

Evaluation of the impact of Voluntary Action Calderdale on strengthening the role of the voluntary and community sector in the health system.

Executive Summary

“Overall it feels like it’s (the VCS) in a different place. The Sector is more in tune with the strategic direction of travel (of the health system)”

CCG Commissioner

Health Together at Leeds Beckett University were commissioned by Voluntary Action Calderdale (VAC) to undertake an evaluation of their three year programme to bring about a system change in the relationship that the third sector and the public has with the NHS in Calderdale. This programme was funded by NHS Calderdale Clinical Commissioning Group (CCG). The review was conducted during August and September 2016 and drew on three main sources of data:

- interviews with a range of senior stakeholders in Calderdale,
- analysis of activity data held by VAC,
- surveys sent out to voluntary and community groups and practice managers.

This was an ambitious programme with the aim of improving the capability of the voluntary and community sector (VCS) both with regard to its understanding of the health system and its ability to deliver services to a standard required by health commissioners.

The programme used a variety of interventions ranging from funding support for new services and training, through to specific training courses and informal support. The programme also sought to make better use of the skills and connections the VCS has; through establishing new fora, training engagement champions and supporting primary care engage better with the public.

Overall our review suggested that the major elements of the programme which focussed on developing the capability of the sector through a combination of training and support for the VCS had been particularly successful, as had the work building a cadre of engagement champions.

We drew particular attention to:

- The collaboration between VAC and the local community foundation (Community Foundation for Calderdale) and its development and training activities. This combination of increasing access to funding and combining it with formal and informal capacity building appears to have enabled a number of voluntary organisations to improve their effectiveness, bid readiness and created new collaborations.

- The training programme has clearly evolved over time - developing a greater coherence and more explicit framework. It has also offered a combination of skill and policy specific courses, alongside more tailored training and briefings that keep the sector up to speed with changes in the health sector.

Areas that have been more challenging include the work establishing and supporting fora in the district to improve engagement on a range of specific issues. We do feel that more progress has been made with regard to fora that are service specific - such as the Maternity Service Liaison Committee compared to those that are issue specific such as the BME Forum. We believe that this is due to a number of wider factors which we highlight in the report.

We consider that one of the most difficult areas has been that relating to public engagement and voice in primary care - and consider that in part this is due to factors that are out of the control of Voluntary Action Calderdale such as the relative degree of importance that this agenda has in a sector with less tradition of direct local public engagement, and that faces pressing and complex problems which include managing demand and funding shortfalls.

Finally, we note that there are particular challenges in Calderdale with the local authority and CCG funding different voluntary sector infrastructure organisations - this approach makes it more difficult to develop an integrated approach to health and social care; we note that both the local authority and CCG recognise that this issue will need to be addressed.

We recognise that like the rest of England the NHS and Care Systems in Calderdale are under extreme financial pressure. The problems they face are too big for organisations to solve alone. We note that both the local authority and CCG recognise that this is an issue that needs to be addressed.

Given the above we make a number of recommendations for consideration by VAC and the CCG going forward:

- strengthening collaborations between key health and infrastructure VCS bodies in Calderdale
- bringing greater strategic expertise to the ongoing development of fora
- suggesting that the CCG consider how it might provide stronger support to VACs work with primary care
- improving data collection and analysis in order to present a clearer picture of activity and impact to wider stakeholders in Calderdale

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