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Health and Wellbeing Board

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The role of the Voluntary Community and Social Enterprise (VCSE) Sector in supporting delivery of the Health and Wellbeing Strategy and wider agenda

Report of Northumberland VCS Assembly

For Information / Discussion

1. Introduction

1.1 This paper identifies the opportunities and challenges facing the voluntary, community and social enterprise sector (VCSE) in working with the statutory sector and other partners / stakeholders to deliver the Health and Wellbeing Strategy and the Health and Wellbeing agenda more widely. The first part of the paper provides background information about the VCSE and the contribution it makes to communities in Northumberland.

The Health and Wellbeing Board has adopted an asset based approach to delivering its strategy. This identifies the need for a vibrant, resilient and dependable VCSE which can work jointly with the statutory sector to improve the health and wellbeing of people across the county.

1.2 NHS England recognise that the VCSE sector is an important partner for statutory health and social care agencies and plays a key role in improving health, wellbeing and care outcomes. Recent legislation and strategy documents e.g. Next Steps of the Five Year Forward Plan and NHS Long Term Plan have recognised this and promoted the role of VCSE organisations in improving outcomes and consider their input is essential to a vibrant local health economy. (NHS England –Partnerships and Relationships). The House of Lords Select committee on rural strategy pointed to the particular need for this in rural areas. "For a national strategy and its underlying policies to be effective, it is crucial that they are delivered locally using a place-based approach. This must include effective partnership working from all relevant public, private and voluntary bodies, driven by the nature of each local area and with active community participation, breaking down the silos that too often characterise rural policy ".

2. Voluntary, Community and Social Enterprise Sector Overview

2.1 The VCSE sector refers to organisations whose primary purpose is to create social impact rather than profit. It is often called the third sector, civil society or the not-for-profit sector.

Whilst registered charities and companies limited by guarantee are common structures within the VCSE sector, it also includes a wide range of legal entities such as: Community Interest Companies, Associations or Industrial and Provident Societies and volunteer led organisations such as sports clubs and community groups which may not have a legal structure.

2.2 There are nearly 200,000 charities in the UK. Most are small: over 80% have an annual income of less than £100,000, and almost half have income of less than £10,000. Charities of this size tend to be local organisations for example a stroke support group and many do not have any paid staff.

The sector employs 880,000 people and the total income of all charities combined is around £48 billion, higher than the UK Higher Education sector. The voluntary sector contributes approximately £15.3bn to UK GVA Gross Value Added i.e. the value of goods and services produced, more than the arts or agriculture sectors. (Facts and Figures: UK Charity Sector 2018, nfpSynergy)

2.3 The sector has recognised the impact of high profile examples of inadequate governance, aggressive fundraising practices and failures to meet ethical standards. Over the past three years there has been a clear downward trend in charitable giving which is symptomatic of a decline in trustworthiness and illustrates concerns that people have that their donations are not being well spent. However public trust is higher in local charities and organisations

3. VCSE in Northumberland – the local picture

3.1 There are 1020 charities in Northumberland and 1421 charities that include the geographical area of Northumberland in their coverage (Charity Commission 2018)

In addition to this the Northern Rock Foundation, Third Sector Trends Survey 2010 by the National Council for Voluntary Organisations (NCVO) and University of Southampton found that across 46 local authority areas there were an additional 3.66 "below the radar organisations" per 1000 population. Using this calculation would suggest an additional 1000+ plus VCSE organisations serving communities in Northumberland. Locality Coordinators employed by public health but sited in voluntary organisations have been mapping the provision of VCSE services provided across the county to better understand the range and gaps in provision.

- 3.2 The following list indicates the annual income of Northumberland charities:
 - 64% have an income up to £25,000
 - 25% have an income of between £25,000 £100,000
 - 8% have an income of between £100,000 £500,000 and

• 3% have an income over £500,000.

The majority of charities in the county are therefore small/micro (income less than £100,000).

Whilst there is no set amount for how much an individual organisation should hold in reserves, this is tailored depending on circumstances. The most prominent UK charities hold on average four months' expenditure in reserve. (Third Sector April 2018). A good reserves policy demonstrates sound financial planning and sustainability, but it is worth noting that there has been a fall in reserve levels partly due to investment of reserves in service provision to make up for cuts in public funding. The Third Sector Trends Survey 2016 based on 186 respondents from Northumberland identified that 16 % of organisations in Northumberland had no reserves which had fallen from 20% (193 respondents) in 2014. 34% had not used their reserves whilst 17% had used reserves for development, 21% for essential costs and 8% for a mix of purposes.

- 3.3 The VCSE sector provides a wide range of services which are driven by the needs of communities, working with for example:
 - Children, young people and families
 - Older people
 - Disabled people and those with enduring health conditions
 - Homeless people
 - Refugees and asylum seekers

Charities are often places of community, bringing people together and with a reach and flexibility that extends beyond that of statutory agencies, which can be harnessed through greater collaboration and partnership working to cascade messages on health and wellbeing issues and much more. Whether volunteer led or with paid staff, VCSE organisations help to shape a sense of place, contribute to the economy of Northumberland in terms of jobs and enterprising activity and make a major contribution to the quality of our cultural life e.g. Queen's Hall Arts, Museums Northumberland, U3A.

The sector prioritise those who are most disadvantaged and are often at the cutting edge of social change such as those affected by the roll out of Universal Credit. It develops the skills and confidence of volunteers and service users and supports learning, increasing their wellbeing and helping them find work e.g. job clubs. Volunteering provides value both for those receiving the help and in terms of improved mental health for the volunteers themselves. It is cost efficient and can be innovative in its approach supporting public services to respond to community needs

The rise in the number of food banks is also a powerful indicator of communities responding to need as is a local organisation providing second hand school uniforms and free haircuts to families who cannot afford them i.e. Stobhill Link.

- 3.4 The State of the Sector 2018 workshops carried out by Northumberland VCS Assembly confirmed that many VCS organisations face challenges in securing funding and future sustainability at a time when there is considerable and increased demand for their services. Funding and sustainability were the top challenges identified by the 47 organisations participating in the workshops. These issues are consistent with those faced by other VCSE organisations across the country. The participants did however recognise the importance in these circumstances of working collaboratively across sectors avoiding duplication and competition in meeting needs of local people and communities.
- 3.5 The value and effectiveness of the VCSE is in its independence, its focus on needs identified, and having the experience and expertise to respond flexibly. It also has the freedom to act as a catalyst for change where the state is more constrained. However where organisations are chasing funding opportunities, there is also the danger that this can constrain flexibility and the ability to react to changing needs as well as lead to mission drift as organisations end up chasing what contracts are available which may not match their skill set. Grants that provide some flexibility to react to changing circumstances are therefore preferable.
- 3.6 It is recognised that the VCSE sector in Northumberland is made up of a wide range of organisations and that engagement, collaboration and partnership can be challenging across such a large county. Northumberland County Council responded to this by setting up the contract to support the development of the Northumberland VCS Assembly. This provides cost effective and sustainable engagement with the sector, providing a credible consultation mechanism, a promotion and influencing role and a conduit for talking to and establishing co-working with the sector.

The Assembly has over 340 members and the Assembly Executive Committee is a democratically elected body providing leadership, accountability and is responsible for progressing the general development and direction of the Assembly. It has been in operation since 2011 and since October 2014 the VCS Assembly commission has been with Northumberland CVA. From 2015 the Assembly has met quarterly with NCC councillors and officers, the VCS Liaison Group.

4. Maximising the potential of the VCSE

- 4.1 The VCSE recognises that every area has the potential to achieve more through the effective use of skills, knowledge and assets available to communities. This is stated in the Health and Wellbeing Strategy as an essential approach to empowering people and communities. Public Health have been operating a small grants programme in North Northumberland to enable the development of opportunities for people to come together and take part in activities of their interest to improve their health and well-being in their localities e.g. grant to Seahouses Amateur Dramatic Club provided a venue for rehearsals, litter picking equipment enabled residents to meet up, walk and clear the beach. This shows how the statutory sector can increase its reach by working with and through the VCSE.
- 4.2 In addition to the social value they bring,(for example the net social value of the VCS Assembly is £5.48 for every £1 spent Social Value Engine), VCSE organisations can also make a significant contribution to helping the public sector maximise value and improve service delivery. Often this is by delivering the important preventative services that keep people away from expensive hospital stays or frequent GP visits, for example
 - Day care centres
 - Social groups and befriending services
 - Debt and welfare advice
 - Counselling and wellbeing services

These projects support good health, wellbeing and resilience e.g. Cygnus Support, Bell View (see Appendix 1).

4.3 The commitment of NHS England to social prescribing represents a positive shift toward empowering those with social, emotional or practical needs to find solutions to improve their own health and wellbeing, often through accessing VCSE services.

Many local organisations already take action on the social determinants of health which directly and indirectly impact on positive health outcomes. It is recognised that relatively few articulate their work in terms of its relevance to health and addressing health inequalities; instead their focus remains on engaging with their communities and delivering for their needs.

Such organisations are potentially a huge part of the solution to loneliness and social isolation, building on the trusted relationships they have developed, often over a number of years. This is particularly relevant for excluded communities that have a history of non-engagement and which statutory or mainstream services find 'hard to hear'. Too many of these communities often

have poor health outcomes. Capitalising on the relationships held by place based VCSE organisations can prevent needs escalating, reducing costly support further down the line. The VCSE welcome the opportunity to engage with and help to shape social prescribing in ways that works for the people we support and for the sector.

4.4 To enable statutory organisations to be confident about working with local providers Northumberland Council for Voluntary Action (NCVA) has in place a quality assurance health check for organisations. This has been adapted to ensure that it is in line with national guidance from the Social Prescribing Network. It is anticipated that organisations taking part in social prescribing will have completed the health check so giving reassurance to primary care partners on the quality of provision that is socially prescribed. It is recognised however that organisations receiving more referrals will require additional funding to meet needs.

The VCSE are well placed to support this work presenting a strong and effective partner in preventing ill health and promoting stronger, healthier communities.

5. What the VCS wants to do better

5.1 The State of the Sector 2018 report, referred to earlier, identified the importance of VCSE organisations working in partnership with one another increasing cooperation and collaboration to meet community needs. This is essential if the sector is going to be able to bid for contracts and will also assist in avoiding duplication and competition. Across the county VCSE organisations have come together to look at how they can work better together so that they are ready and in a better position to bid for contracts e.g. UK Shared Prosperity Fund, Combined Authority Inclusive Growth Deal.

The report also recognised the importance of working across sectors and the Assembly wants to ensure that VCSE organisations are represented, have a voice and can make a valuable contribution to strategies, plans and delivery. There are some successes to celebrate; for example, the participation of the sector in the Empowering People and Communities Working Group and in the development of the Physical Activity Strategy and Cultural Strategy. However there is still further work to be done in raising awareness of the VCS Assembly across statutory agencies to ensure that the sector is appropriately engaged and has a voice.

6. How the VCS can assist the public sector

6.1 There are many ways in which VCSE organisations can support the public sector at all stages of the commissioning cycle, whether as a strategic and / or a delivery partner. This includes:

- providing 'on the ground' insight into community needs and community assets, evidencing the impact of services, and supporting the evaluation of services including recommendations for improvement.
- supporting service users, patients and wider members of the public to take part in developing services and tender specifications.
- acting as a research and development partner, innovating and piloting new approaches to collaboration and service delivery.
- enabling commissioners to embed social value into their commissioning process and engage the VCSE in the development of a social value framework as identified in the Health and Wellbeing Strategy.
- co-designing solutions to target inequalities and co-produce services
- making resources go further. Public funding to the VCS can lever in additional resources from charitable trusts, corporate donors and individuals. Many organisations generate their own funds and the value of volunteering is unique to the sector.
- supporting the development of the Joint Strategic Needs Assessment by providing evidence on key issues.
- contributing to a whole system approach identified in the Health and Wellbeing Strategy e.g. Making Every Contact count (MECC) approach to behaviour change.
- access to networks and activities that support good health and resilience that can be used as a resource to get key messages out to the public e.g. increasing immunisations, and the uptake of preventative medicine.

7. How the public sector can assist the VCS in ensuring sustainability

- 7.1 Working together with the sector can help to ensure coordinated, efficient and effective support to local communities in Northumberland. Improving communication on strategic issues, helping to shape and inform local planning and policy development and sharing information ensures an improved working relationship and a voice for the sector. Identifying mutual opportunities and sharing common concerns enables the development of shared priorities and actions that can be agreed jointly to benefit communities and build a society that is stronger, with less isolated and more resilient citizens.
- 7.2 The trend over recent years has been for public sector organisations to offer fewer and larger contracts. Many local VCSE organisations do not have the scale and / or capacity to compete or to deliver at such scale. In addition, partnership working between VCSE organisations is still in relative infancy within the county, and can be adversely affected by competitive tendering.

Public sector organisations committing to using local services and keeping contracts small could bring multiple benefits whilst supporting the development and continuity of a vibrant VCSE in Northumberland:

- Enabling local providers to engage and makes use of local knowledge and commitment.
- Shaping future provision through working in partnership rather than simply being involved at the bidding for contracts stage.
- Contributing to the sustainability of the sector and the engagement of communities.
- Greater understanding of each other's perspectives is also increased.
- Sharing best practice and identifying how services can complement each other.

Grant funding can enable voluntary and community organisations to work in new and flexible ways with communities to develop new solutions to persistent challenges. A small grant can help an organisation to lever in additional resource, bring additional volunteer capacity and respond flexibly to the needs of their communities and build on their strengths.

Grants also assist the VCS in focusing on their objectives rather than diverting their attention chasing contracts that may not directly relate to their mission. Funders need to be willing to fund for the longer-term and encourage learning, adaptation and even failure that take place over time and give organisations enough time to concentrate on delivery and impact.

The Health and Social Care Act 2012 enables Clinical Commissioning Groups (CCG) to award grants to VCSE organisations which provide or arrange for the provision of services which are similar to the functions of the CCG.

8. Conclusion and next steps

8.1 The purpose of this paper has been to provide the Health and Wellbeing Board with information about the VCSE and the valuable contribution that they can make in working in partnership with public services to support the health and wellbeing of our communities. It is anticipated that the Board will consider how the VCSE and public sector can work more effectively as equal partners to improve the health and wellbeing of individuals and ensure stronger and healthier communities. Service users need all parts of the system to work together. This interaction is complex, it is not a simple addition of the participating organisations, the organisations interact and so it is a multiplication. If this were to be reduced to a formula it would not be:

Health + Social Care + VCS = Quality of Provision

but:

Health x Social Care x VCS = Quality of Provision

Multiplication makes one consider all elements to be multiplied, it is no use only improving your service if the other service is struggling or in decline. If a 2 star Health Provider is working with a 2 star Children's or Adult service the quality is 4. If a 3 star Health Provider is working with a no star Children's or Adult service the quality is ZERO. Co-working requires all participants to ensure the strength of those working with them as their own offer is affected by the performance of its partners.

9. Recommendations

This report has identified the value and support the VCSE can provide to the public sector to improve the health and well being of people across the county. It is recommended that Health and Wellbeing Board recognise the valuable contribution of the VCSE and engage with the VCSE as an equal partner in strategic decision making and in the co-production of health and care services. This requires the VCSE to be engaged at the beginning stage of the decision making process, in order to ensure that the maximum potential of the sector is actualized.

References

A bite size guide tor grants for the Voluntary Sector, NHS England

Charity Commission 2018

Facts and Figures UK Charity Sector 2018, nfpSynergy

Knowledge – demographics Northumberland County Council

NHS England - Partnerships and Relationships

Northern Rock Foundation – Third Sector Trends Survey Feb 2010,

Northumberland Joint Health and Wellbeing Strategy 2018 – 2028, Northumberland County Council and NHS Northumberland CCG

Terms of reference, Northumberland Health and Wellbeing Board, Northumberland County Council

Social Value Engine – Rose Regeneration and East Riding of Yorkshire Council

Systems Change, A guide to what it is and how to do it, NPC

Voluntary Sector Action on the Social Determinants of Health, Health Foundation, NPC Institute of Health Equity

House of Lords Select Committee report, June 2018: time for a strategy for the rural economy

Appendix 1:

Case Study: Cygnus Support

Cygnus Support, formally Women's Health Advice Centre has provided mental health and wellbeing support since 1984.

Funded through the National Lottery Community Fund, Office of the Police and Crime Commissioner and the National Lottery Community Fund and the European Social Fund as part of the Building Better Opportunities Programme the organisation in 2017-18:

- Arranged 1978 counselling and assessment sessions
- Leveraged 1112 hours of volunteer counselling from 24 volunteers
- Delivered 2 Recovery Toolkits for people who have experienced domestic abuse

Took over 400 referrals, the majority from statutory services; NHS, Northumberland County Council, Northumbria Police and schools

Case Study: Bell View

Bell View is a registered charity, formed by local residents in 1998, with the mission to support older people to live independently in North Northumberland. The charity base is a purpose built Resource Centre in Belford, which acts as a hub for delivering a range of services and support throughout the 200sq mile project area.

Services and support provided include:

- Social gatherings with food in rural community venues including Belford, Seahouses, Glanton, Bowsden and Cornhill.
- Arts, crafts, health, wellbeing and digital inclusion sessions.
- Community transport scheme taking people out and about including to doctors, dentist, optician, hairdresser, podiatrist and visit friends.
- Assisted shopping trips and trips out to social and cultural events.
- Day care service for people with complex needs.
- Intergenerational work and specialised support for people with dementia.
- Home care service.
- Wheelchair loan scheme.
- Volunteering opportunities, with training and ongoing support.

The charity owns four accessible vehicles which are used to support all aspects of service delivery and has 50 volunteers supporting their work. Last year the community transport scheme carried out over 1,500 trips and volunteers gave 4211 hours of their time.

Case Study: Age UK Northumberland

Offer support and services to older people to empower them to enjoy later life.

- Home care, day centres and lunch clubs across Northumberland
- Information, advice, welfare benefits assistance and befriending
- Advocacy, planning ahead service e.g. wills
- Health and Wellbeing offers 41 exercise classes in community venues run by volunteers across the whole county every week. These offer a range of classes including chair based exercise, Qi Gong, falls prevention classes, exercise to music and circuit classes. In addition to the health benefits of the exercise, these classes also enhance wellbeing through social interaction.
- Specific instruction for people with long term conditions, arthritis, diabetes, chronic obstructive pulmonary disease, heart disease and high blood pressure.

Case Study: West Northumberland Food Bank

Established in 2013 to reduce poverty.

- Provide free food and household essentials
- Target support to address the causes/effects of poverty identified by data analysis i.e. Debt, Benefit problems and Low Pay through Signposting, Referral and Advocacy.
- Provide follow on support to address the consequences of persistent poverty e.g. Social Exclusion and poor Mental Health through Signposting, Referral and Advocacy to community projects that empower and connect people
- Work with others to reduce poverty
- Our team of volunteer support workers meet around 80 requests for help every week at our sites in Prudhoe Hexham and Haltwhistle, helping people with Debt and Benefit problems as well as distributing food and other household essentials.
- In the last 6 months we have helped 360 households including 171 families with 354 children, this is a 50% increase in demand since this time last year and 36% of requests for help are from people coming to the Food Bank for the first time
- 62 households are in low paid work and 42 people are homeless. 46% of requests for help have been from people in treatment for poor mental health and 38% with sickness and disabilities we have also helped 112 households with debt.