

Derbyshire County Council

Proposals for the Cessation of Discretionary Grant Funding 2024

Consultation Report

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Introduction

On 29 April 2024, Derbyshire County Council Cabinet, approved proposals to consult on the cessation of discretionary grant funding as part of its overall proposed budget saving plans set out in the 29 January 2024 Cabinet report.

Consultation Methodology

The consultation period lasted for 12 weeks, commencing 28 May 2024, and closing on 20 August 2024.

During this period, consultations took place with current grant recipients (see appendix 1), and key stakeholders (see appendix 2). All current recurring grant recipients were also contacted, and offered one-to-one or group meetings, public drop-in sessions in libraries and a publicly available questionnaire were published online. The on-line questionnaire was made available in both standard and easy read format and paper copies were provided to organisations and respondents as requested.

The purpose of the consultation was to:

- Gain an understanding of the impact of ceasing discretionary grant funding from relevant stakeholders.
- Enable stakeholders to outline how the policy will impact residents.
- Enable stakeholders to offer viable alternatives within the parameters of the current position for how impact can be mitigated.
- Enable the public to give a view on proposals via online questionnaire and public events.

Consultation Analysis

Officers have analysed and presented the quantitative and qualitative data in the following way:

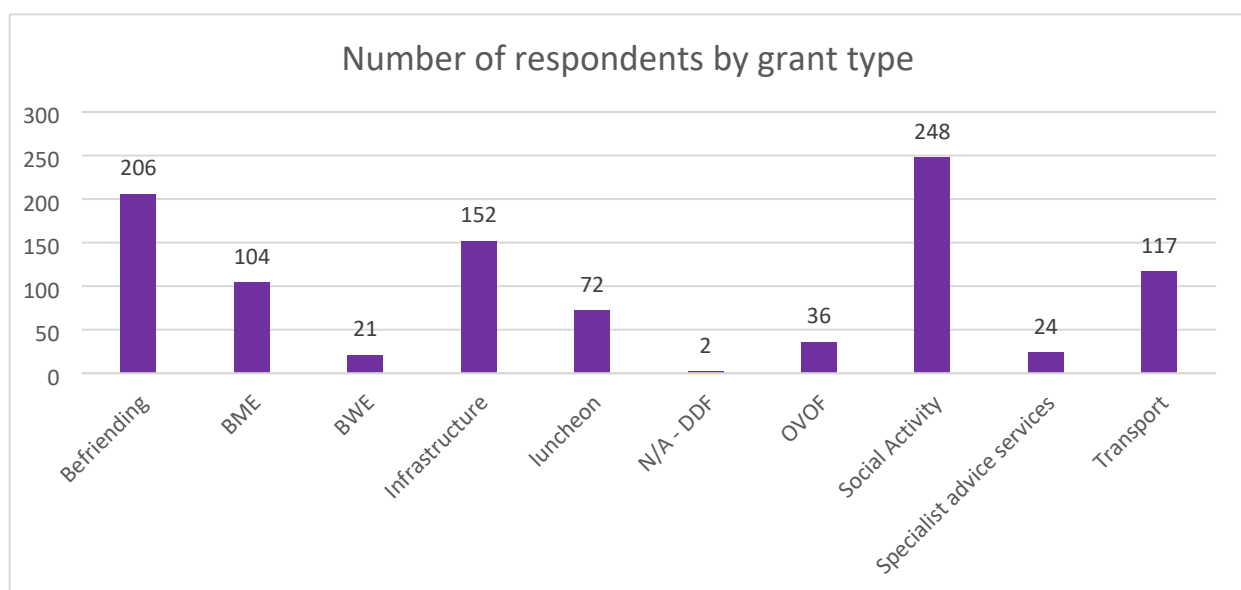
- General summary of consultation – total number of respondents and general information on proposals.
- Thematic analysis of qualitative data, incorporating questionnaire responses, key stakeholder meetings, listening events and other correspondence commenting on the proposals.
- Statistical analysis of quantitative data for each of the questions in the survey response data.

General summary of Consultation

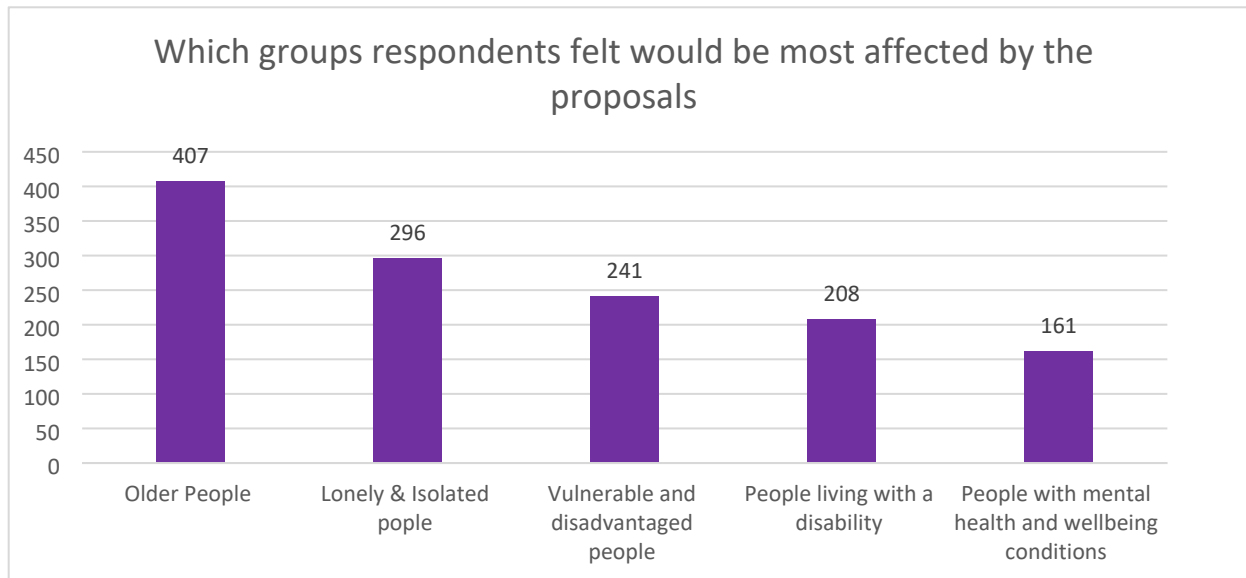
- 1374 responses we received to the consultation survey form (online & written).
- Over 120 people attended listening events and engagement meetings.
- 91% of all respondents either ‘strongly disagree’ or ‘disagree’ with the proposals.

Area	No. of responses
Amber Valley	68
Bolsover	23
Chesterfield	140
Derbyshire Dales	129
Erewash	79
High Peak	219
Northeast Derbyshire	52
Not stated	112
Out of Area	62
South Derbyshire	98

- Many respondents demonstrated a strong feeling that the Council’s proposal was ‘shortsighted’ and that the medium to long term consequences had not been fully considered.
- Residents, many of whom were beneficiaries of organisations in receipt of funding, consistently indicated how much they value the VCS and rely on the support they provide for a range of day-to-day activities, including those that promote independence and prevent isolation.
- There was concern that a cessation of all funding would have a sector wide destabilising effect and lead to uncertainty about the future of organisations, services, facilities, and community activity.
- Many respondents explained the negative impact ending the grants would have on the Council’s relationships with the Derbyshire VCS, putting future collaboration at risk.
- Many respondents commented on the potential loss of Befriending support as having a critical impact on “vulnerable” people’s mental health and wellbeing.



- Loss of community transport funded by Social Activity Grants in High Peak and South Derbyshire potentially leading to increased isolation and reduced access to support was highlighted by many.
- Partners indicated that whilst they understood the Council's financial position, there was significant concern about the wider impacts of the proposal on service delivery and referrals to community activity, particularly in relation to health outcomes.
- Many respondents suggested that the proposal would result in increased demand for statutory services at a higher long-term cost to the public sector.



- Respondents suggested that volunteers were a key resource in the effective delivery of value for money community support, but that without adequate support and coordination, numbers of volunteers would decline.
- Many respondents were affiliated with an organisation currently in receipt of funding, whether that be as a volunteer worker, person who draws on care and support or a member of the organisation.
- A small number of respondents supported the proposal and agreed that statutory services should be prioritised, and the grant recipients should work to diversify funding.

Listening events

All providers and stakeholders were invited to attend an in-person or online listening event, the purpose of the events was to:

- Ensure stakeholders understood the proposals.
- Gain an understanding of the impact of ceasing discretionary grant funding from relevant stakeholders.
- Enable stakeholders to outline how the policy will impact residents.
- Enable stakeholders to offer viable alternatives within the parameters of the current position for how impact can be mitigated.
- Enable the public to give a view on proposals.

Befriending listening event

26 June 2024 at Post Mill Centre, South Normanton

Below is a summary of what people told us at the event:

- Whilst the council's financial position was understood, it was felt that the negative impact on VCS and people who draw on care and support would likely cost the Council more in the medium to long term.
- Providers were anxious that due to the Council's consultation timescales, they would have little time to action any decisions.
- Some partners informed that without the grant, they would cease to host a befriending service which would create disparity amongst Derbyshire postcodes.
- Other partners implied that relationships between VCS and the Council will likely be damaged putting future collaboration at risk.
- Providers informed that the monetary impact would affect more than the befriending services.
- Concerns were highlighted that without the preventative service, it would create a strain on other VCS, statutory services, and hospital admissions.
- Demand for befriending services is high, often with waiting lists as there is no alternative suitable service for residents.
- It was felt that decision makers did not understand the impact of consultations on other consultations, for example the closure of day centres will increase demand for befriending services.
- It was indicated that the loss of befriending services, would heavily impact on health outcomes due to increased isolation/ loneliness and decreasing services to support independence which would result in increased demand for statutory social care and health services.
- Providers informed that there will be a loss of skills, and volunteers thus limiting the council and providers ability to reintroduce befriending at a later date.

BME Forum Grants listening event

25 July 2024 on MS teams

Below is a summary of what people told us at the event:

- Members reported that the Forum promotes equality, diversity, and inclusion.
- BME groups indicated that they value and rely on the Forum as a useful source of information and advice and learn about DCC services.
- Members suggested that service users rely on groups supported through the Forum for culturally appropriate support, and that DCC funding is very important in supporting core activity.

- Groups questioned the amount of savings that would be achieved through the proposal and were concerned about what support would be available in future.
- Some attendees suggested groups could close because of the proposal.
- Groups reported that their members could be left without support and described current activity as a 'lifeline' to some vulnerable residents.

Bolsover Woodlands Enterprise (BWE) listening event 25 June 2024 in Carr Vale, Bolsover

Below is a summary of what people told us at the event:

- People who draw on care and support and their carers, were anxious as to what process to follow to check eligibility/ obtain funding to ensure continuity of care. It was highlighted that the cost will not be saved as people will receive direct payments instead.
- Carers were concerned that without BWE, they and their dependents will face isolation/ loneliness and with the increase in need and lack of respite, dependents will then begin to rely on statutory services.
- People were anxious that due to the council's consultation timescales, they would have little time to action any decisions.
- It was felt that BWE has a positive impact on the community and surrounding environments due to their work.
- People felt that there was not a suitable/ appropriate alternative

Luncheon clubs listening event 3 July 2024 at Post Mill Centre, South Normanton

Below is a summary of what people told us at the event:

- Participants felt luncheon clubs offered social capital to residents, which prevents loneliness and isolation.
- It was highlighted that the clubs primary funding is from subscriptions, along with fundraisers however, as residents often pay for travel as well it will be too expensive for them should subscription charges increase thus some may fold.
- Providers felt the services were very cost effective and at a low cost to the Council.
- Providers told us that the Council has elevated expectations of luncheon clubs i.e. food safety, manual handling but does little to support them.

Our Vision Our Future (OVOF) listening event 22 July 2024 at OVOF site, Chesterfield

Below is a summary of what people told us at the event:

- People informed us that there is no suitable alternative provision for attendees, which may affect people's wellbeing and the opportunities for carer respite, causing demand on statutory services to increase.
- It was felt that OVOF offered social value, and enabled people who draw on care and support to gain employment whilst being cost effective
- People told us that additional engagement opportunities with other services (e.g. Live Life Better) are significant and, if OVOF were to close, those opportunities will be lost.

Social Activity Grants listening event 3 July 2024 at Post Mill Centre, South Normanton

Below is a summary of what people told us at the event:

- Providers were anxious that due to the Council’s consultation timescales, they would have little time to action any decisions and the impact may affect residents during winter when they are most vulnerable.
- Social activity grants form part of DCC’s preventative offer which reduces demand on statutory services.
- Health provisions will become increasingly difficult to access by vulnerable people in rural areas or with mobility needs due to limited transport resource particularly in High Peak, Derbyshire Dales, and South Derbyshire.
- Providers were concerned for the VCS’S long term sustainability due to consistent financial pressures as well as the loss of volunteers, skills, and capacity, emphasising that this would also increase the strain on statutory services.
- There could be an impact on those people who are not able to access information online.
- Whilst the Council’s financial position was understood, it was felt that the negative impact on VCS and people who draw on care and support would likely cost the council more in the medium to long term.

Engagement meetings

All providers were invited to attend an in-person or online engagement meeting, the purpose of the events was to:

- Ensure stakeholders understood the proposals.
- Gain an understanding of the impact of ceasing discretionary grant funding from relevant providers.
- Enable providers to outline how the policy will impact individual organisations.
- Enable providers to offer viable alternatives within the parameters of the current position for how impact can be mitigated.
- Enable providers to give a view on proposals.

Advice Services engagement meetings

Corporate Services met with the Derbyshire Law Centre (DLC) independently to discuss the impact on their organisation and community. Citizen’s Advice Mid Mercia were also offered a meeting but declined.

Advice Services Engagement Meetings	Date	Venue
Derbyshire Law Centre	30/07/24	Chesterfield Town Hall

Below is a summary of what people told us at the event:

- Loss of funding would reduce DLC’s capacity to level in additional funding from other sources, with every £1 of core-funding helping DLC attract an additional £7.22 in funding from other sources.
- Further pressure would be placed on DLC’s ability to operate legal aid contracts across Derbyshire for the benefit of those on low and unstable incomes.
- Capacity would be reduced through redundancy and retention implications. Expertise and experience would be lost in an already niche sector.
- It was suggested that DLC is the only Derbyshire-based legal charity to operate legal aid in the county.
- Funding enables the subsidy of three legal aid contracts across Derbyshire. All private legal firms in Chesterfield have pulled out of administering legal aid in social welfare law, save for Family law.

- Funding pays for a telephone assessment service which is crucial in delivering specialist legal advice in social welfare law, supporting families with accommodation, employees can enforce their right in work, residents can manage with debt, migrants and refugees have the right to stay, and discrimination is averted and prevented.
- Withdrawal of funding could lead to dramatic changes to service to guard against long term deficits in core expenditure.

BME Groups engagement meetings

Corporate Services and Transformation met with two BME grant recipients independently to discuss the impact on their organisation and community. All funded groups were offered individual meetings, however Chesterfield Muslim Association and Derbyshire Chinese Welfare Association opted to participate in the BME Forum listening event instead, and the Muslim Welfare Association did not participate in any events.

BME Engagement Meetings	Date	Venue
Asian Association of Chesterfield and NE Derbyshire	24/07/24	Asian Association office
African Caribbean Community Association	24/07/24	ACCA office

Below is a summary of what people told us at the event:

- Groups indicated that they have received funding for many years and have built activity and support over time in response to the changing needs of communities.
- Current funding contributes to core costs such as premises.
- Loss of funding could impact community activity, ability to support BME residents and in some cases could result in the closure of groups.
- The ability of groups to secure additional funding could be impacted by the loss of stable recurring funding.
- A potential loss of preventative activity with BME residents, translation services and signposting including assistance to access statutory services could have a negative impact on public sector organisations.
- Groups suggested it was likely that there would be significant impacts on older BME residents resulting in a decline in mental and physical health.
- It would become increasingly difficult for groups to plan effectively without stable funding.
- Current support is well used and demand from communities is growing.

Infrastructure engagement meetings

Adult Care and/ or Corporate Services met with the individual infrastructure grant recipients to discuss the impact on their organisation and community.

Infrastructure Engagement Meetings	Date	Venue
Meeting with Erewash CVS	26/06/2024	Erewash CVS Office
Meeting with Derbyshire Dales CVS	02/07/2024	Agricultural Centre, Bakewell
Meeting with South Derbyshire CVS	10/07/2024	Teams
Meeting with Chesterfield Volunteer Centre	27/06/2024	Teams
Meeting with the Bureau, Glossop	22/07/2024	The Bureau, Glossop
Meeting with DVA	03/07/2024	Teams
Meeting with New Mills Volunteer Centre	08/07/2024	Teams

Meeting with High Peak CVS	15/07/2024	Teams
Meeting with Bolsover CVS	14/08/2024	Teams
Meeting with Amber Valley, CVS	13/08/2024	Amber Valley CVS office
Meetings with Links CVS	04/07/2024	Teams
Meeting with Rural Action Derbyshire	03/07/2024	Teams
Meeting with Links CVS (BME Infrastructure)	04/07/2024	Teams
Meeting with Connex	31/07/2024	Teams

Below is a summary of what people told us at the events:

- Providers were concerned for the VCS's long-term sustainability due to consistent financial pressures as well as the loss of volunteers, skills, and capacity, emphasizing that this would also increase the strain on statutory services and could not be easily rebuilt.
- The impact on smaller community organisations would be significant, with many relying on the specialist advice, support, and community grants from local infrastructure organisations.
- People who draw on care and support could be impacted as soon as Winter 2024 when they are most vulnerable.
- The demographics and characteristics of residents varies in each area, thus centralised services are not suitable for all.
- Growing populations and increased risk of deprivation/ crime in communities, has already impacted on VCS and it is predicted that demand will continue to increase.
- Providers were anxious about the consultation timescales, with concerns that time to implement decisions would be limited.
- The majority of providers acknowledge that infrastructure support requires a review and encourage innovative approaches, but this would not be possible if funding ceases.

Public drop-in sessions

The Stakeholder Engagement and Consultation Team hosted public drop-in sessions across the County, with the purpose of:

- Ensuring that the proposals were understood.
- Gaining an understanding of the impact of ceasing discretionary grant funding.
- Enable the public to tell us how the policy will impact on them and their communities.
- Enable the public to tell us of other viable alternatives within the parameters of the current position for how impact can be mitigated.
- Enable the public to give a view on the proposals.

Date	Venue
28/05/2024	Chapel-en-le-Frith Library
31/05/2024	Alfreton Library
03/06/2024	Swadlincote Library
05/06/2024	Chesterfield Library
06/06/2024	Long Eaton Library
07/06/2024	Eckington Library
12/06/2024	Ashbourne Library
17/06/2024	Bolsover Library

18/06/2024	Ilkeston Library
19/06/2024	Heanor Library
02/07/2024	Buxton Library
25/07/2024	Shirebrook Library

Below is a summary of what people told us at the events:

- People were concerned as to how financially resilient VCS organisations are and how it could impact them negatively going forward.
- Some people felt they lacked the information they needed to make an informed decision i.e. most recent council accounts not available online.
- It was felt that people were concerned how disadvantaged people would be impacted by the proposals.

Formal responses

Formal response from Derbyshire Befriending Network

We received written documentation from the Derbyshire Befriending Network (full list of Derbyshire Befriending Network partners included in Appendix 3) and the key themes from their response were:

- The volunteering environment has changed in recent years.
- People have more demand on their time and finances.
- Processes need to be tailored to meet the needs of different demographics.
- Befriending services receive increasingly high number of referrals.
- Befriending services support statutory services.
- Preventative support can prevent crisis which reduces costs.

Formal response received from the BME Forum

We received a written response from the BME Forum (full list of BME Forum Partners included in Appendix 4) and the key themes from their response were:

- In 2006, the Council commissioned Links CVS to help the development of a sustainable method for consulting and engaging with Black and Minority Ethnic (BME) communities in Derbyshire.
- It was estimated that the 12 participating groups in the BME Forum collectively provide direct support to in the region of 6,000 BME residents in Derbyshire.
- The discretionary grant that funds the work of the BME Forum enabled Links CVS to facilitate the Forum, which in turn supported the development of an infrastructure that worked to enable the culturally diverse BME communities in Chesterfield, North East Derbyshire and the wider Derbyshire areas to be actively engaged with the Council and, where relevant, partner agencies providing feedback on the policy and service developments of DCC and partner agencies.
- The Forum gathered insights and represented voices regarding the lived experiences of, and the unidentified barriers preventing members of the diverse BME groups engaged to access services by mainstream service providers.

- BME individuals via their respective community groups relied on the Forum to access information on essential services, such as health and social care, education, and employment.
- If the Forum ceases to exist, it was suggested that this would create a significant gap in accessing information on service provisions, which may further marginalise these groups, further deteriorate their health and wellbeing, increase structural racial inequality and social injustice, and ultimately further polarise the social integration and cohesion in society.
- Many BME community members frequently faced challenges, including racially motivated hate crime, discrimination, and social injustice. Its members felt that the Forum played a key role in promoting understanding and respect among diverse groups and the wider community, fostering community cohesion. Its initiatives and events brought people together, creating a more inclusive and harmonious society. Losing the Forum would mean losing this vital source of solidarity for the groups who attend.
- The Forum felt it was successful at representing the diverse culturally needs of the BME communities through facilitating dialogues which lead to collaborative working in areas such as physical and mental health and well-being, as well as other social care provisions that are disproportionately affecting BME communities.
- The Forum also felt it served as a bridge between the Council and diverse communities and ensured their voices are heard in local decision-making. Without this platform, the Council risked becoming disconnected from these communities, leading to policies and services that did not reflect their cultural needs and concerns.
- The Forum felt it played a crucial role in enhancing the Council's understanding of the cultural nuances and challenges faced by BME communities. Its absence would result in a significant loss of cultural competence within the Council. In the absence of Forum, engagement levels were likely to drop drastically, reducing the diversity of voices in public consultations, community initiatives, and local governance.
- The Forum outlined that it had contributed to social cohesion by promoting understanding and cooperation between different cultural groups. The dismantling of this support network could lead to increased social fragmentation and a weakening of community bonds across Derbyshire.
- Feedback suggested that the loss of engagement with BME communities would not only affect immediate service delivery but could also have long-term repercussions, making it challenging for the Council to rebuild relationships and regain the trust and participation of these communities in the future.

Formal responses from County Council Partners

We received written responses from other local authorities and health partners (see appendix 5 for full list) and the key themes from their responses were:

- Partners were concerned that the proposals would have an immediate detrimental impact on grant recipients and the wider communities, with some organisations anticipating closure, others will likely reduce capacity and review staffing levels which will affect unemployment rates in Derbyshire.
- Health partners were anxious that the cessation of the discretionary grants would increase demand for primary and secondary healthcare services, which due to their own budgetary pressures was not affordable.
- It was highlighted that the withdrawal of funding may lead to reputational damage and affect future collaborative working, with a general lack of trust and dissatisfaction from people who draw on care and support, community organisations and the general public.

- The resilience and sustainability of the sector could be severely impacted, which would affect area responses to emergencies including pandemics, heatwaves.
- It was implied that the council has breached agreements made under the “VCSE Memorandum of Understanding” in June 2023 as a partner of the Integrated Care Partnership.
- It was felt by partners that the proposals were short sighted and counterproductive.

Formal joint response from Derby & Derbyshire Infrastructure Alliance (DDiA)

We received a written response from the DDiA and the key themes from their responses were:

- There are significant interdependencies for core activities funding and service/project commissioning, between statutory services, infrastructure providers and the wider voluntary and community sector.
- Funding which supports the core is a key and essential part of the funding economy for providers and can't be reviewed/withdrawn in isolation. This funding offsets many costs which support the delivery of a wide range of activity and will make it increasingly difficult or reduce the ability for providers to deliver other contracts and support the commissioning services across the sector, which different parts of the system are reliant on providers to undertake.
- Support given to communities which encourages volunteering or provides a platform from which small, grass roots organisations are supported should not be seen as discretionary.
- The social value of service potentially impacted by the proposal is disproportionate to the financial cost of providing them – less than 0.13% of the Councils total budget.
- The proposal would result in a loss of community resilience that will impact on the statutory sector the next time there is an emergency, and you can't only have the sector when you need it.
- The current process of consultation does not align with the Memorandum of Understanding developed by JUCD VCSE Alliance which highlights co-production and co-design as the method for planning, changing, and investing or disinvesting
- Infrastructure providers are critical to engaging and developing the wider VCSE sector, especially in transformational activities which align to statutory needs and which infrastructure providers can achieve in partnership.
- A smaller VCSE sector will increase demand on costlier statutory interventions and on front line services, including:
 - Early ICB initiatives.
 - Keeping people in their own homes.
 - Discharge from hospital.
 - Work on health inequalities.
 - Local emergencies (floods, cold weather, heatwaves).

Formal responses received from the Voluntary and Community Sector

We received written responses from a number of voluntary and community sector organisations (see appendix 7 for full list) and the key themes of their responses were:

- Concern that the proposals would affect the sustainability and resilience of the sector in the medium to long term, with the damage being irreparable. It was noted that this would affect Derbyshire's response to national/ county emergencies.
- Many providers highlighted the detrimental impact on their individual organisations, with opinions that some would cease to operate whilst others would have reduced capacity and/ or job losses.

- It was felt that the social value of the services far exceeded the cost.
- Providers were anxious that vulnerable people would be impacted as soon as winter 2024 when demand for services is at its peak. Additional concerns were highlighted that with reduced preventative services, health needs of individuals would increase significantly creating additional demand for already stretched frontline health and social care statutory services.
- Partners felt that the proposals were disrespectful of the sector, and implied that the council's reputation was already damaged and could be impacted further dependent on the decision, which would affect collaborative working going forward.

Formal joint response from VCSE Alliance

A formal response was received from the JUCD VCSE Alliance (See Appendix 8 for full list of participants) and the key themes from their response were:

- The removal of all grants will have a long-term impact on statutory services.
- VCSE advocates play a vital role in stimulation and supporting 'grass roots' organisations.
- The proposals do not support the priorities included in the council Health & Wellbeing strategy to be resilient and independent, support good mental health, and tackling the four main risk factors leading to poor health.
- Recommendation to collaborate with system partners in producing a health inequalities assessment.
- ICB/ ICS would be impacted by the cessation of grants with higher demand for primary and secondary healthcare services.
- Infrastructure organisation's ability to secure alternative funding will be impacted which will also affect smaller organisations.
- There will be a higher usage of emergency services and increase hospital admissions.
- Future collaborative working could be impacted.
- The council's reputation will be damaged.
- Some infrastructure organisations are currently facing resilience and sustainability challenges.
- There could be worsening health outcomes particularly for older adults, disabled people, and those with chronic conditions.
- People's mental health could deteriorate.
- There will be an increased pressure on social care services with potentially; longer waiting times, reduced quality of care, and more expensive costs.
- The proposals could increase the burden on informal/ unpaid carers.
- It will be more difficult for the ICB to coordinate care; thus, they may be required to adjust strategic plans.
- This will create health inequalities.

Questionnaire responses (online & paper):

A total of 1374 consultation questionnaire responses were submitted online and via paper copies and of these (See appendix 11 for full equality and diversity breakdown of respondents.):

605 respondents indicated that they were responding as a grant recipient. They included:

- Infrastructure organisations
- BME

- Specialist Advice
- Befriending/Luncheon Clubs
- Our Vision Our Future
- Bolsover Woodland Enterprise.

(See appendix 9 for full list of organisations who responded).

119 respondents were VCS Organisations who do not currently receive a grant which is currently under review. They included:

- Community groups/associations
- Charitable Incorporated Organisations
- Community Interest Companies.

(See appendix 10 for full list of organisations who responded)

73 respondents indicated they were responding as a County Council Partner and Stakeholder. They included:

- District & Borough Councils
- Health Partners
- Education providers

(See appendix 11 for full details)

494 respondents indicated they were responding as a resident. They included:

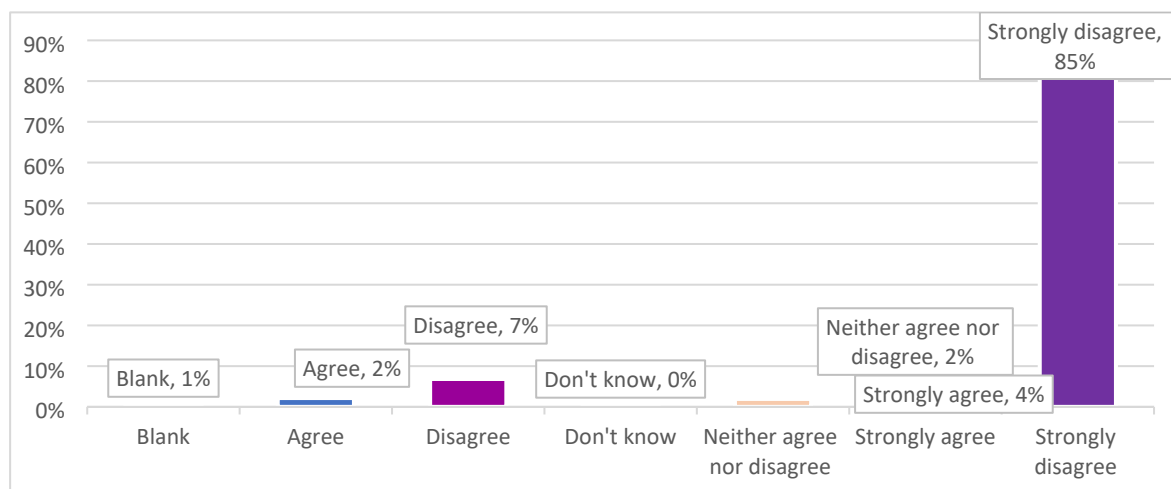
- People who draw on care and support
- Volunteers
- Those with caring responsibilities
- Older and vulnerable people
- People living with a disability including physical and learning disabilities

81 respondents did not identify themselves as belonging to any of the above categories.

16 letters and alternative formal responses were also received from a number of organisations. (see appendix 12 for full list).

Detailed Consultation feedback

Q10: How strongly do you, or the organisation which you represent, agree, or disagree with the Council's proposal to no longer award discretionary grant funding to the organisations listed?



Q 11: If you have any alternative suggestions on how affected voluntary sector organisations could otherwise be supported, please put them in the box below.

Summary of key themes from responses:

- **Continue funding**
198 comments called for a continuation of discretionary grants, often stating that funding is 'essential' or 'vital', organisations rely on grant funding to support their core costs, a cessation of discretionary grants would be 'unfair', and that there are no alternative options because of these points. Respondents also commented on the negative impact the proposal would have on funded organisations and those who access the support they provide.
- **Diversify funding**
79 respondents indicated that VCS groups could diversify funding sources by applying to other funding bodies for support, encouraging businesses to fund, fundraising, crowdfunding etc. or charging for services. Some respondents suggested the Council had an obligation to support groups to do this.
- **Impact on Services**
53 comments indicated that VCS support often reduces the burden on statutory services and that if these services were to end as a result of the proposal, there would be greater demand and increased 'pressure' on public sector services.
- **DCC efficiencies**
43 comments suggested that the Council should make additional efficiencies and savings in order to continue discretionary grants. Respondents referred to a range of potential efficiencies including consultancy and external services costs, reducing staff and management costs, streamlining services and County Councillor expenses. There were also references to the continuation of recruitment while consulting on the proposal.
- **Central government**
27 respondents suggested that the Council should lobby central government for an improved funding settlement to support discretionary grants, or that central government should fund the impacted organisations directly. Several comments referred to the change in Government and suggested that this may impact the funding landscape.

- **Value for money**

26 comments related to the value for money that the VCS provides and reflections that the level of investment is modest in comparison to the level of activity provided and outcomes achieved.

- **Alternative budget sources**

- 25 respondents suggested that the Council could raise the money to support discretionary grants through increases in other charges including Council Tax or service charges for other activity. Some respondents suggested that the Council could commission the VCS to provide services on behalf of the Council.

- **Challenges of fundraising**

23 responses indicated that the VCS already apply for as much additional funding as possible but find it difficult to secure appropriate funding particularly in relation to core costs.

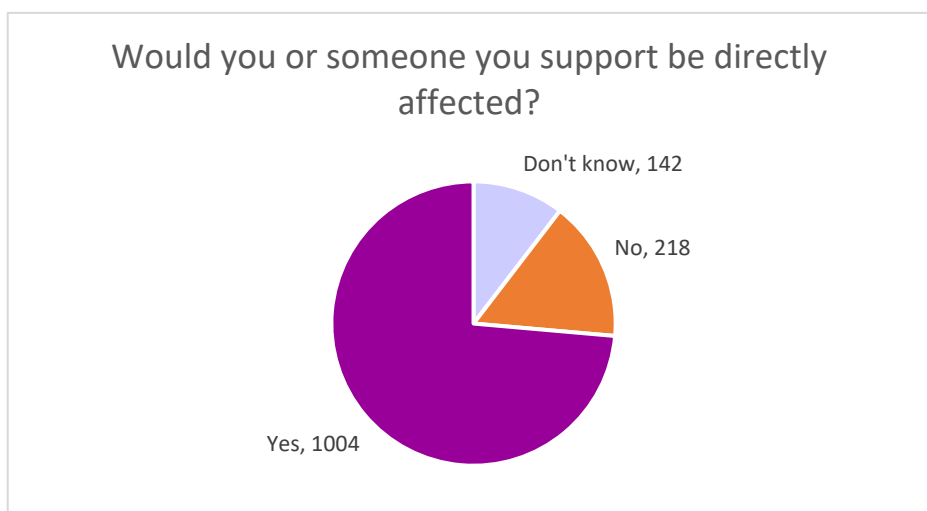
- **Alternative support**

21 comments suggested that if the proposal were implemented, DCC could provide alternative support to the sector such as low cost or free meeting spaces/accommodation, expertise such as finance, IT and HR support, and funding advice.

Other comments/suggestions included:

- Review and narrow criteria for discretionary grants and have more robust monitoring requirements to ensure funded organisations are supporting valued activity (18)
- VCS could work more collaboratively to combine skills and resources, rationalise premises and reduce duplication (14)
- If proposal were implemented, reductions in staffing would be likely and some organisations would be at risk of closure (10)
- Reduce funding rather than implement a blanket cessation (9)
- Relationships with DCC could be impacted by proposal and cumulative funding cuts (7)
- Work with public sector partners to continue to fund (7)
- DCC could offer more small grants as an alternative to discretionary grant funding (3).

Q 13 (Would you, or someone you support, be directly affected by the proposal if this were implemented?) If "Yes", please tell us how you, or they, would be affected.



Summary of key themes from responses

- **Loss or reduction in activity and associated impact**

650 respondents referred to the potential loss of 'valued' support and activity. Services were often described as a 'lifeline' or 'essential' for those that use them and more vulnerable residents in particular rely on the support they access. There was concern about what support would be available in future and also concern about sector support and resilience.

- **Impact on isolation and loneliness**

281 comments related to the potential impact of reduced social contact and activities on the isolation and loneliness of vulnerable residents. Impacts on the quality of life and general health and wellbeing of people who draw on care and support were also indicated in relation to a reduction in confidence and independence.

- **Mental health and wellbeing**

156 respondents made references to a negative impact on mental health both for those that access support and for volunteers whose roles are often cited as having a positive impact on their mental wellbeing. Some respondents also referred to mental health impacts for those that are currently employed by the impacted organisations.

- **Volunteers**

107 identified volunteers as being impacted as a valued resource in the effective delivery of community activity. There was concern that sector capacity would be impacted by any changes to volunteer support and coordination or reduced opportunities to volunteer.

- **Older people**

104 comments cited older or 'elderly' people as groups that access current activity and would therefore be impacted by any changes to current activity. The potential loss of befriending activity and transport was a particular concern for residents.

- **Impact on statutory services**

94 respondents identified a significant impact on Council and partner services due to potential increased demand if the proposal leads to a cessation of preventative VCS activity. It was also anticipated that this would result in a higher long-term cost. Respondents referred to statutory services generally and some referenced ASCH services, NHS services including GP and hospital services and preventative projects across organisations.

- **Disability and health**

90 comments referred to people living with a disability or those with poor health as being impacted by the proposal.

- **Loss of sector support**

66 comments, predominantly from currently funded organisations and VCS groups indicated concern about a loss of infrastructure support and a corresponding reduction in cross sector activity and capacity.

- **Signposting and referrals**

48 respondents indicated concern about the impact the proposal could have on the ability of VCS groups and partners to signpost clients to community services.

- **Impact on organisations**

54 comments indicated that organisations would be at risk of closure.

39 comments were concerned that groups would have to spend more time fundraising and may need to introduce/increase charges to their users.

37 responses suggested organisations may need to make redundancies or reduce staff hours leading to reduced capacity.

- **BME**

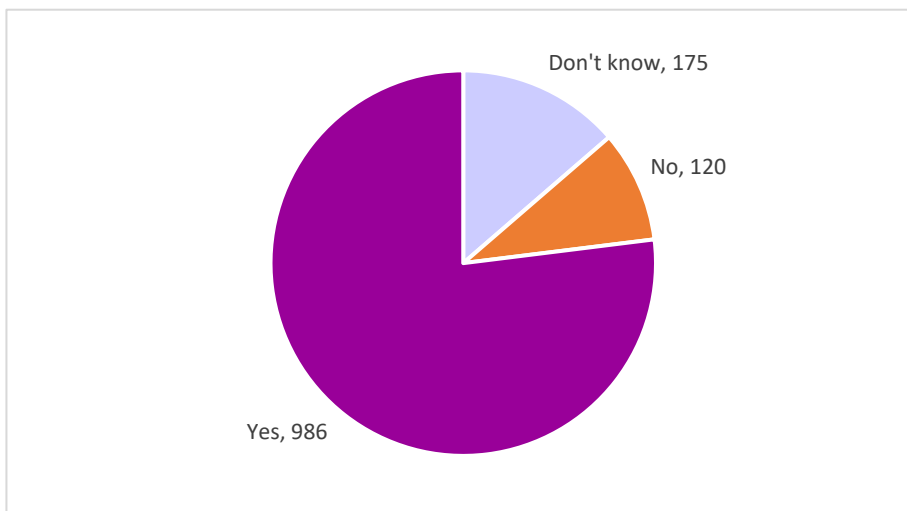
31 comments indicated that the BME community and BME community groups would be impacted, particularly by the loss of the BME forum.

Other comments/suggestions included:

- People with a learning disability or neurodivergent condition could be impacted (21)

- Support and activity for groups and residents in Rural areas would be impacted (16)
- Impact on people living on a low income (9).

Q14 Would the organisation you support be affected by the proposal if this were implemented?



Q15 If "Yes" (Q14), please tell us how the organisation would be affected.

Summary of key themes from responses:

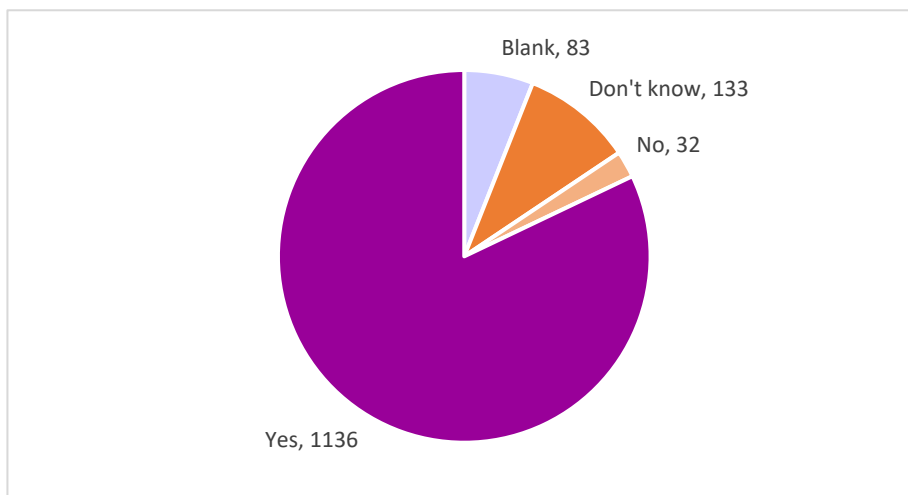
- **Reduction in community activity**
500 responses indicated that a reduction in services and activities including individual and community support was a key concern and that the proposal would have a 'devastating' impact on funded groups, the wider sector, and their beneficiaries.
- **Closure of organisations/redundancies**
148 responses suggested that cessation of funding across the sector could have a destabilising effect which could impact the scope of their operational activity or in some cases, lead to closure. 78 responses suggested that the proposal could lead to redundancies or reductions in staff hours.
- **Demand for services**
73 comments indicated that both the public and voluntary sectors could experience a significant increase in demand for remaining services and significant pressure on statutory services.
- **Infrastructure Support**
64 responses expressed concern about a reduction in sector support, particularly at a time when there may be more groups seeking support with funding applications.
- **Volunteers**
46 responses related to the impact on volunteers and concern that a reduction in volunteer coordination would result in fewer volunteers supporting people in communities.
- **Service Cost**
41 responses from groups and their beneficiaries indicated that it was likely that charges would need to be introduced which would prevent some people from accessing activity (particularly BWE).

Other comments included:

- Reduction in ability to effectively **signpost** and refer people who draw on care and support for **social prescribing** activities (27)

- Organisations would need to use more capacity fundraising rather than delivering support (25)
- A negative impact on **collaborative working** within the sector and an impact on demand for wider VCS services (17)
- Loss of **relationship** between sector and DCC (9)
- Lack of commitment to **equality** (4).

Q16. Do you consider that there are any specific communities or groups of people that would directly be affected by this proposal if it is implemented?



Q17 If yes provide details of the groups and explain how they would be affected.

The most common groups identified from responses:

- **Older** people (407)
- Lonely and **isolated** people including housebound (296)
- **Vulnerable** and 'disadvantaged' people (241)
- People living with **disability** including mobility issues (208)
- **Mental health** and wellbeing (161)
- **VCS** organisations and community groups (110)
- All people across communities or everyone who uses funded services (103)
- People with a **learning disability** and other **neurodivergent** condition (98)
- People on a **low income** including the unemployed and those in receipt of benefits (85)
- **Young people** and families (80)
- **BME communities** (74)
- People living with health conditions and long-term illnesses including dementia (57)
- **Carers** (23)
- **Volunteers** (23)
- **Rural** communities (18)
- Those at risk of or experiencing **homelessness** (13)
- **Digitally excluded** (12)
- **Domestic abuse** (7)
- **Substance misuse** (5)
- **LGBTQ** community (4)
- **Armed Forces** community (1).

The most common impacts identified from responses were:

- A loss or **reduction in 'vital' services** and/or community support (228)

- More people relying on **public sector services** for support and an increased cost in the long term – significant impact on Adult Care (61)
- Reduced social contact and opportunities to participate in community activity / loss of **independence** (57)
- Changes to **transport** support including transport to medical appointments (56)
- Changes to **befriending** service (50)
- Negative impact on **quality of life** and **people who draw on care and support** outcomes (49)
- There is no **alternative support** available (50)
- Changes to **BWE/OVOF** (29)
- Changes to **Infrastructure** support (26)
- Changes to BME Support/Forum (25)
- Shopping support (21)
- Loss of **volunteer coordination/support** (19)
- Changes to **Luncheon Clubs** (15)
- Availability of free **legal advice** (14)
- **VCS rely on grants** (13)
- **Closure** of organisations (8)
- **Social activities (general)** (5)
- Social prescribing and **signposting** (6)
- People can access **alternative support** (3).

Q18. Please provide any other comments.

A wide range of comments were received for this open question, many reiterating answers to previous questions.

The most common themes were:

- **Impact on residents/communities**
360 responses referenced the impact on people's lives, again calling VCS services a 'lifeline' and 'vital' for vulnerable residents. Respondents indicated a possible 'ripple effect' for the sector, the long-term health and wellbeing of people who draw on care and support and their families, communities, and partners, with the potential to cause 'suffering' and impact quality of life.
- **Opposition to the proposal**
267 comments reflected general opposition to the proposal including calls to halt the consultation, abandon the proposal and reconsider the Council's position. Respondents also referenced the 'devastating' impact on the sector and some commented that the proposal is 'bad' and 'shortsighted' as the full impact has not been fully considered. Some comments suggested that as funding was only a small part of the Council's total budget, the proposed savings are not proportionate.
- **Impact/pressure on services and increased long term cost**
142 responses referred to the impact on public sector services including increased numbers of people seeking support and greater pressure on 'already stretched' statutory provision and significant long term cost implications for the Council if preventative activity and support stops. Some respondents indicated that because of this, the proposal would cost more than it would save and was therefore a 'false economy.'
- **The Council's financial position**

50 respondents indicated that they understood the financial position of the Council and the difficult nature of the decisions the Council is required to make in order to set a balanced budget.

- **Value for Money**

49 comments related to the value for money that the VCS represents. Respondents indicated that the VCS delivers significant activity and outcomes for a small investment.

- **Long term impact on VCS**

48 comments indicated that the cessation of funding would have a destabilising effect on the whole sector and the impact would be most significant in the long-term. Funding could not be recommissioned in future as structure for support will be gone.

- **DCC efficiencies**

46 responses stated that they believe the Council should see additional efficiencies and alternative savings to protect discretionary grants. Some comments referred to the Council 'wasting money' and making poor decisions.

- **Alternative options**

32 responses indicated that alternative options should be considered such as reviewing funded organisations and reducing funding rather than ceasing.

- **Impact on volunteers and/ or volunteer support**

30 comments related to the impact of the proposal on volunteers, including a loss of volunteer support and coordination which could have a negative impact on volunteers and levels of volunteering.

- **Proposal is the right thing to do**

27 comments agreed that the proposal was the right thing to do under the circumstances and the Council needs to focus on statutory services. There were some suggestions that any available funding should be reviewed and reallocated.

- **VCS funding**

27 responses referred to the challenges of the VCS funding landscape and the importance of funding for the continuity and growth of the sector.

- **VCS fills gaps**

22 comments referred to the sector filling gaps in statutory provision as budgets and services are reduced or become more difficult to access.

- **Central Government**

19 responses indicated that the Council should lobby central government for a better funding settlement/additional funding to support the cost of discretionary grants.

- **Partnership working/ relationships**

17 comments included concerns that DCC would lose its relationship with the sector and other partnership initiatives would be impacted.

- **Cumulative impact of cuts**

10 responses expressed concern that the combined impact of this proposal and funding reductions in other areas including day care and residential care homes will be significant and that people will increasingly rely on the VCS to provide support.

- **Appreciation for Council's support**

8 organisations (several luncheon clubs) stated that they appreciated the grant support they had received from the Council and felt fortunate to have received it.

- **Covid response**

7 comments referenced the way the VCS collaborated with the Council to facilitate an emergency community response when the pandemic began. Organisations would not have the capacity to deliver the same level of support if needed in future if proposals were implemented.

Appendices

Appendix 1 Full list of organisations currently in receipt of a discretionary grant

Telephone and one to one Befriending Activity (ASCH)	Grant per annum (£)	Area
Age Concern (Chesterfield, NED, Bolsover)	10,741	Northeast Derbyshire Bolsover
Age UK Derby & Derbyshire (Erewash)	4,500	Erewash
Age UK Derby & Derbyshire (High Peak and Dales)	48,099	High Peak Derbyshire Dales
Amber Valley CVS	6,457	Amber Valley
Connex Community Support (High Peak and Dales)	3,000	High Peak Derbyshire Dales
Derbyshire Dales Careline	2,010	Derbyshire Dales
Erewash Voluntary Action CVS	3,000	Erewash
Erewash Voluntary Action CVS (extended service)	31,711	Erewash
New Mills Volunteer Centre (High Peak)	250	High Peak
South Derbyshire CVS	33,848	South Derbyshire
The Volunteer Centre (Chesterfield)	17,036	Chesterfield

Social Activity to prevent Isolation (ASCH)	Grant per annum (£)	Area
African Caribbean Community Association	20,282	Chesterfield
Age UK Information for Older People Roadshow	19,547	Amber Valley
Borrowbrook Homelink	2,800	Erewash
Mencap Swadlincote Gateway Club	2,675	South Derbyshire
The Bureau (Volunteer Centre Glossop)	21,936	High Peak
Connex Community Support	16,306	High Peak Derbyshire Dales
South Derbyshire CVS	7,406	South Derbyshire

BME Consultation and Community Support (CST)	Grant per annum (£)	Area
Asian Association	3,744	Countywide
Chesterfield African Caribbean Community Association	3,744	Countywide
Chesterfield Muslim Association	1,821	Countywide
Derbyshire Chinese Welfare Association	2,186	Countywide
Muslim Welfare Association	1,821	Countywide
Links CVS	13,224	Countywide

VCS Infrastructure (Joint funded ASCH and CST)	Grant per annum (£)		Area
	ASCH	CST	
Amber Valley CVS	32,518	15,378	Amber Valley
Bassetlaw CVS (Bolsover District)	7,110	34,390	Bolsover
Chesterfield Volunteer Centre	N/A	23,471	Chesterfield
Connex Community Support	27,236	N/A	High Peak
Derbyshire Dales CVS	21,515	15,378	Derbyshire Dales
Derbyshire Voluntary Action	18,166	5,305	Chesterfield
Erewash Voluntary Action CVS	57,095	15,378	Erewash
High Peak CVS	4,124	15,378	High Peak
Links CVS	N/A	36,058	Chesterfield
New Mills Volunteer Centre (High Peak)	21,513	N/A	High Peak
South Derbyshire CVS	36,884	15,378	South Derbyshire
The Bureau (Volunteer Centre Glossop)	19,175	N/A	High Peak
Rural Action Derbyshire	N/A	15,378	Countywide
BME Infrastructure (Links CVS)	N/A	15,400	Countywide

Luncheon Clubs (ASCH)	2023/24 grants total (£)	Area
54 small luncheon clubs across Derbyshire	6,557	Countywide

Bolsover Woodlands Enterprise (ASCH)	Grant per annum (£)	Area
Bolsover	188,310	Bolsover

Our Vision Our Future (ASCH)	Grant per annum (£)	Area
Chesterfield	30,375	Chesterfield

Appendix 2 Key stakeholders to the consultation

Who	Why
Current grant recipients	The proposal could impact on grant recipients and the service they deliver. • The need to understand the impact of ceasing discretionary grant funding.
The wider VCS	Do not currently receive funding from the Council but changes may affect the support they receive.
Derby and Derbyshire ICB/ICS Tameside & Glossop ICB/ICS	Partner agencies may: <ul style="list-style-type: none"> • Fund the current grant recipients. • Signpost to the current grant recipients • Rely on the current grant recipients to support their priorities • To understand the potential impact the proposal could have on partners.
District and Borough Councils in Derbyshire Police and Crime Commissioner	
Colleagues in the Council	
General Public	To understand what impact the proposal could have on residents.

Appendix 3 Members of the Derbyshire Befriending Network who responded formally to the consultation

- Brightlife
- Chesterfield and Northeast Derbyshire Volunteer Centre
- South Derbyshire CVS
- First Steps ED

Appendix 4 BME forum participants:

- Asian Association of Chesterfield and N Derbyshire
- Chesterfield Muslim Association
- African and Caribbean Community Association
- Chesterfield and NE Derbyshire Muslim Women's Group
- Chesterfield Filipino Community Association
- Chesterfield Senegambia Association
- Chesterfield and NE Derbyshire Chinese Elders Group
- Derbyshire Gypsy Liaison Group
- North Derbyshire Refugee Support Group
- Polonia Chesterfield
- Verba: Ukrainian Social Group of Chesterfield, Derbyshire
- Long Eaton Indian Association

Appendix 5 Formal responses received from County Council Partners,

The below County Council Partners sent formal responses to the council

- MP
- High Peak Borough Council
- Derby & Derbyshire ICB
- New Mills Town Council
- South Derbyshire District Council

Appendix 6 Formal responses received from VCS organisations listed

- Age UK Derby & Derbyshire
- Amber Valley CVS
- Connex
- Derbyshire Befriending Network
- Derbyshire Law Centre
- Glossopdale Foodbank
- Members of the Derby & Derbyshire ICB Dementia & Delirium Programme Partnership

Appendix 7 VCSE alliance partners who supported the formal response

VCSE alliance partners including:

- Input from colleagues across the Derby and Derbyshire Integrated Care Board (DDICB)
- Input from Local Place Alliances
- Input from the VCSE Alliance
- Results from the Derbyshire VCSE(F) (Voluntary Community Social Enterprise (Faith)) survey conducted in autumn/winter 2023/24, by NHS Derby and Derbyshire Integrated Care Board with support from Derbyshire County Council, aimed to assess the needs and support of voluntary and community groups.
- Evaluation of the VCSE sector Memorandum of Understanding (adopted by all ICS partners)

Appendix 8 List of VCS organisations who responded to the consultation questionnaire

Befriending/Luncheon Clubs

- Age Concern Chesterfield and District
- Age UK (7 responses)
- Ashover Lunch Club
- Asian over 60's Sinfin and Stenson Fields social & welfare club
- Baslow Senior Citizens Club
- Befriending (unspecified)
- Belper Fringe
- Belper Stroke Club
- Bolsover Woodland Enterprise
- Brassington Over 60s
- Buxton Tai Chi
- Chatterbox Café
- Churches together in Whaley Bridge luncheon club
- Crich Community Care Scheme
- District Musicians CIC
- Egginton Jubilee Club
- Elder Friends
- Fritchley Pensioners
- Futures Housing Group
- Glossop Arts Project
- Goldies
- Grassmoor Friendship Club
- Hayfield Pavilion Club R.V.S
- High Peak Access
- Holmgate Derby and Joan Club
- Holymoorside Rainbow Whist
- Horsley and Kilburn over 60s club
- Kings' Road area neighbourhood watch
- Little Eaton Senior Citizens Club
- Lullingworth Knit and natter
- P3 Charity
- Parklands Stroke Support Club
- Peak District Pilates Via Hartington Rural Community Group
- Ripley Old Age Pensioners Association
- Samaritans Buxton Branch
- Sawley Youth Club
- St Helen's Church Etwall
- St James Starter and Sweet club

- St Paul's Happy Circle
- Staveley Project
- Survive and Thrive
- Swadlincote Volunteering Service
- Swanwick Luncheon Club
- Tea, talk and tech
- The Greenhillocks Fellowship Club
- The Monday Club
- Unite Community
- Versus Arthritis
- Winster and Elton Luncheon Club
- Wirksworth Community Orchestra

Infrastructure organisations

- Amber Valley CVS
- Chesterfield Volunteer Centre
- Connex
- DVA
- Erewash Voluntary Action
- New Mills and District Volunteer Centre
- South Derbyshire CVS
- Glossop Volunteer Bureau
- Rural Action Derbyshire
- Bassetlaw CVS (Bolsover)

BME

- ACCA
- Chesterfield Muslim Association
- Derbyshire Gypsy Liaison Group
- Derbyshire Chinese Welfare Association
- Indian Community Association
- Asian Association of Chesterfield and NE Derbyshire

Specialist Advice

- Derbyshire Law Centre

Our Vision Our Future

Bolsover Woodland Enterprise

Appendix 9 List of County Council Partner organisations who responded to the consultation questionnaire

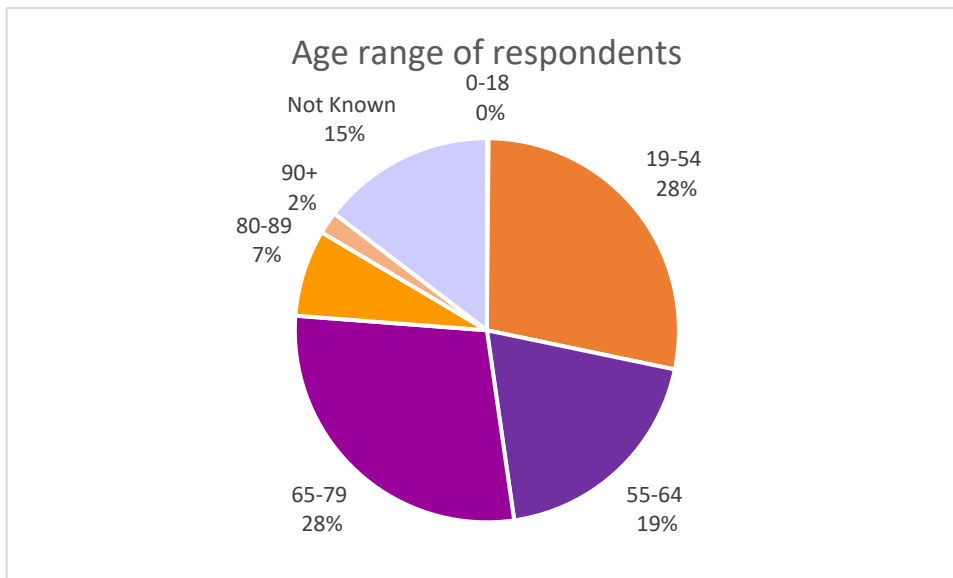
- Alzheimer's Society
- Chesterfield and Dronfield PCN
- Derbyshire Dales CVS
- Derbyshire Recovery and Peer Support
- Erewash Borough Council (2)
- Esteem Multi-Academy Trust
- Futures Housing Group
- Healthwatch Derbyshire
- Northeast Derbyshire District Council (2)
- NHS Northeast Derbyshire PCN
- Pharmacy Department Derbyshire Healthcare NHS Foundation Trust
- Royal Primary Care
- South Derbyshire District Council
- Tideswell Community Managed Library

Appendix 10 List of Formal responses received

- Derbyshire Dales CVS
- Derbyshire Recovery and Peer Support
- Futures Housing Group
- Healthwatch Derbyshire
- NHS Northeast Derbyshire PCN
- South Derbyshire District Council
- High Peak Borough Council
- Tideswell Community Managed Library
- South Derbyshire CVS
- Amber Valley CVS
- Age UK Derby & Derbyshire
- Derbyshire Law Centre
- Buxton befriending Connex
- Links CVS/BME forum
- Age Concern
- Derbyshire Befriending Network
- DDiA
- VCSE Alliance
- NHS Derby and Derbyshire ICB
- DVA
- Connex

CONTROLLED

Appendix 11 – Equality and diversity data from consultation questionnaire



Area	No. of responses received
Amber Valley	97
Bolsover	42
Chesterfield	180
Derbyshire Dales	198
Erewash	109
High Peak	326
Northeast Derbyshire	76
Not stated	135
Out of Area	78
South Derbyshire	133
Grand Total	1374

Ethnicity	No. of responses
	102
Asian or Asian British	22
Black, Black British Caribbean or African	26
Mixed or Multiple ethnic groups	20
Another ethnic group	65
Other White background	25
White English, Welsh, Scottish, Northern Irish or British	1114
Grand Total	1374

Option	No. of people who considered themselves to have a physical or mental disability
Not selected	129
No	886
Yes	359
Grand Total	1374

CONTROLLED