



**Armagh City, Banbridge and Craigavon Borough
Community and Voluntary Sector Panel
Meeting Notes**

DATE: Monday 18th June 2018 **TIME:** 6 pm, **VENUE:** Lakeview 2, Craigavon Civic Centre

Community and Voluntary Panel Attendees: – Youth Sport Trust – Amanda Mogey, Ulster GAA – Anne Garvey, Friends of Vietnamese Craigavon – Annie Burrell, TADA Rural Support Network – Brendan McCann, Craigavon Area Food Bank – Chris Leech, LLTCA – Claire Patience, ABC Senior’s Network – David Hammerton, County Armagh Community Development – David McMullen, Volunteer Now – Eamon Murphy, P2000 – Geraldine Lawless, Brownstown Owners & Tenants Association (BOATA) – Gordon Blevins, Richmount Rural Community Association – Joe Garvey, City of Armagh Rugby Football Club – Ken Redpath, Waringstown Together – Lenny Deans, Mencap – Liam Burns, Clanrye Group – Liam Devine, Reconciliation, Education & Community Training (REACT) – Marion Jamison, North Lurgan Community Association – Michael Tallon, IncredABLE – Nigel Hampton, Meadowbank Residents Association – Pete Toland, Armagh Travellers Support Group – Peter Wilkinson, Lislea Community Association – Sheila McCreech, The Right Key/Recovery Café CIC – Sheila Smyth, NIACRO – Sheila Wells, Supporting Communities – Siobhan O’Neill, West Armagh Consortium – Stephen Fields, Obins Street Community Association – Vincent McAleenan

Others in attendance– Armagh City Banbridge and Craigavon Borough Council – Jennie, Dunlop, Michelle Markey, Prospect Awards – Anna Clark

Apologies: – ABC Community Network – John McGuinness, Brownlow Ltd – Brendan Curran, Barnardo’s NI – Eugene Mone, Craigavon & Banbridge Volunteer Bureau – Donna Stewart, Regenerate – Keith McCann, Donacloney Community Garden – Walter Ferris, Powered by Sport – Stephen Lynch, NIACRO – Rachel Long, Mourneview & Grey Estates Community Association - Jonathan Mercer

1. Welcome and Introductions

Jennie Dunlop, Community and Strategic Planning Manager, Armagh City, Banbridge and Craigavon Borough Council welcomed everyone to the second meeting of the Community and Voluntary Sector Panel. Jennie went on to introduce the facilitator Anna Clarke, who would be facilitating the meeting.

Jennie provided a recap of the first meeting where panel members:

- Heard more on community planning in the borough
- Got to know each other

- Developed a shared Terms of Reference and Code of Conduct
- Put themselves forward for membership of the thematic action planning teams and the working groups
- Made recommendations to the Community Planning Strategic Partnership

Jennie provided an update on the recommendations brought to the Community Planning Strategic Partnership 10th May 2018:

- **Recommendation that the chair of each Thematic Action Planning Team to consider the nominations from the CVS Panel rather than limiting to 2 panel reps per team.**
Jennie advised that Partnership agreed that the Chair of each TAP team will consider the nominations from the CVS Panel, and that the Chair of the Healthy Community and the Chair of the Confident and Welcoming TAP team had welcomed this decision and all CVS panel members who had nominated themselves at the last meeting where now members of those teams and have been in attendance at the workshops to date.
- **Recommendation for a second call for Expression of Interests for the CVS Panel to promote participation across the Borough and across Section 75 groups.**
Approval was given for a second call for Expressions of Interest for the CVS Panel to promote participation across the Borough and across Section 75 groups. The second call closed on Monday 11th June 2018 with 12 new members joining the CVS panel.

The evening commenced with a round of introductions were panel members were given the opportunity to say who they were are and what organisation they were from.

2. Community Planning Update

For the purpose of the new panel members and those who were unable to attend the first meeting of the Community and Voluntary Sector Panel in May, Jennie gave some background information elaborating briefly on the following points:

- **Introduction to Community Planning**
Community Planning is about improving the wellbeing of the Borough and the quality of life for people through local services that are joined up, responsive and take an evidence based approach. The Community Plan for our borough is entitled “Connected” and sets out the long-term vision for the borough over a 13-year period up to 2030. Community Planning takes a partnership approach. There are thirteen statutory partners named in the legislation with specific duties around community planning but to achieve the aspirations in the plan statutory, private and community sectors need to work together.¹
- **Community Planning Governance Overview**
The formal governance structure is two tiered, with a Community Planning Strategic Partnership (CPSP), which has strategic oversight of the process, and six Thematic Action Planning (TAP) Teams reporting into the partnership. The TAP Teams will develop and deliver on agreed actions and will report into the CPSP through the

¹ The Housing Executive, Invest NI, PSNI, Public Health Agency, Education Authority, NIFRS, Health and Social Care Board, Tourism NI, Southern Health and Social Care Trust, CCMS, Sport NI and Armagh City, Banbridge & Craigavon Borough Council. The Local Government (Community Planning Partners) Order (Northern Ireland) 2016

Chairs from each Team. This group (the Community and Voluntary Sector Panel) has been established to involve the sector in community planning.

- **Approach to Community Planning**

The approach to Community Planning in this area follows three overlapping principles around *Partnership Working*, *Engaging Communities* and *Using Evidence*.

3. Confirm Terms of Reference and adopt Code of Conduct

Terms of Reference (circulated prior to meeting)

Anna took panel members through the Terms of Reference elaborating briefly on the following points:

Role and Purpose of the Panel

- Ensure the Community, Voluntary and Social Enterprise Sector is represented
- Promote ongoing Community Engagement
- Articulate the voice of the Community and Voluntary sector
- Support the development of Cross-sectoral Relationships and improved Partnership working

Summary of roles and Responsibilities of CVS Panel Members

- Full participation
- Work as a team to identify, develop and agree action and ensure delivery against outcomes
- Carry out allocated tasks as agreed at meetings
- Engage with other CVS groups and with communities within the borough.
- Ensure effective and meaningful public participation
- Promote inclusion of hard to reach/seldom heard groups
- Collect relevant data for performance management
- Foster collaborative working relationships across the borough

Decision: All panel members were in agreement that the Terms of Reference for the Community and Voluntary Sector Panel is adopted.

Code of Conduct (circulated prior to meeting)

Anna took members through the Code of Conduct:

- Selflessness
- Integrity
- Objectivity
- Openness and Accountability
- Honesty
- Leadership
- Participation and Partnership

Decision: All panel members were in agreement that the Code of Conduct reflected discussions at the first meeting and that these were adopted and signed by all members of the Community and Voluntary Sector Panel.

Community and Voluntary Sector Panel Members were invited to sign the Code of Conduct.

4. Informing Action Plans

Jennie presented some background information on the Confident and Welcoming Community and Healthy Community action plans to inform the panel to enable them to provide feedback and input into them elaborating briefly on the following points:

- **Community Planning Governance**

Membership of Thematic Action Planning (TAP) teams:

- chaired by a statutory partner
- a council lead
- CVS panel representatives
- Elected members
- Statutory partners and other stakeholders

- **Outcomes Based Approach**

The community plan takes an outcomes based approach which means starting off with what we would like to achieve (which are the vision and outcomes in the community plan), and working back to determine what we need to do to get there.

- **Types of Evidence used to inform action plans**

- Primary Research
- Secondary Research
- Professional and practice experience
- Service User's view and opinions
- Personal experiences & anecdotes
- Expert knowledge

Michelle Markey, Community Planning Officer, provided an overview of the key indicator data for *Confident Community, Healthy Community and Welcoming Community*.

1. Confident Community

Long-term outcome: Everyone has opportunities to engage in community life and shape decisions - we have a strong sense of community belonging and take pride in our area.

Two **indicators** are being used to monitor progress towards this outcome, the latest figures for the borough are:

- **90%** of adults feel a sense of belonging to their neighbourhood
- **32%** of adults feel they have an influence when it comes to any of the local decisions made in their neighbourhood.

2. Healthy Community

Long-term outcome: People are making positive lifestyle choices. They are more resilient and better equipped to cope with life's challenges.

Three **indicators** are being used to monitor progress towards this outcome latest figures for the borough are:

- Gap in life expectancy between most deprived areas and the borough overall – **males in the most deprived areas expect to live 3.1 years less than the borough average, female 1.4 years less.**
- **190** preventable deaths per 100,000 populationⁱ

- **47%** of adults participated in sport or physical activity on at least one day a week.

3. Welcoming Community

Long-term outcome: Our borough is a safe, respectful and peaceful environment.

Three **indicators** are being used to monitor progress towards the welcoming community long-term outcome for the borough:

- **71%** of people report that fear of crime has a minimal impact on their quality of life.
- **71%** of people see town centres as safe and welcoming places for people of all walks of life.
- **90** accidental dwelling fires.

Panel members were asked to split into 3 tables, and each group considered one of the outcomes. Attendees were given copies of the key statistics in order to inform their discussions. Groups discussed the following:

1. What are the top 3 strengths in your community that will help to deliver a healthy community?
2. What are the issues or needs to address to deliver a healthy community?
3. What is working well to support the community? And what could be working better?
4. What does your community want to do for itself - and what is needed to support it?
5. Which organisations and or services should work together more and why?
6. Further comments

This feedback will help inform the Healthy Community and the Confident and Welcoming Action Plans.

5. Nominations

Jennie gave an explanation of the governance structure for Community Planning for the borough and the importance of the sector being involved. She explained that Action Planning for the Confident and Welcoming Community and the Healthy Community had commenced week beginning 14th May with community and voluntary sector representation from the panel attending these workshops.

She explained there was an opportunity for new panel members to nominate themselves to sit on the thematic action planning teams based on their areas of interest. Existing panel members were also given the chance to review their original selection.

Anna invited panel members to add their name to the following parts of the governance structure:

- Nominations for Thematic Action Planning Teams
- Nominations for Engagement and Communications Working Group

Discussions took place on whether the two representatives on the Community Planning Strategic Partnership should also be the Chair/Vice Chair of Community and Voluntary Sector Panel. Members expressed views on both sides for it to be the same people and an equally strong argument for the roles to be separate.

Decision: After a show of hands, the majority agreed that the four positions of Chair, Vice-Chair and the two representatives on the CPSP would be selected separately. However, one person would be able to hold more than one post.

Anna explained that the following positions would be through an expression of interest:

- Chair of the Community and Voluntary Sector Panel
- Vice-Chair of the Community and Voluntary Sector Panel
- Two Community and Voluntary Sector Panel representative on the Community Planning Strategic Partnership.

The position of the Community Planning Strategic Partnership can be held by the Chair/Vice-Chair of the Community and Voluntary Sector Panel.

The process for expression of interest is outlined below:

1. Completed Expressions of Interest should be submitted by **Monday 16th July 2018, 12 noon**, by email to communityplanning@armaghbanbridgecraigavon.gov.uk or returned in a sealed envelope to the Council Offices at Civic Building, Downshire Road, Banbridge marked 'Community and Voluntary Sector Panel'.
2. If more than 1 form for each position is received, there will be an electronic voting process to select for all positions.
3. Community and Voluntary Sector Panel members will be provided with your Name, Group, and personal statement. Members will then be asked to vote. This will close on **Friday 3rd August 2018 at 9am**.
4. Community and Voluntary Sector Panel members will be notified of the outcome.

6. Next steps

Action: Community planning team would be in touch regarding the Expression of Interest for the positions of:

- Chair of the Community and Voluntary Sector Panel
- Vice-Chair of the Community and Voluntary Sector Panel
- Community and Voluntary Sector Panel representative on the Community Planning Strategic Partnership.

Action: A doodle poll for the next meeting the end of August will be circulated.

7. Close

Anna closed the meeting by thanking everyone for their support and active participation in the meeting and advised community planning team would be in touch regarding the next steps.

Using the Office for National Statistics (ONS) definition - a death is preventable if, in the light of understanding of the determinants of health at the time of death, all or most deaths from that cause (subject to age limits if appropriate) could be avoided by public health interventions in the broadest sense.