

Risks to the Bassetlaw VCSE Sector & the communities they serve

January 2025

BCVS Summary Statement

Nottingham and Nottinghamshire ICB (NNICB) is currently considering whether **to disinvest from the VCSE sector in Bassetlaw** (remove all funding) for 25/26. Simultaneously there is a continued reliance on the VCSE sector for service delivery and prevention work essential to the health and wellbeing of Bassetlaw communities.

3000 of the most vulnerable citizens currently receive direct support from 9 NNICB VCSE funded organisations in Bassetlaw per year, with a further 10,000 people receiving indirect support as a result of this investment. The threat posed to local residents by disinvestment, coupled with the significant potential impact on primary and secondary care in Bassetlaw, remains alarmingly high.

It should be noted that the VCSE grant investment levels are significantly lower per Bassetlaw head of population **at 21% of the level for England and 46%** of the amount per head of population in Nottinghamshire. (360 Giving, September 2024).

Within Nottingham and Nottinghamshire, as seen across the country, for all income, more funding per general charity is awarded to cities on average. **In Nottingham general charities received £560 on average per head of population compared to Bassetlaw general charities which received £203 per head.** (NCVO Almanac, 2023). ('General charities' excludes public sector registered charities such as universities.)

In addition, investment from public sector sources has reduced. We have seen for example a **50% reduction in Bassetlaw VCSE funding** from NNICB since Bassetlaw moved from South Yorkshire footprint into the Nottinghamshire footprint in July 2022.

In the same period, BCVS member organisations have reported significant growth in need and demand on VCSE organisations across Bassetlaw. Causes include commissioned and statutory services shrinking or closing and cost of living pressures increasing. Front line organisations have reported huge increases with one Bassetlaw organisation working at the heart of Core 20 communities reporting a **400% increase** in referrals in 24/25. All BCVS member organisations report a significant increase in the complexity and scale of issues presented and time needed to support each referral.

Research conducted by BCVS in 2024 found that 40% of Bassetlaw VCSE groups across the sector were utilising reserves to offset deficits in 24/25. This mirrors national NCVO Almanac data 2023 and VCSE Barometer Data 2024. VCSE leaders of NNICB funded services in Bassetlaw have confirmed that this is not sustainable in 25/26. VCSE leaders in the January NNICB VCSE Alliance meeting noted that risks of VCSE sector decimation in 25/26 should not be underestimated.

The risks and issues facing the VCSE sector and Bassetlaw population have been escalated by BCVS at all key system and place meetings every quarter throughout 24/25 including the VCSE Alliance, the Health and Wellbeing Board, The Bassetlaw Health Inequalities Forum, The Place Leaders Board, Bassetlaw Voices, The Frailty Programme Board and NNICB VCSE Alliance.

Public sector partners across Bassetlaw from the NHS and local authority continue to be **strong supporters of the VCSE sector**. Public sector partners in Bassetlaw recognise the essential contribution we make to both the wellbeing of the Bassetlaw population through

Risks to the Bassetlaw VCSE Sector & the communities they serve January 2025

prevention work and through the crisis support provided by over 100 Bassetlaw VCSE organisations involved in crisis support.

Above **undermines NNICB principles of Prevention, Integration and Equity** and further runs in opposition to all key health policy and reviews including the Darzi Review, the NHS Long Term Plan, the NNICB Joint Forward Plan, the Nottinghamshire Health and Wellbeing Strategy and the Bassetlaw Place Plan.

As of January 13th 2025, **there has been no decision** confirmed by NNICB regarding investment in the Bassetlaw VCSE sector nor in the services currently resourced by NNICB for 25/26. Therefore, the risks to workforce through the loss of experienced teams are now becoming an issue as staff understandably seek more secure roles. At the January 2025 NNICB VCSE Alliance meeting, it was noted that some of the related risks to the sector, **but not the related risks to the communities we serve**, have been recorded on the NNICB risk register.

BCVS understands that **preparation for a public campaign and challenge to these risks is now underway**. Given the significant reliance on the VCSE sector for essential services, and the high risks to local residents of disinvestment in Bassetlaw, it is crucial for NNICB to make an informed decision for 25/26 to ensure the continued support and wellbeing of Bassetlaw residents and communities. BCVS is therefore publishing this summary statement and extended paper to support a fully informed decision.

Risks to the Bassetlaw VCSE Sector & the communities they serve

January 2025

National, Regional and Bassetlaw Place Context

1. Funding:

VCSE grant investment levels are significantly lower per Bassetlaw head of population at **21% of the level for England and 46%** of the amount per head of population in Nottinghamshire. (Source 360 Giving, September 2024).

Indicator	Bassetlaw	Nottingham shire	England
Total amount awarded from major grant funders per head (Jul-2024)	£686.71	£1,488.54	£3,099.32

Source: 360 Giving September 2024

Within Nottingham and Nottinghamshire, as seen across the country, more funding per population head and charity on average is awarded to cities:

	Population 2021 Census	No. of general charities in 2023	General charity income 2023	Number of charities per population head	Average income per charity	Average income per population head
Nottingham	323,700	537	£181,390,000	0.0017	£337,784	£560.36
Bassetlaw	117,800	219	£23,970,000	0.0019	£109,452	£203.48

Source NCVO Almanac November 2023

The VCSE sector has been funded as a valued place partner for many years in Bassetlaw. Since July 2022 when Bassetlaw joined NNICB, NHS financial investment in the Bassetlaw VCSE sector has been reduced by 50% to the value in 24/25.

Following emergency meetings in February 2024, leaders across the Bassetlaw VCSE sector supported continuity following cuts in funding through use of reserves in 24/25. It was confirmed at that point. and has been confirmed again in Q4 24//25, that use of reserves is finite and not sustainable in 25/26.

If disinvestment is supported by NNICB the community funded services will not exist in 25/26, thus creating additional pressure on primary and secondary care, destroying national and award-winning examples of good practice, and undermining the further development of established integrated neighbourhood working across place.

Any proposal to disinvest from these services is not in line with national guidance and the focus of policy on the importance of prevention, place and patient centred personalised care as outlined in the Hewitt Review, The Darzi Report and the NNICB Joint Forward Plan.

As stated [by Lord Darzi](#) 'While the NHS strategy is to shift resources to the community, the data demonstrates a trend indicating the opposite.'

Risks to the Bassetlaw VCSE Sector & the communities they serve January 2025

2. Partnership working:

Bassetlaw Place Based Partnership is an active and cross sector partnership of equals where diverse voices and organisations are heard and valued. The Voluntary and Community sector works side by side with NHS and district council colleagues by default and by design to maximise the impact of our work for the benefit of local communities.

The very strong partnership ecosystem in Bassetlaw is supported through active participation in weekly provider collaborative meetings, VCSE leaders meetings, The Health Inequalities Forum, The Financial Inclusion Forum, Bassetlaw Placed Based Partnership, and many more key fora which contribute to insight and effective working at place. We work together in Bassetlaw and across the system to identify and escalate issues and risks and develop joint responses where needed.

This has resulted in numerous high impact partnership initiatives focusing on the wider determinants of health, the building blocks of health and in response to local need and issues. In the last 12 months this includes a collaborative place particularly in response to , Food Insecurity, Cost of Living support, Social Prescribing, development of pride in place work in addition to joint workforce development.

Following a visit by the Chair of NNICB to Bassetlaw in June 2024, Dr Kathy McLean said: "It was great to see a seamless service which has been developed entirely with the needs of its local population in mind, only possible thanks to hard work, trust and co-operation across the system. It's a wonderful example of patient-centered integrated care, which I see as a potential blueprint for future ways of working in other parts of Nottingham and Nottinghamshire."

[Bassetlaw model could be "blueprint for future ways of working" - NHS Nottingham and Nottinghamshire ICS - NHS Nottingham and Nottinghamshire ICS](#)

Data on impact is shared on a quarterly basis with place and system. Reports and films illustrating the work and impact of these contracts have been shared widely including 'Equity in Everything' a 5 minute film produced as part of Bassetlaw Voices that has been recognised nationally as illustrating best practice: [Equity In Everything #WorkingTogether Manton, Bassetlaw](#)

Risks to the Bassetlaw VCSE Sector & the communities they serve January 2025

3. Policy and research

The NHS long term plan, The ICB Strategy and Bassetlaw Place Plan rely on the existence of a robust VCSE sector for delivery of local services and prevention work.

Social prescribing forms part of the Comprehensive Model for Personalised Care which has been co-produced with people with lived experience and a wide range of stakeholders and brings together six evidence-based and inter-linked components, each of which is defined by a standard, replicable delivery model. The components are: 1. Shared decision making 2. Personalised care and support planning 3. Enabling choice, including legal rights to choice 4. **Social prescribing and community-based support** 5. **Supported self-management** 6. Personal health budgets and integrated personal budgets.

Removal of social prescribing from Doncaster and Bassetlaw Teaching Hospital with impact negatively in the ways outlined above whilst also destroying a national model of good practice recognised by NASP.

As one of the keynote speakers at the BCVS Annual Event 2024 '[Growing Together](#)', supported through Voices work, [Professor Clifford Stevenson](#) presented on research which demonstrates the power of local community working and the evidenced and positive difference it makes to residents experiencing loneliness of joining just one community group <https://www.bcv.org.uk/sites/default/files/2024-12/Inspiring%20Neighbourhoods.pdf> - a healthy accessible VCSE sector is critical if we are to prevent further loneliness and frailty in our communities.

Bassetlaw VCSE organisations have reported massive increase in demand and need as other services close and local people exhaust financial and non-financial support networks. This modelling was presented to colleagues in July 2024 at the Cost of Living Summit held at Bassetlaw District Council Town Hall.

'The VCSE sector is uniquely positioned to understand and address the needs of vulnerable and marginalised groups, such as those experiencing homelessness, poverty, or mental health challenges. The VCSE sector's ability to provide services that are culturally sensitive, person-centred, and community-driven is seen as vital in bridging the gaps that often exist within statutory services.' NAVCA, 2024

Risks to the Bassetlaw VCSE Sector & the communities they serve

January 2025

4. Population:

The overall proportion of people aged 65+ in Bassetlaw is 22.14%. This is higher than the proportion of people aged 65+ in Nottinghamshire (21.24%) and higher than the proportion of those aged 65+ in England (18.41%).

In Bassetlaw the proportion of the population who are aged 65+ has increased since 2001, changing from 16.3% to 22.14%. This is higher than the proportion in Nottinghamshire (21.01%) and higher than the proportion in England (18.50%) in 2020.

2,583 people in Bassetlaw are in receipt of Pension Credit. Of these, 1,733 are female and 851 are male. The proportion of those aged 65+ receiving Pension Credit in Bassetlaw (9.66%) is higher than the proportion of claimants in Nottinghamshire (8.63%) and lower than the proportion of claimants in England (10.85%).

In Bassetlaw, a higher proportion of Pension Credit claimants are single (8.32%) compared to those who have a partner (1.34%).

Additionally, 11,886 pensioners in Bassetlaw have bad or very bad health (45.57%). This proportion is higher than the proportion in Nottinghamshire (44.44%) and higher than the proportion in England (42.08%).

In Bassetlaw, the proportion of migrants was 8.82%. This is similar to the proportion in Nottinghamshire with 8.85% and less than the proportion in England with 10.50%. (Census 2021)

In Bassetlaw, the average annual household income in the 90th percentile is £46,814, which is lower than Nottinghamshire (£48,634) and lower than England (£52,216).

In Bassetlaw, the proportion of people disabled under the Equality Act with their day-to-day activities limited a lot is 9.11%. This is higher than the proportion in Nottinghamshire (8.52%) and higher than the proportion in England (7.33%). (ONS)

5. Other Area Information

The rurality of Bassetlaw creates additional barriers for citizens to service access and activities to support wellbeing such as access to green space:

On average, 14.61% of households in Bassetlaw have access to Green Space. This is lower than Nottinghamshire where (18.41%) of households have Green Space access, and lower than England where (23.04%) of households have Green Space access. (ONS)

In Bassetlaw, the average travel time to the nearest GP is 17.0 minutes. This is longer than the travel time in Nottinghamshire (14.0 minutes) and longer than England (13.0 minutes). (Department for Transport)

The average road distance to a GP surgery in Bassetlaw is 2.130 km. This is longer than the average distance in Nottinghamshire (1.535 km) and longer than the average distance in England (1.304 km).

The average road distance to a general store or supermarket in Bassetlaw is 1.226 km. This is longer than the average distance in Nottinghamshire (0.807 km) and longer than the average distance in England (0.711 km).

Risks to the Bassetlaw VCSE Sector & the communities they serve January 2025

6. Risk

a. To Patients:

3000 of the most vulnerable citizens currently receive direct support from 9 NNICB VCSE funded organisations in Bassetlaw per year, with a further 10,000 people receiving indirect support as a result of this investment. The threat posed to local residents by disinvestment, coupled with the significant potential impact on primary and secondary care in Bassetlaw, remains alarmingly high.

The risks to patient safety and the ability of the VCSE sector to provide the non-clinical support essential for the NHS to meet its own targets have been escalated each quarter throughout 24/25, documented in all BPBP board meetings in 24/25. At the January 2025 NNICB VCSE Alliance meeting, it was noted that some of the related risks to the sector, **but not the related risks to the communities we serve**, have been recorded on the NNICB risk register.

Community cohesion, social inclusion and personalised care is at the heart of services currently funded and would all be impacted by disinvestment.

The majority of beneficiaries from these services are residents of Core 20 areas with protected characteristics. It is widely evidenced that communities from Core 20 areas experience the biggest health inequalities and have the lowest number of community assets and more limited opportunities. It is these communities that will be most significantly impacted by any disinvestment in local VCSE services.

b. To the VCSE sector:

Research conducted by BCVS in 2024 found that 40% of Bassetlaw VCSE groups across the sector were utilising reserves to offset deficits in 24/25. This mirrors national NCVO Almanac data 2023 and VCSE Barometer Data 2024.

The majority of VCSE organisations with paid staff in Bassetlaw have already restructured and reduced paid staffing to streamline costs. Further cuts will make many VCSE organisations and services unviable.

VCSE leaders of NNICB funded services in Bassetlaw confirmed that use of reserves is not sustainable in 25/26. This has already impacted on capacity to provide support for local communities and VCSE leaders in the January NNICB VCSE Alliance meeting noted that risks of VCSE sector decimation in 25/26 should not be underestimated.

c. To 'One workforce':

Loss of workforce, experienced teams and capacity due to the very late notification of funding decisions for 25/26, when still not confirmed with the VCSE sector grant recipients as at January 2025, is undermining service continuity and patient safety in Bassetlaw.

TUPE may apply to staff employed by Bassetlaw VCSE organisations and advice will be sought in the event of disinvestment.

Risks to the Bassetlaw VCSE Sector & the communities they serve

January 2025

d. Public Relations:

BCVS understands that **preparation for a public campaign and challenge to these risks is now underway.**

Negative PR may follow the FOI requests that have been planned by the VCSE sector in the event of further disinvestment in Bassetlaw.

e. To Primary and Secondary care:

VCSE service provision enables prevention and reduction of winter pressures and all year-round pressures on primary and secondary care and removal of this support for 3000 of Bassetlaw's most vulnerable citizens will release the floodgates creating increased presentation and widening health inequity and impact on the NHS workforce workload.

The NNICB VCSE funded services directly support the most vulnerable patients in Bassetlaw both at times of crisis and by working to connect them with non-clinical support to reduce presentation, increase wellbeing and support prevention.

Next steps

BCVS has been working hard to support our members to diversify funding to support growing need in our communities created by increasing cost of living pressures. This support includes investment in a new AI platform 'Plinth' to ['Power Digital Transformation'](#), provide robust data capability, dynamic directories and a range of support functions for our members as showcased at our annual event 'Growing Together' in November 2024.

In addition, and following discussion with members, we have [today launched EMVA](#), East Midlands VCSE Alliance, to support our members to work together to access our fair share of national funding. This will not however address the short-term additional risks to our communities, primary and secondary care and the stability of the VCSE sector created by any further NNICB disinvestment in April 2025.

Place partners remain fully supportive of the work of the VCSE sector in recognition of the impact of working together. We will continue to work side by side with NHS and district council colleagues by default and by design to maximise the impact of our work for the benefit of local communities.

Given the significant reliance on the VCSE sector for essential services, and the high risks to local residents of disinvestment in Bassetlaw, it is crucial for NNICB to make an informed decision for 25/26 to ensure the continued support and wellbeing of Bassetlaw residents and communities. We therefore hope this paper will provide additional and useful insight to support a fully informed decision.