time.

How can we address the lack of informal communication between the statutory and voluntary and community sector (eg shared resources)?

- The Health and Wellbeing Board needs to support and promote collaboration as much as possible.
- The Health and Wellbeing Board can communicate the challenge.
- Can the Health and Wellbeing Board work on/challenge the whole network under its themes/priorities?
- Could there be an open, revolving seat on the Health and Wellbeing Board for specific items?
- In more challenged financial situations, an effective network is even more important.
- We need to know the network.
- An information service, such as Cambridgeshire.net. This could be a really useful site if updated, maintained and promoted well.
- Is the Health and Wellbeing Strategy too wide? Is it focused enough? Can the review home in on specific issues for all? It needs to be more than just a long list of actions.
- Be radical to do it more effectively.
- Better and more informed planning, eg notification of meetings etc.
- Is the Health and Wellbeing Board challenging enough?

How can we address the lack of capacity for the voluntary and community sector to engage in all initiatives?

- Health and Wellbeing Board members could be invited to Children's Trust events.
- Need to ensure VCS organisations understand the umbrella arrangements and how to feed into partnership arrangements – eg Local Health Partnerships, Children's Trust Area Partnerships.
- Don't keep inventing new structures.
- The VCS is involved in Joint Strategic Needs Assessments, but more VCS organisations should be invited to take part from across the county.
- The Health and Wellbeing Board gives direction; a broad look. This is a strength that should be harnessed. The Health and Wellbeing Board should be helped to look at the VCS in a broader way.
- Ensure approach to consultation is inclusive. This is crucial to ensure as many voices as possible are heard.
- We need the Health and Wellbeing Board to challenge and drive the integration of health and social care. Who else is going to do it?
- The Health and Wellbeing Board needs to plan ahead and be clear when inviting the VCS to meetings:
 - Give early notice
 - What is the meeting about?

- Who is it aimed at?
- Publicise widely
- What preparation is needed?
- Use the Councils for Voluntary Services more.
- What is the structure under the Health and Wellbeing Board? How do items get onto the agenda?
- Other Health and Wellbeing Boards and clinical commissioning groups have gone forward with their own priorities. The Better Care Fund has had a major impact.
- Link to Local Health Partnerships and the VCS?
- Does the Better Health Network have a role?
- Smaller organisations could share the load of attendance at meetings/events.

How can we raise awareness of the variety of voluntary and community sector organisations and their role in contributing to health and wellbeing?

- Develop an effective directory of the VCS in Cambridgeshire – though this does have limitations.
- What does the Health and Wellbeing Board know? Perhaps a service user perspective of what is, and is not, working would be helpful.
- Filter for Health and Wellbeing Board.
- Use local initiatives to map activity, ie Localism agenda.
- Defining role of Health and Wellbeing Board in VCS organisation relationships.
- Play to strengths.
- Collaboration is a major challenge.
- Newsletters can be a useful mechanism – we need to restart the Health and Wellbeing newsletter and include the VCS in the distribution.
- Make use of other Board’s infrastructure and officers.

Next steps

Cllr Orgee closed the event by summarising some of the key themes discussed during the event. It was agreed that the notes from discussions would be captured and delegates would be kept updated of progress made against some of the proposed solutions.

Event materials

To request presentation slides, copies of the case studies shared, or any other materials from the stakeholder event, contact Adrian Lyne at adrian.lyne@cambridgeshire.gov.uk or on 01223 706307.

Annex 1: Attendees

The stakeholder event was attended by approximately 45 people from the Health and Wellbeing Board, the Health and Wellbeing Board Support Group and the local voluntary and community sector. The full list of attendees is shown below:

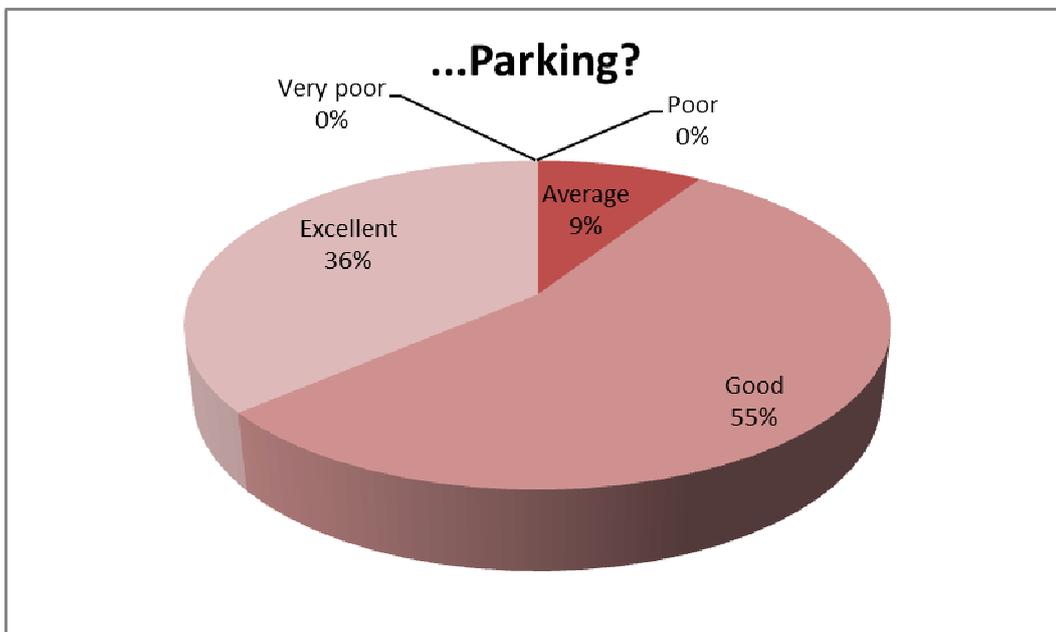
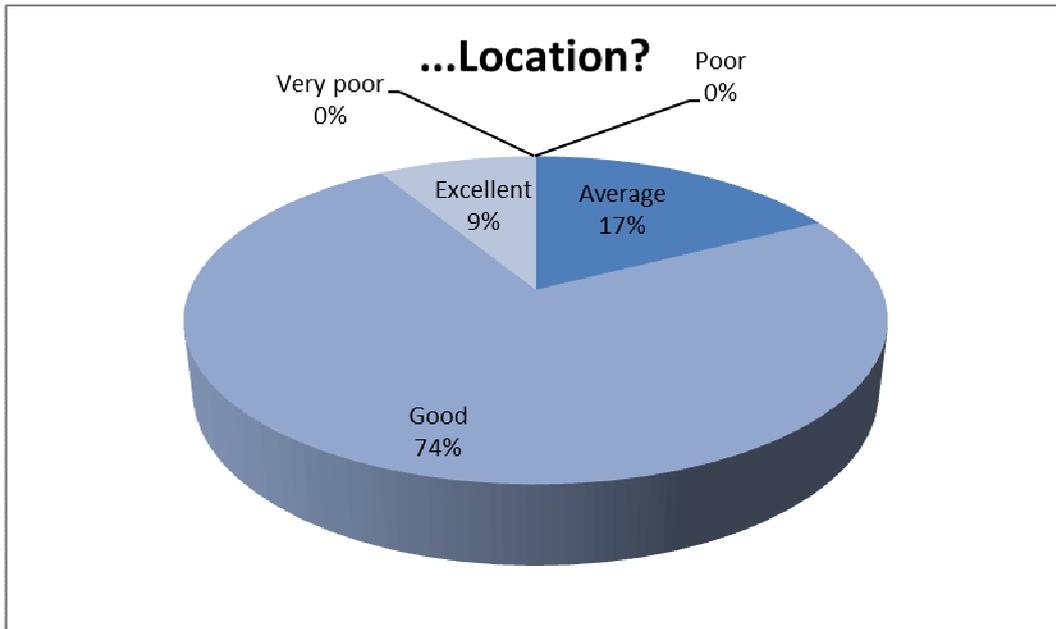
Title	Organisation
Associate Director, NHS England East of England Strategic Clinical Networks and Clinical Senate	NHS England
Member of the Health and Wellbeing Board	Cambridgeshire County Council
Director of Corporate Affairs	Health and Wellbeing Support Group
Sub-regional Housing Co-ordinator	Cambridgeshire City Council
Head of Business Services	Cambridgeshire Acre
Chief Executive	Carers Trust Cambridgeshire
Service Director: Strategy and Commissioning - Adult Social Care	Cambridgeshire County Council
	Age UK Cambridgeshire
Acting Manager, Better Health Network	Carers Trust Cambridgeshire
Social Policy Co-ordinator	Cambridge Citizens Advice Bureau
Manager	Lifecraft
Director	Cambridge Hearing Help
Member of the Health and Wellbeing Board	South Cambridgeshire District Council
Chief Executive	Hunts Forum of Vol Orgs
Chief Executive	Living Sport
Deputy Chief Executive	Cambridge Council for Voluntary Services
Service Manager	Nacro, Huntingdon
Chief Executive	Mind in Cambs
	Children's Links
Member of the Health and Wellbeing Board	NHS Cambridgeshire and Peterborough CCG
Senior Direct Services Coordinator	Care Network
Head of Environmental Services	LHP Chair & Health and Wellbeing Support Group
Area Manager Norfolk, Suffolk and Cambridgeshire	Royal Voluntary Service
Assistant Director of Public Engagement and Membership	NHS Cambridgeshire and Peterborough CCG
Policy and Projects Officer	Cambridgeshire County Council
Chief Officer	Care Network
Office Manager	Public Health Programmes – Cambridgeshire County Council

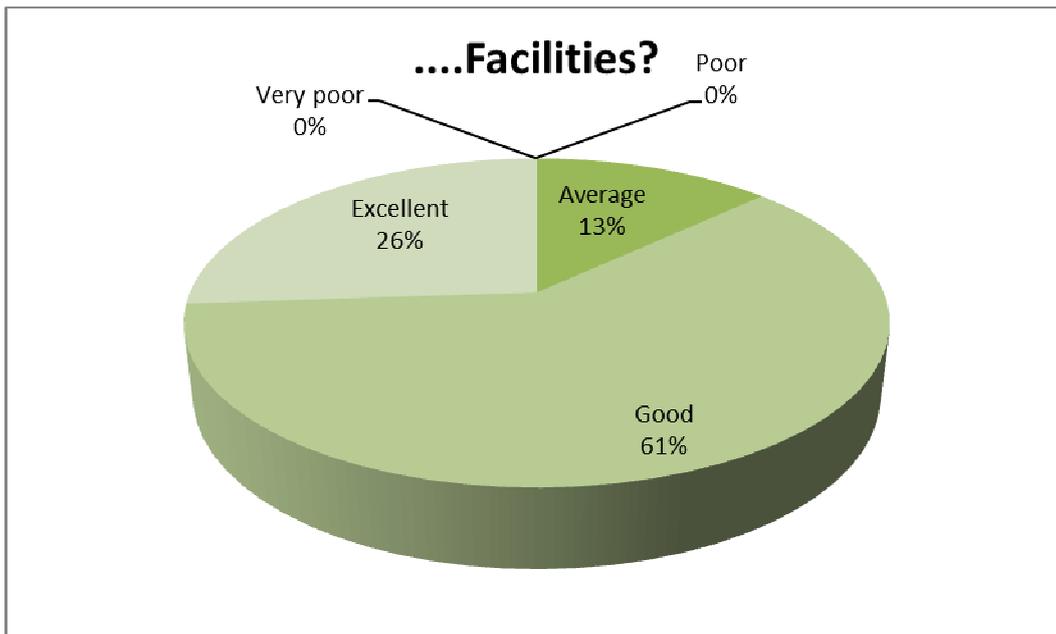
Member of the Health and Wellbeing Board	Cambridgeshire County Council
	Health and Wellbeing Support Group
Chair – Health and Wellbeing Board	Cambridgeshire County Council
Head of Public Health Programmes	Cambridgeshire County Council
Public Health Administrator	Cambridgeshire County Council
	Sharing Parenting
Head of Counselling	The Cogwheel Trust
Housing Strategy Manager – Planning & Strategic Housing Services	Huntingdonshire District Council
Director of Public Health	Cambridgeshire County Council
Member of the Health and Wellbeing Board	Healthwatch Cambridgeshire
Chair	Hunts Health & Wellbeing Group
Chief Executive	Cam Sight
Assistant Medical Director/Clinical Director Community Division	NHS England East Anglia Area Team
Head of Community Services	Huntingdonshire District Council
Chair Fenland Local Health Partnership	Cambridgeshire County Council
Chair	Cambridgeshire Older People's Enterprise (COPE)
Team Manager	Nacro, Huntingdon
	Health and Wellbeing Board

Annex 2: Evaluation of the event

Prior to leaving the event, delegates were asked to complete an evaluation form. 45 people attended the event and 23 forms were completed and returned. The feedback received is summarised below.

1. How would you rate the venue on...?

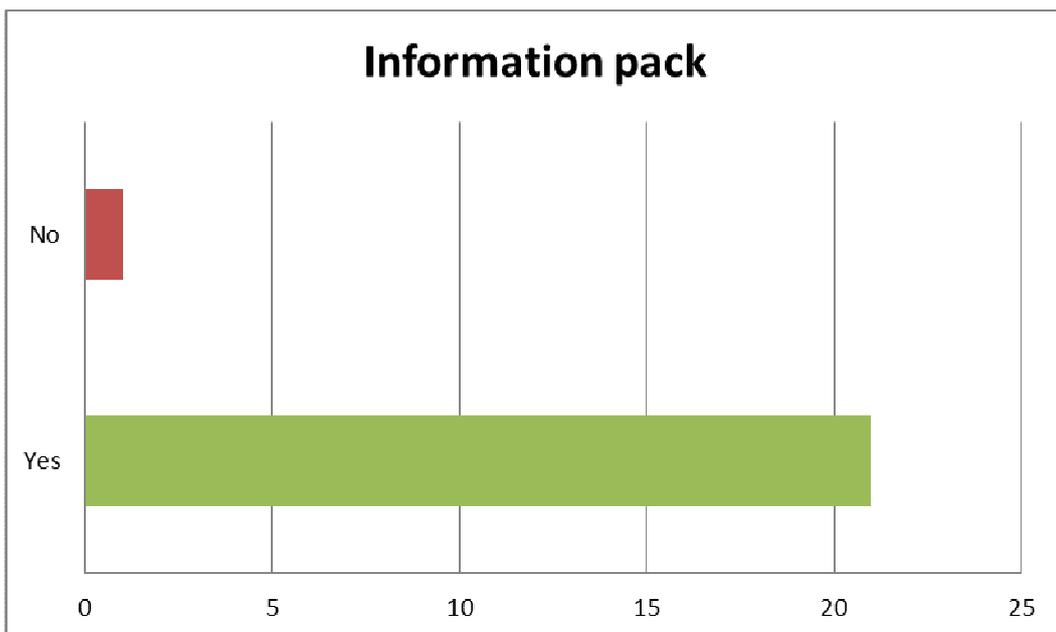




Additional comments about the venue

- Nice venue. Good, central location.
- Love the venue.
- It's a difficult venue to get to if using public transport. Needed to get a taxi there and back.
- Public transport is impossible to use with this venue.
- Poor room for hearing/acoustics.
- Acoustics not great with microphone.

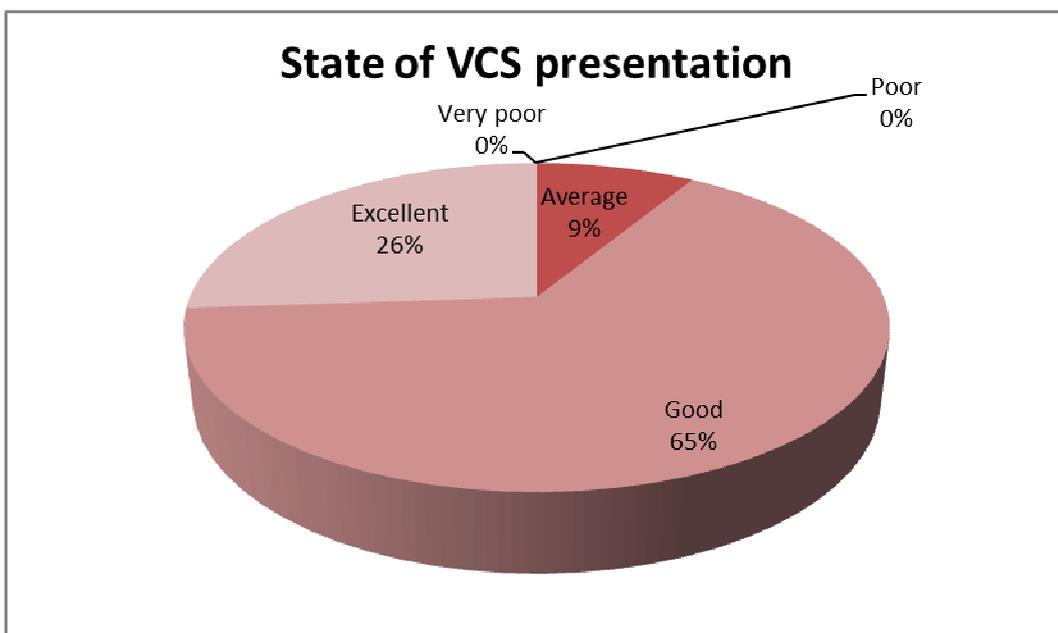
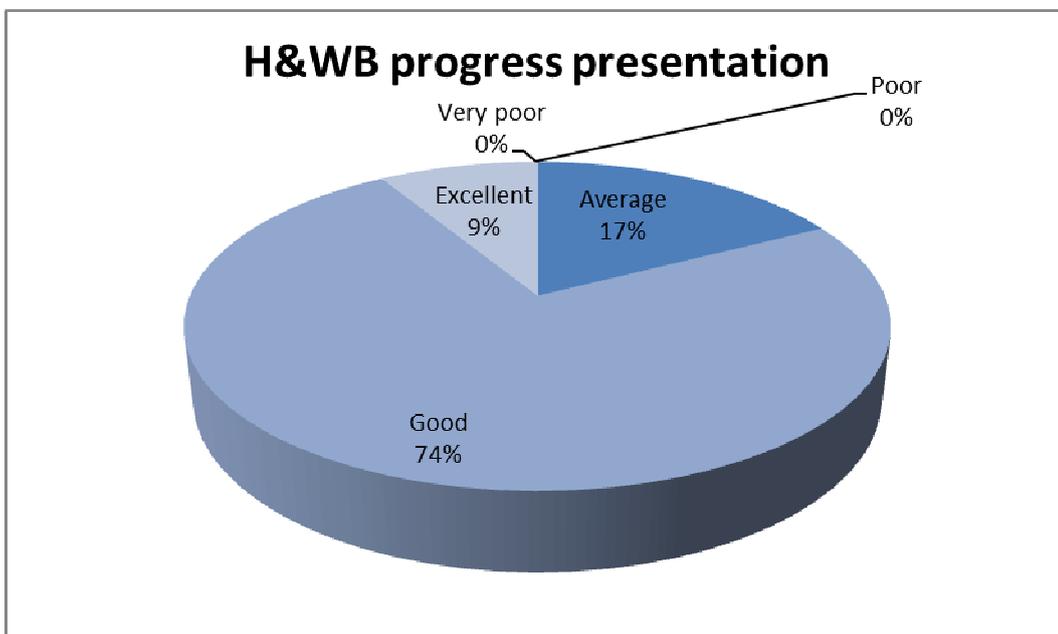
2. Did you find the information pack helpful?



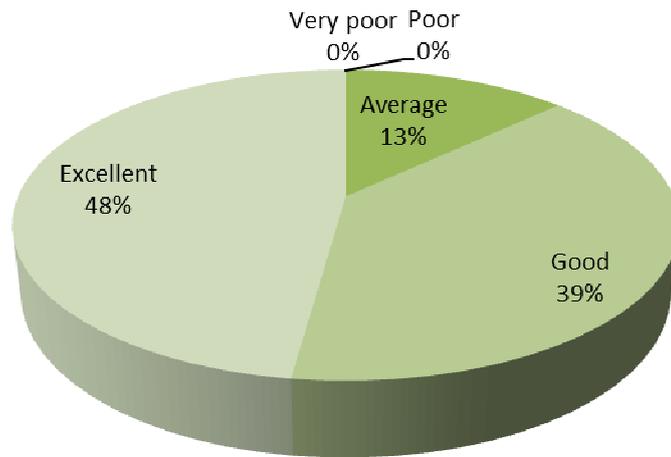
Additional comments about the information pack

- Liked the case studies.
- Is this a standard format case study template that VCS organisations could use to submit at any time in the future?
- It was OK.
- It would have been useful to have print outs of the presentation slides in the information packs.
- Did not receive one.

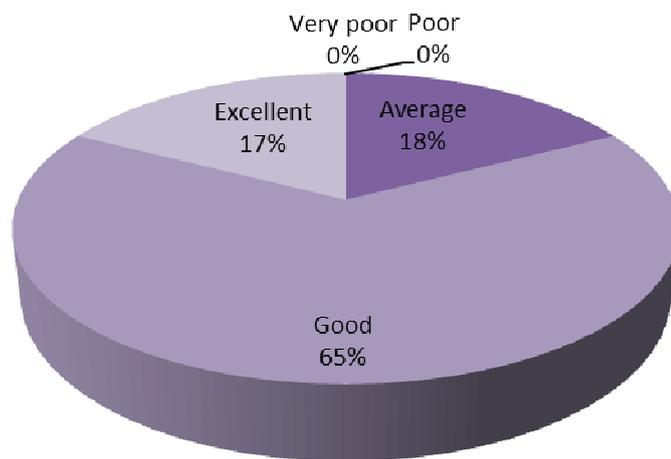
3. How would you rate the following parts of the event?



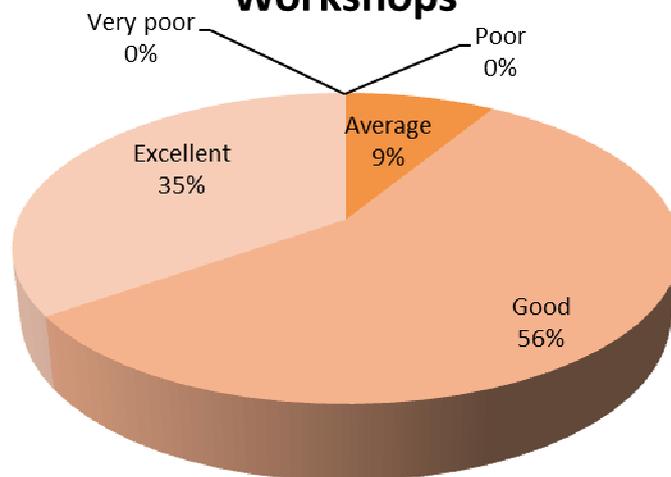
Case studies presentations



VCS challenges discussion



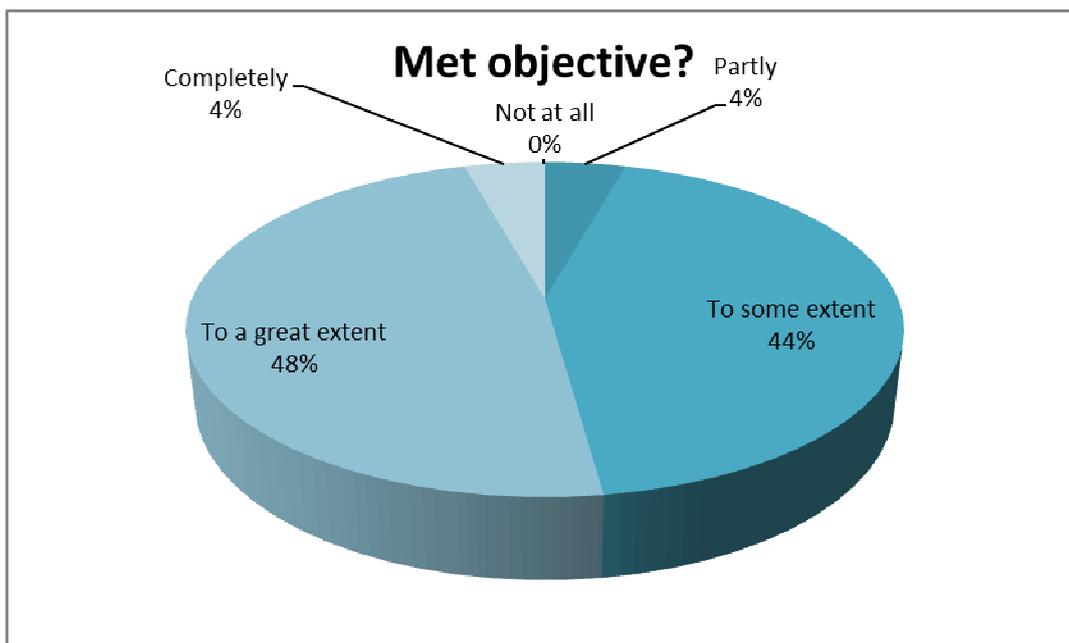
Workshops



Additional comments about the different aspects of the event

- Excellent opportunity to build an understanding of each other's role. Relationship building – knowledge, skills, attitude.
- Some interesting discussions with some new contacts for me.
- Good demonstrations of preventative work, which will only continue with appropriate funding.
- The presentations on the Health and Wellbeing Board progress and the state of the VCS were relevant, but could have been presented differently – eg in the information pack.
- Needed more time to discuss the challenges for the VCS.
- The VCS challenges discussion could have been split into concerns of larger VCS organisations and concerns of smaller VCS organisations.
- The presentation slides were quite hard to read due to the colours used.
- There has to be an outcome from this. If nothing happens then we will have wasted our time.

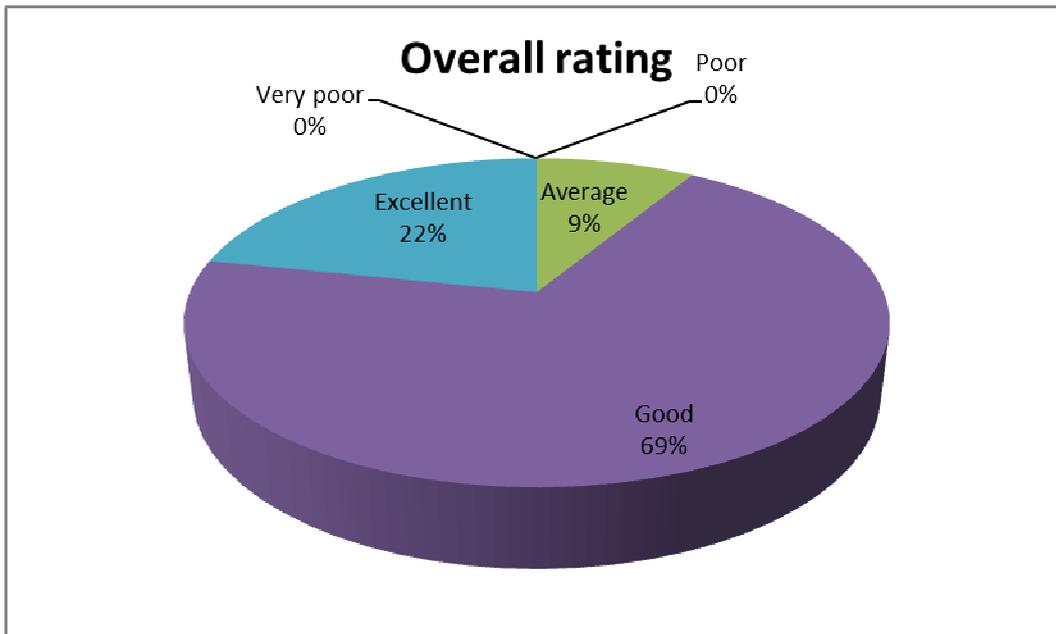
4. *To what extent do you think the event met its objective to explore ways the Health and Wellbeing Board can work better with the voluntary and community sector to address local health needs?*



Additional comments about the extent to which the day's objective was met

- There was a lot of debate. It's clear that we need to improve the process for the VCS to liaise with Health and Wellbeing Board members.
- There was an element of talking to those who are already engaged. Where were the rest of the Health and Wellbeing Board members?
- Not sure of the process to engage with and inform the Health and Wellbeing Board members not present at the event.

5. How would you rate today's event overall?



Additional comments about the overall event

- This is a good start, but this area will need more development.
- It was useful to put faces to names.
- Really enjoyed the challenges. Now, so what? Keep talking and listening.

6. What additional information would you have liked?

- I'd like to see the ideas materialise in some concrete action.

7. For any future events, could you suggest areas of focus and any preferred formats? Eg presentations, Board Q&A sessions, workshops etc.

- The next event to focus on actual strategy in the hope that by then the VCS and statutory services will share information better.
- The workshop format is good, though need to ensure group numbers are evenly split.
- Can the Health and Wellbeing Board please continue to hold these meetings? They give "us" in the third sector the chance to get to know the Health and Wellbeing Board, its work and its direction of travel.
- Several ideas raised which could be sessions in their own right.
- The role of the Health and Wellbeing Board. Its structure, role and functions. How does it feed into commissioning? What teeth does it have?
- I think a more focused event would be more helpful, perhaps looking at separate aspects of the Health and Wellbeing Board's priorities.
- More of the same.

8. Any other comments?

- A mental health forum to underpin effective communication between the Health and Wellbeing Board and VCS (and statutory sector) seems to be urgently needed.
- A very valuable day. Please respond promptly to the strong need for a 2014 version of the Health and Wellbeing Group
- Whilst case studies one and two were interesting in themselves, I have not got time to spend on subjects that are not relevant to the work I do and I think it was very wasteful to have a large group of senior people listening to these case studies. If there were lessons for Health and Wellbeing Board issues, they weren't made. Case study three (Better Health Network) was useful for me, but probably wasn't for people working with children, for example. I do think the event was useful for networking and just sharing experiences and knowledge, so it was worthwhile coming.
- Feeling positive and hopeful.
- Need to hear back if any difference has been made.

Appendix B: Action plan from stakeholder event

Action planning following 17 July 2014 Health and Wellbeing Board stakeholder event

How can the Health and Wellbeing Board (HWB) and voluntary and community sector (VCS) work better together to address local health needs?

	Action	Output	Rationale	By when	Who
1.	Re-launch the HWB's stakeholder newsletter.	Newsletter	<i>'Newsletters can be a useful mechanism – we need to restart the Health and Wellbeing newsletter and include the VCS in the distribution.'</i>	October 2014	Adrian Lyne
2.	Raise awareness of the various ways for the VCS to feed into the Health and Wellbeing Board's work.	Newsletter Twitter	<i>'Lack of capacity to engage with the various initiatives and every organisation. This is particularly true of smaller VCS organisations.'</i> <i>'Need to ensure VCS organisations understand the umbrella arrangements and how to feed into partnership arrangements – eg Local Health Partnerships, Children's Trust Area Partnerships.'</i> <i>'What is the structure under the Health and Wellbeing Board? How do items get onto the agenda?'</i> <i>'We need to improve the process for the VCS to liaise with Health and Wellbeing Board members.'</i>	December 2014	Adrian Lyne
3.	Ensure plain language is used as much as possible with any communication with the VCS.	Newsletter Email	<i>'The language used by statutory organisations can be a barrier for the VCS, eg the use of acronyms.'</i>	Ongoing	Adrian Lyne / All

4.	Include a slot on the VCS in Cambridgeshire on a future HWB development day to increase awareness and understanding.	Session at development day	<p><i>'[There is] a lack of understanding of the different layers of the VCS.'</i></p> <p><i>'Lack of knowledge about other VCS organisations in Cambridgeshire and beyond.'</i></p> <p><i>'Is everything that is delivered by the VCS consistently understood by commissioners?'</i></p>	June 2015	Adrian Lyne
5.	Issue a template case study for the VCS to complete and share with the HWB.	Newsletter HWB Strategy Development day	<p><i>'A simple case study template for all VCS organisations to use would be a helpful resource, particularly when developing strategies.'</i></p> <p><i>'Evidence of the contribution of the VCS in Cambridgeshire should be collected.'</i></p>	October 2014	Adrian Lyne
6.	Ensure sufficient notice given when inviting the VCS to take part in events.	Newsletter Email Website	<p><i>'Better and more informed planning, eg notification of meetings etc.'</i></p> <p><i>The Health and Wellbeing Board needs to plan ahead and be clear when inviting the VCS to meetings:</i></p> <ul style="list-style-type: none"> - Give early notice - What is the meeting about? - Who is it aimed at? - Publicise widely - What preparation is needed? 	Ongoing	Adrian Lyne / All
7.	Ensure the VCS, not just the Council for Voluntary Services is invited to take part in events/projects.	Various	<i>'The VCS is involved in Joint Strategic Needs Assessments, but more VCS organisations should be invited to take part from across the county.'</i>	Ongoing	All

			<p><i>'Some things can be covered generically by the CVS, but some things need specialist expertise.'</i></p> <p><i>'Ensure approach to consultation is inclusive. This is crucial to ensure as many voices as possible are heard.'</i></p>		
8.	Ensure progress made since the stakeholder event is regularly fed back to attendees and other stakeholders.	Newsletter Twitter Press releases	<p><i>'Need to hear back if any difference has been made.'</i></p> <p><i>'I'd like to see the ideas materialise in some concrete action.'</i></p>	Ongoing	Adrian Lyne
9.	Establish a single strategic partnership forum for mental health.	Forum	<p><i>'There needs to be a forum for mental health. A strategic viewpoint and improvement in this area is essential.'</i></p> <p><i>'There needs to be representation of the third sector, not just the Council for Voluntary Services (CVS).'</i></p> <p><i>'A mental health forum to underpin effective communication between the Health and Wellbeing Board and VCS (and statutory sector) seems to be urgently needed.'</i></p>	March 2015	Liz Robin
10.	Raise awareness of the directory of the Cambridgeshire VCS produced and refreshed by the Cambridge Council for Voluntary Services each year.	Newsletter Website	<p><i>'Develop an effective directory of the VCS in Cambridgeshire – though this does have limitations.'</i></p> <p><i>'An information service, such as Cambridgeshire.net. This could be a really useful site if updated, maintained and promoted well.'</i></p>	June 2015	Adrian Lyne

11.	Look into simplifying the procurement process – making it proportionate to the size of the contract.	Procurement documents / templates	<p><i>'Bidding/tendering processes should be kept as streamlined as possible. The process should be proportionate to the size of the contract/project.'</i></p> <p><i>'Need a less bureaucratic approach for pilots/small projects – people should just be able to get on with it.'</i></p> <p><i>'Could Cambridgeshire County Council's legal team come up with a proportionate procurement framework that is within the law and could be used by the whole public sector in Cambridgeshire?'</i></p>	June 2015	TBC
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