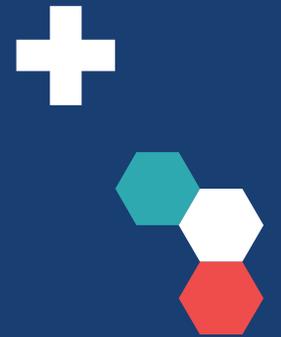


Voluntary and community (VCFSE) sector in models of integrated health and care



Emma Halliday and Paula Wheeler, EPHC Theme,
ARCFEST April 2021



Aims of the talk

- Briefly explain what is integrated care and how the VCFSE sector relates to this
- Describe the early developments of a structure for VCFSE engagement in Lancashire and South Cumbria (research carried out by EPHC)
- Consider future directions for this area of work

Acronym “warning”

- VCFSE sector = Voluntary and Community, Faith and Social Enterprise (or ‘third’, or ‘voluntary and community’ sector)
- ICS = Integrated care system
- ICP = Integrated care partnership



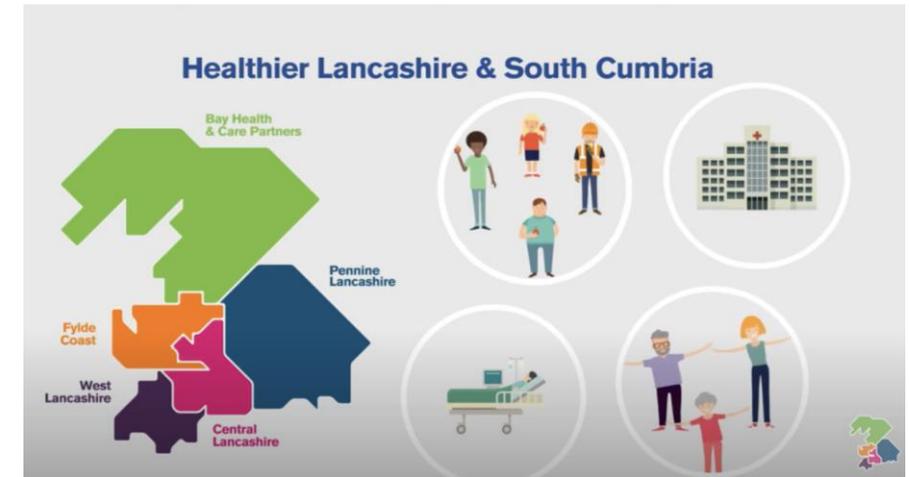
Why partner with VCFSE sector?

- **Service delivery and co-producers of services**
- **Expertise and flexibility**
- **Advocates for and links with communities**
- **Credibility and trust**

Adapted from NHS Voluntary
Partnerships Programme

Lancashire and South Cumbria example

- Lancashire and South Cumbria integrated care system covers a region made up of five local areas
- Integrated care partnership board for each local area - way for organisations and groups involved in health and care to join up locally
- Overall ICS board at the Lancashire and South Cumbria level
- **Explicit focus on engagement with VCFSE sector**



<https://www.healthierlsc.co.uk/>

Lancashire and South Cumbria's VCFSE Alliance

Structure for engaging VCFSE organisations with the Lancashire and South Cumbria system

Representation from VCFSE organisations and others (e.g. local authority, health and wellbeing boards)

Independent (and ICS funded) chair (appointed in early 2020)

“The VCFSE sector sees collaboration with health and social care providers as being of the utmost importance. The vision for place-based, integrated health and social care is a vision shared by VCFSE organisations, who wish to become major players in new systems of delivery.”

Peter Armer, Independent Chair, VCFSE Alliance¹

Early changes and benefits

- Opportunity to develop or strengthen new relationships between VCSFE organisations
- Opportunities for the VCFSE organizations to engage with structures of the integrated care systems

COVID pandemic:

- Illuminated importance of the sector in response to community need
- Creating impetus to shift relationships

Issues – funding, capacity and influence

Extent that relationships developed and engagement occurred variable across localities

- Time and investment of funding
- Funding arrangements for VCFSE sector
- Skills and confidence to work in new ways
- ‘Parity of esteem’ with statutory partners

“we have very very strong partners around that table, you know, an acute hospital...you compare that to the VCFSE sector where you might have somebody who’s involved in a small group, yeah it’s, you’re always going to have disparities I suppose.”

Future directions for ARC research?

- Understanding the vital role and contribution of VCFSE sector in improving local population health and addressing health inequalities
 - Identifying the positive outcomes and benefits for (i) organisation/delivery of services (ii) patients and communities
- Evaluation of interventions/programmes that involve working in more joined up ways with VCFSE organisations in region
 - Opportunity for learning from COVID-19

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