Maximising the Potential of the third sector

Mobilising Communities

Lancashire
County
Council

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Lot 3: Maximising Potential of the

Voluntary, Community and Faith Sector (VCFS)

FINAL REPORT AND STRATEGIC FRAMEWORK
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Dr Alan Farrier

Prof Mark Dooris

Healthy & Sustainable Settings Unit

University of Central Lancashire

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ACKNOWLEDGEMENTS

GLOSSARY

A&E   Accident and Emergency

CCG   Clinical Commissioning Group

CISP   Countrywide Infrastructure Support Programme

CVS   Community Voluntary Service

ELCCG   East Lancashire Clinical Commissioning Group

HSSU   Healthy and Sustainable Settings Unit

LCC   Lancashire County Council

LVP   Lancashire Volunteer Partnership

MECC   Making Every Contact Count

NHS   National Health Service

TCA   Transformation Challenge Award

TSL   Third Sector Lancashire

UCLan University of Central Lancashire

VCFS   Voluntary, Community and Faith Sector

VCFSE   Voluntary, Community, Faith and Social Enterprise

CONTACTS

Alan Farrier: afarrier@uclan.ac.uk

Mark Dooris: mtdooris@uclan.ac.uk

Healthy & Sustainable Settings Unit | School of Community Health & Midwifery | Faculty of Health & Wellbeing | University of Central Lancashire | Preston PR1 2HE
http://www.uclan.ac.uk/research/explore/groups/healthy_settings_unit.php

EXECUTIVE SUMMARY

Introduction

The University of Central Lancashire's Healthy and Sustainable Settings Unit has been commissioned by Lancashire County Council to develop a clear strategy for maximising the potential for collaborative efforts between the VCFS and public sector for the benefit of local communities in Lancashire. The programme of work consisted of four steps: Critical review; reflective consultation; future focus; and strategic framework development.

Background to Living Well, Living Better Mobilising Communities project

Nationally, there is a significant body of evidence that demonstrates the importance of the role of the VCFS on the health and wellbeing of individuals and communities. In Lancashire, there is an emphasis on collaborative practice and the VCFSE being highlighted as key partners and enablers for greater services for local communities as well as building resilience through partnership working. Living Well, Living Better is one of the local initiatives designed to enable these changes to occur, and develop and promote fully engaged communities and a place-based health and care system in Lancashire. This report seeks to take the discussion further, using a collaborative approach with the key stakeholders involved in making effective cross-sector working across Lancashire a reality by identifying the key issues and developing a strategic framework for moving forward.

Methods involved in the study

A combination of reflective consultation and future-focused one-to-one interviews and focus groups were undertaken with a number of organisations operating at the Lancashire level, as well as with representatives from the Living Well, Living Better pilot localities in Chorley and Rossendale, including: Lancashire County Council Public Health, ONE Lancashire, Third Sector Lancashire and Lancashire Volunteer Partnership. These were both guided by semi-structured interview schedules. Audio recordings of the interviews and focus groups were transcribed verbatim and subject to a thematic analysis by the research team. Member checking was used and selected quotes used in this report were shared with the interviewees to give the opportunity for further comment and refinement. Ethical approval for the study was granted by the University of Central Lancashire internal ethics committee.

Findings from reflective consultation

Key stakeholders were asked to consider the state of the current relationship between the VCFS and the public sector, with regard to its role in building health, wellbeing and resilience within local communities. Four key themes emerged:

- Complexity of the current model
- State of flux (of VCFS and public sector)
- Shifting funding landscape and need for transparency and consultation
- Harnessing assets, sharing information and building resilience

They were also asked for key facilitators for effective cross-sector working between the LCC and VCFS. Three main themes were discussed:

- Combining 'bottom up' and 'top down' approaches
- Building trust, respect and inclusivity
- The Living Well, Living Better programme

Alongside these facilitators, those interviewed highlighted a number of key challenges for effective cross-sector working:

- Networks – reduction and lack of capacity

- Lack of connectivity and equitability between organisations
- Tensions and differences between large and small organisations
- Lack of leadership and 'voice' for the VCFS
- Distrust in motivations for community mobilisation
- Increase in burden and risk (on certain VCFS organisations)

Characteristics of effective cross-sector working – priorities for the future

In the 'future focus' stage of the study, participants were asked to consider what works in cross-sector working between the VCFS and LCC, as well as being asked specifically what they believed the key priorities to be from their organisation's perspective. Drawing on perspectives from these interviews and focus groups, and from the wider data, the following seven themes emerged as key characteristics considered to be important in framing future cross-sector working:

- An equitable and joined-up approach
- A collaborative and strategic approach to funding
- A focus on enhancing connectivity and sharing data
- A shift to intelligence-led commissioning that fosters innovation
- A supportive and coherent infrastructure
- An investment in networking and training
- A commitment to monitoring and evaluation

Strategic Framework

In the spirit of co-creation, an outline framework was developed, informed by the research data with a view to further co-development across sectors. Underpinned by a set of principles that should infuse all working practices, it sets out the seven key characteristics of effective cross-sector working that are understood to enable progress towards the overarching vision of achieving mobilised and resilient communities and improved health, wellbeing and health equity.

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INTRODUCTION

The University of Central Lancashire's Healthy and Sustainable Settings Unit (HSSU) was commissioned by Lancashire County Council (LCC) to conduct a consultative research study exploring opportunities to enhance the effectiveness of cross-sector working and maximise the potential of the voluntary, community and faith sectors[1] (VCFS). The project formed one component of the wider Living Well, Living Better Programme and was informed by learning from pilot work conducted in Rossendale West and Chorley Central.

Living Well, Living Better was funded through a transformation and challenge award (TCA) from the Department for Communities and Local Government, and has been focused on developing and supporting the system-wide mobilisation of communities, and building resilience and capacity for improved health, wellbeing and health equity across Lancashire – with a view to moving towards a sustainable 'population health system'[2].

The study took place over 12 months across 2017-2018 and prioritised a co-creative and co-productive approach. It involved a reflective appraisal and review focused on the current system of public sector engagement with the VCFS and the role of VCFS organisations in building resilience and wellbeing, alongside a forward-focused exploration of how cross-sector working could be made more effective and sustainable. The research focused particularly on relationships between LCC Public Health and key VCFS bodies across Lancashire – Third Sector Lancashire (TSL), ONE Lancashire and the Lancashire Volunteer Partnership (LVP)[3].

At the time the fieldwork was conducted, TSL was going through a period of development, which ultimately resulted in a merger with ONE Lancashire (effective 28th February, 2018). This posed some challenges in collecting data and reporting in a way that ensures this document has utility, rather than capturing historic cross-sectoral issues.

The programme of work consisted of four steps:

i. **Critical review:** A careful and considered mapping and critical review of the current situation

ii. **Reflective consultation:** Engaging with key stakeholders at a Lancashire level and from the pilot project localities, to reflect on current situation via consultative interviews and focus groups

iii. **Future focus:** Engaging key stakeholders to explore future directions through focus groups at a Lancashire level and from the pilot project localities

iv. **Strategic framework development:** The proposal of an outline strategic framework to inform cross-sector working between LCC and the VCFS, based on findings from the reflective consultation and future focus, for further co-creative development.

This report presents a summary of the key findings of the work. It is structured as follows: background to Living Well, Living Better Mobilising Communities project; methods involved in the

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[1] Whilst referred to as the voluntary, community and faith sector in LCC's tender documents, in an early development meeting with key stakeholders it was suggested that it is more accurate to describe this varied group of organisations as 'voluntary, community and faith sectors'.

[2] Alderwick, H., Ham, C. and Buck, D. (2015) Population health systems: Going beyond integrated care (February 2015). The King's Fund: London. https://www.kingsfund.org.uk/sites/default/files/field/field_publication_file/population-health-systems-kingsfund-feb15.pdf

[3] The initial brief from LCC was to look at VCFS partnership work within five specific localities within Lancashire in which Skills for Care and Spice were conducting Living Well, Living Better work. However, after initial scoping work and further discussion with LCC and TSL, it was agreed that a focus on a cross Lancashire strategic level would be of most value for determining a strategic framework for future cross-sectoral work.

study; findings from reflective consultation (with pilot project case studies); characteristics of effective cross-sector working – priorities for the future; conclusion and strategic framework.

2.   BACKGROUND: CRITICAL REVIEW

Nationally, there is a significant body of evidence that demonstrates the importance of the role of the VCFS on the health and wellbeing of individuals and communities, and additionally the role that key organisations such as Local Government, NHS & Third Sector have building confident and connected communities. The NHS five year forward view[4] advocates a focus on prevention and wellbeing with a commitment to developing stronger relationships with communities and citizens and to involve them more directly in decision-making, with a specific focus on supporting carers, encouraging community volunteering and forging stronger partnerships with the VCFS.

A Public Health England report on community-centred approaches[5] also underlined a focus on strengthening communities: offering volunteer and peer roles around health and wellbeing; partnership working; and giving access to community resources. Furthermore, recent NICE guidelines[6] have called for greater community engagement in health and wellbeing initiatives, designed to contribute to improvements in their locality; to reduce health inequalities; increase local citizens' involvement in the design and delivery of initiatives and; improve the self-efficacy of communities. A recent King's Fund report[7] highlighted the variety of ways in which commissioners currently engage with the VCFSE and how this relationship is critical to ensuring the sector has the most benefit for the health and wellbeing of local communities, but that the sector needs strong leadership in order to negotiate this relationship.

Locally, the NHS 5 Year Forward View is being taken forward through the Lancashire and South Cumbria's Sustainability & Transformation Plan (STP)[8], with an emphasis on collaborative practice and the VCFSE being highlighted as key partners and enablers for greater services for local communities. LCC's corporate strategy[9] prioritises mobilising communities and building resilience through partnership working. LCC has recently run a series of networking events for key stakeholders entitled 'Action to Mobilise Communities – From Conversation to Action'. Living Well, Living Better is one of the local initiatives designed to enable these changes to occur, and develop and promote fully engaged communities and a place-based health and care system in Lancashire. However, it is acknowledged that before such changes can occur, the key issues concerning cross-sectoral work need to be identified and a strategic framework for moving relationships both with the VCFS and with key partners forward needs to be developed. This report seeks to take the discussion further, using a collaborative approach with the key stakeholders involved in making effective cross-sector working across the whole of Lancashire a reality.

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[4]   NHS (2014) Five year forward view. October 2014.

[5]   Public Health England (2014) A guide to community-centred approached for health and wellbeing. Published February 2015.

[6]   NICE (2017) Community engagement: improving health and wellbeing. Quality standard, published 3rd March 2017 nice.org.uk/guidance/qs148.

[7]   King's Fund (2018) Commissioner perspectives on working with the voluntary, community and social enterprise sector. February 2018.

[8]   Healthier Lancashire and South Cumbria (2016) Sustainability and Transformation Plan 2016/17-2020/21 Draft. Third submission to NHS England 21st October 2016. Draft Version 7.7. http://www.healthierlsc.co.uk/application/files/4314/9552/9228/LancsAndSouthCumbria_STP.pdf

[9]   Lancashire County Council (2015) Corporate strategy (draft). 17 December 2015. http://www.lancashire.gov.uk/media/897373/draft-corporate-strategy.pdf

The excerpt below from the original tender document for Lot 3, written by Dr. Sakthi Karunanithi, Director of Public Health for LCC, provides a more specific context:

> Increasing demand for statutory services and public sector budget cuts have created an unprecedented incentive to work across the two tiers of local government and with other public sector partners in Lancashire to collectively think and do things differently.
>
> There are significant demand pressures facing the County Council, district councils and other public and voluntary sector partners. Forecasts for Lancashire show that we have a rapidly ageing population which will place pressure on demand for our services and those of our partners. In particular there are acute pressures on adult social care, where numbers of referrals and the numbers of individuals accessing our services continues to rise.
>
> Across the public sector in Lancashire there are some excellent examples of work aimed at reducing demand and intervening early to ensure that people do not suffer higher levels of need. However, the current offer is fragmented and is not having maximum impact:
>
> - Services / activities tend to be organised on a business or locality footprint, rather than with a view to improving outcomes for communities;
> - The way in which activities are commissioned (or provided) is in general not joined up;
> - There is duplication, overlap or potentially gaps in provision;
> - There are multiple providers and contractual arrangements; and
> - There are a multitude of pathways, entry points and criteria for access to services.
>
> We need to ensure we maximise the opportunities presented by preventative approaches and that we are well placed to evidence the impact - and use that evidence to drive out savings to reduce the costs of statutory services.
>
> As partners we are committed to exploring how building community resilience and self-reliance can maximise people's life chances in a climate of increasing demand and reducing resource. We are all using community assets approaches (strength-based approaches) in some areas of our services, with some indication of positive results. However, these initiatives are not being delivered at the necessary scale, or applied to a wide enough range of services, to deliver the transformation required to significantly improve health and wellbeing outcomes and stem the financial pressures that we are all facing by reducing demand for our high cost services (such as adult social care and high cost hospital care).
>
> To summarise, standing still is not an option. By not taking this approach:
>
> - A significant number of people will struggle to access appropriate support until they reach crisis point and are unable to cope with their circumstances resulting in poor outcomes for local people
> - Scarce resources will be wasted through silo working and duplication of services and resources
> - The public sector in Lancashire will reach 'crisis point' as we find ourselves unable to cope with ever increasing demand for our high cost health and social care services.

3.   METHODS: INTERVIEWS AND FOCUS GROUPS

3.1   KEY STAKEHOLDER ORGANISATIONS

Interviews and focus groups were held with key stakeholders from a number of organisations operating across Lancashire, as well as with representatives from the Living Well, Living Better pilot localities:

Lancashire County Council Public Health

Public Health's role is to provide intelligence, surveillance, advocacy and advice about health and wellbeing, to co-ordinate programmes to improve health and wellbeing; to commission a variety of Health Checks, services and programmes (with a focus on healthy eating, healthy weight and mental

health); to influence partners to ensure plans are in place to improve and protect the public's health; to address the root causes of poor health; and to insure health is a consideration in all policies.

ONE Lancashire

ONE Lancashire was set up to bring together and strengthen third sector infrastructure providers in Lancashire. Infrastructure organisations exist to support and represent the VCFS in order to achieve its aims, which are: to support consistent delivery of high quality and viable infrastructure; to be a voice for the sector and encourage its engagement; and to help create new opportunities for the third sector.

Third Sector Lancashire

Third Sector Lancashire[10] was a consortium of organisations in the VCFS across Lancashire, dedicated to enhancing the health and well-being of local communities, working in strategic alliance with ONE Lancashire. Their purpose was to support, represent and be a voice for local third sector bodies that specialise in health and well-being in their dealings with the public and private sector.

Lancashire Volunteer Partnership

The Lancashire Volunteer Partnership consists of a range of public service organisations coming together to improve, promote and widen volunteering across the public sector. Partners include the county council, the Lancashire Constabulary, Lancashire Fire and Rescue, and borough councils. The aims of the partnership are to help increase community cohesion and reduce social isolation; and to improve the health and wellbeing of vulnerable adults through the support of volunteers.

Living Well Living Better Pilots

In 2014, LCC was successful in bidding for Transformation Challenge Award (TCA) funding. This enabled Living Well, Living Better pilot work to be run in two Lancashire localities simultaneously: Chorley and Rossendale. The aim of these pilots was to implement a new service model underpinned by a series of multi-agency 'interventions'. This was achieved by co-ordinating and consolidating the resources of partner organisations in these specific localities, to provide a wellbeing and resilience system and lead to more resilient communities and reduce the demand for expensive health and social care service.

3.2   REFLECTIVE CONSULTATION AND FUTURE FOCUS INTERVIEWS AND FOCUS GROUPS

A combination of reflective consultation and future-focused one-to-one interviews and focus groups were undertaken (these were combined where noted, see footnotes for details), to engage key stakeholders operating at a Lancashire level, as well as in the Living Well, Living Better pilot localities (see Table 1). Purposive sampling was employed, whereby we specifically targeted key individuals identified as appropriate by senior-level staff in each organisation involved. This meant that some key stakeholders took part in both reflective consultation and future-focused interviews and/or focus groups. Two semi-structured interview schedules were used (see Appendix 1). Both focused on the relationships between the public sector (specifically LCC Public Health) and key VCFS bodies at the Lancashire level. In the reflective consultation, interviewees were invited to reflect critically but constructively on the current situation and its historical development; identify and celebrate existing assets and facilitators that enable things to work well; and identify and examine challenges and barriers that inhibit effective cross-sector working. The Living Well, Living Better pilots in Chorley and Rossendale took distinctly different approaches: these are presented in as separate case studies focusing on the main issues concerning connections between the VCFS and the councils in these localities (see Section 4.4).

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[10]   As of February 28th, 2018, this organisation has merged with One Lancashire.

Table 1. Interview and Focus Group Participants

Organisation	Reflective Consultation: Number of participants in one to one interview/ focus group	Future Focus: Number of participants in one to one interview/ focus group	Quote attribution in report
Lancashire County Council Public Health[11]	1	1	LCC Public Health
Lancashire Volunteer[12] Partnership	1	1	Lancashire Volunteer Partnership
Chorley Living Well, Living Better pilot	5	3	Living Well, Living Better pilots
Rossendale Living Well, Living Better pilot	3		
ONE Lancashire	1	2	ONE Lancashire
Third Sector Lancashire[13]	2	2	Third Sector Lancashire
TOTAL	**13**	**10**	

Audio recordings of the interviews were transcribed verbatim and subjected to a two-stage thematic analysis, with the initial analysis being checked and refined by another member of the research team. The overarching themes presented in Section 4 were defined by the interview schedule, with the sub-themes emerging from the content of the interviews. Finally, member checking was used: verbatim quotes used in this report were presented back to interviewees from their specific interview/focus group and they were given the opportunity to comment further, to ensure that these themes are as accurately representative as possible of the key stakeholders. Ethical approval was gained from University of Central Lancashire's internal ethics committee for the research activities, to ensure appropriate research governance. Consent was obtained from interviewees to use verbatim quotes from interviews and focus groups, but to limit identification to the specific organisation interviewees were employed by.

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[11] This was in effect a pilot interview, which helped test out and refine the questions for both the reflective and future-focused interview schedules. Quotes from this interview appear under the relevant sub-themes.

[12] This was a single one-to-one interview combining questions from the reflective consultation and future-focused interview schedules.

[13] This was a single focus group, which combined questions from the reflective consultation and future-focused interview schedules.

4. FINDINGS: REFLECTIVE CONSULTATION

4.1 CURRENT RELATIONSHIP BETWEEN THE VCFS AND THE PUBLIC SECTOR

Key stakeholders were asked to consider the state of the current relationship between the VCFS and the public sector, with regard to its role in building health, wellbeing and resilience within local communities. Four key themes emerged from the focus groups and interviews:

- Complexity of the current model
- State of flux
- Shifting funding landscape and need for transparency and consultation
- Harnessing assets, sharing information and building resilience

4.1.1 Complexity of the current model

There were a variety of perspectives from key stakeholders regarding the current model informing relationships between the public sector and the VCFS. It was felt that the model was inherently difficult to understand, which impacted on its effectiveness:

> "You've got your...communication and your engagement. You've got your commissioning. There's different sections to any business model...and I think because it's complex, because there's not one simple pathway...I think that's why it gets a bit complicated." (LCC Public Health)

A respondent from ONE Lancashire commented that, while the relationship between the LCC and the VCFS had aspects of a 'business model', this was muddied by the fact that it is not purely a business transaction. It was also argued that that there is a lack of clarity which would not be acceptable in the private sector – regarding how funding is made available and what expectations are placed on the funded organisation:

> "Sometimes we look at funding that's given out to the voluntary sector and the accountability isn't always there...I'm not sure sometimes they actually deliver on what they say they're going to deliver on." (Lancashire Volunteer Partnership)

4.1.2 State of flux

It was recognised that both the VCFS and the public sector have been in a state of seemingly constant flux, with a rapid turnover of staff and restructuring of organisations. Although there was a feeling that the situation has plateaued, this has clearly made it hard to sustain working relationships between key individuals within organisations:

> "There was then that period of, 'oh well, this is the officer you're in touch with now to do that piece of work', and then six months later they'd be gone or they'd be shifted to another department... That instability lasted for a long time. It's starting to calm down a little bit now." (ONE Lancashire)

A degree of flexibility has therefore been needed from all key stakeholders, in order to deal with the continuously changing landscape of both the VCFS and the public sector.

4.1.3 Shifting funding landscape and need for transparency and consultation

Another key element of change concerned a reduction in funding for an established neighbourhood approach in Lancashire, argued to be reflective of national changes in funding priorities:

> "A lot of people in the voluntary, community and third sector have seen a lot of resource pulled out over the last few years, both coming from the public sector, but also...things like Big Lottery and opportunities to secure funding. And so...I think they're struggling to resource themselves and I think that in itself then puts up barriers between them and us, because now when we

approach them and look to work with them, often they think we're expecting something for nothing." (LCC Public Health)

This is a reflection of the marked decrease in funding for local authorities and the fact that LCC Public Health (and other services and directorates) no longer have the financial resources to deliver services and to fund the VCFS to the same degree or in the same way as previously. Perhaps not surprisingly, this has resulted in a degree of mistrust about the public sector's motivations, whereby the language of community mobilisation is used without clear transparency concerning either existing activity or financial imperatives (see also Section 4.3.5). Taking account of this, it was argued that if LCC tried to introduce a new model of cross-sector working without consulting key stakeholder organisations in the VCFS, there would be resistance and it would struggle to make an impact:

> "From a county point of view, they seem to be on this trajectory of, 'we're not going to be able to do it in the future, you're going to have to do it for yourselves. We're going to show you how to do it or arrange an environment through which you can do it.' Now, to some extent, this ignores the fact that communities are already doing it, so that's going to be somewhat difficult to unravel I think." (ONE Lancashire)

It was further suggested that key stakeholders in the VCFS wanted LCC to consult them about community needs as well as capacities, to help ensure that future strategies are as robust as possible, informed by the full range of evidence.

4.1.4 Harnessing assets, sharing information and building resilience

Alongside this reduction in funding for both local authorities and the VCFS, and perhaps prompted by it, there has been an increasing emphasis on harnessing and utilising assets within multiple sectors. An example of this within public sector organisations is the incorporation and uptake of Making Every Contact Count (MECC):

> "A key cultural change overall that I see within the public sector, is the whole MECC thing…, trying to spread that culture across all agencies." (Living Well, Living Better Pilots)

Within VCFS organisations, the shift towards an assets-based approach is demonstrated by an emphasis on volunteering. Whilst the VCFS and public sector have been affected negatively by staffing reduction/changes and funding challenges, this has seemingly catalysed new thinking, resulting in a growth in volunteering opportunities for organisations which traditionally would have had funding for posts:

> "Once…we could just sit back and the volunteers would trickle in at a nice steady rate, without having to do much PR and marketing. Now we've invested in PR and marketing (posters, leaflets, new branding) and we work really hard to recruit volunteers…I think this is because there are more and more organisations who all want volunteers. So once volunteering opportunities were limited, however volunteers have choice. I think everybody's understanding of the value of volunteers and how you can enrich a service has changed." (Lancashire Volunteer Partnership)

Despite the strains created by organisational flux and reduced funding, several of the key stakeholders acknowledged that the VCFS was coping well, utilising established local assets and connections in the absence of public sector support:

> "They're having to learn from each other, things that…professional mental health workers would have been straight in there and able to support them with, but they're just not there anymore. So you do see people coping, at a community level, with some really high level mental health and learning disability issues." (Living Well, Living Better Pilots)

This new landscape has meant that VCFS are having to be more resilient and, where possible, share information with other kindred organisations**.**

4.2   KEY FACILITATORS

Stakeholders were asked what they considered to be the key facilitators for effective cross-sector working between the LCC and VCFS. Three main themes were discussed:

- Combining 'bottom up' and 'top down' approaches
- Building trust, respect and inclusivity
- The Living Well, Living Better programme

4.2.1   Combining 'bottom up' and 'top down' approaches

Respondents suggested that effective cross-sector working can be facilitated by valuing and combining both 'bottom up' and 'top down' approaches. It was suggested by an LCC interviewee that VCFS organisations that had emerged via a bottom-up approach were more likely to succeed and that the public sector needed to be more 'hands-off' in how it related to them:

> "It's about councils, it's about LCC, it's about us being open and willing…to work with them and to let go and to maybe not be as prescriptive as we used to be." (LCC Public Health)

It was also argued that developing relationships with individuals who had power to influence decisions 'from the top' was important, as these leaders were powerful drivers for shifting organisational cultures and mindsets. To an extent, the level of previous experience of the management in community work was considered a factor in determining how invested they may become in the work.

4.2.2   Building trust, respect and inclusivity

In several focus groups and interviews, the importance of trust between different VCFS organisations and LCC Public Health was highlighted as a key facilitator to working across sectors:

> "I really do believe a lot of this is about relationships, because you have to build the trust. And I think I've managed to build that trust with [the] partners in ONE Lancashire, because until you build the trust, then you can't move forward, can you?" (LCC Public Health)

This was tempered by an acknowledgement that key staff turnover remains high, so it is not sufficient to develop trust between individuals: trust founded on honesty, transparency and mutual respect needs to be developed between and embedded within departments and organisations also.

The umbrella Lancashire bodies were understood to have played a pivotal role in developing this trust with local VCFS organisations:

> "[The Council] haven't got the capacity and the time to build that relationship and trust with people. And that's why we have to rely on the infrastructure to do that for us. It's so important that we have that strong infrastructure, which is Third Sector Lancashire and ONE Lancashire…to be that role…for us" (LCC Public Health)

The need for inclusivity, to support and harness the work of the full range of VCFS organisations was stressed, appreciating that the sectors were made up of many different types and sizes of organisation, which interact with statutory public services in diverse ways. This is particularly important in relation to small VCFS organisations, which may not have the staff or capacity to take on all the tasks that larger organisations can in their interactions with the statutory sector and therefore may require more assistance.

4.2.3   The Living Well, Living Better programme

Both of the Living Well, Living Better pilot projects (see Boxes 1 and 2) gave examples of how participation in the programme had facilitated progress. They highlighted the importance of building and sustaining working relationships between agencies in localities, be it by forming partnership

groups through the programme or by investing in multi-agency working as a key focus in public service reform:

> "We've done some recent work on a multi-agency group that we've got looking at supporting adults, and…we did a piece of work looking at the levels of interventions, a lot of it came from third sector, either as commissioned services or from grassroots clubs and support that's out there." (Living Well, Living Better Pilots)

The Living Well, Living Better programme was thus seen as a temporary opportunity to reconnect organisations that had become estranged due to funding cuts and restructuring in the sector:

> "We're in the luxurious position of being able to make those connections at the moment and…link A to B and B to C and all of them into here, which has…probably been missing for a little while." (Living Well, Living Better Pilots)

Both pilots were keen to emphasise working with assets already present in their localities and strengthening and building on relationships that already exist.

4.3 KEY CHALLENGES FOR EFFECTIVE CROSS-SECTOR WORKING

Alongside these facilitators, those interviewed highlighted a number of key challenges that need to be addressed to ensure effective cross-sector working.

- Networks – reduction and lack of capacity
- Lack of connectivity and equitability between organisations
- Tensions and differences between large and small organisations
- Lack of leadership and 'voice' for the VCFS
- Distrust in motivations for community mobilisation
- Increase in burden and risk

4.3.1 Networks – reduction and lack of capacity

As already highlighted, budgetary constraints have undeniably impacted on the VCFS and the public sector in a number of ways – a key area being networking. One challenge highlighted was the reduction in the number of cross-sector networks still in operation:

> "The old community networks [such as the Community Empowerment Network] that were around in the days of local strategic partnerships, there was extra money in certain areas, areas of greatest need…those were very effective, but, obviously, that's gone, and with it has gone…all the infrastructure that's supported that." (Living Well, Living Better Pilots)

A second challenge related to organisations being limited in their capacity to free up staff and volunteers to participate in networking activities with other congruent organisations that still exist. In essence, it was argued that these networks were of enormous strategic value, but the resources are not available from the key stakeholders to make best use of them.

4.3.2 Lack of connectivity and equitability between organisations

Whilst appreciating the increased legislative requirements relating to data protection, there was concern that data are not being adequately shared either within or between sectors. Within the VCFS, there was a sense that different organisations are not talking to each other and that connections are not being maximised:

"There are three types of voluntary sector organisations, the ones that deal with crisis[14]; population, so that's, so things like your sport clubs; and also, the faith organisations. And I think the connectivity across the three is very poor." (Third Sector Lancashire)

With the decline in staffing and service provision from public sector bodies, there was a sense from VCFS respondents that such organisations are being funded in an attempt to cover missing provision:

"The model at the moment really within local government is…invite those crisis organisations…into the space, which is being vacated by public services…It's the crisis ones who are generally mobilised to do that, interestingly, not the population ones or the faith ones…because I think there's a recognition that they don't have the skills and experience to actually go in there, and they can't pick it up fast enough." (Third Sector Lancashire)

It was argued that this was a politically motivated move, with LCC's current administration furthering the government austerity programme, transferring a particular part of the voluntary sector into a now vacant space.

4.3.3 Tensions and differences between large and small organisations

Locally, there was a perception that public sector and commissioning bodies prefer to work with a small number of larger organisations that are already known to them:

"[Commissioners are] looking for the easiest way to commission…[they] don't understand how to invest in community assets down here…these small voluntary sector organisations." (Third Sector Lancashire)

This situation was exacerbated by a lack of understanding from the VCFS about how to demonstrate to commissioners other options outside of mainstream referrals and interventions:

"VCFS organisations are not aware of the broader ELCCG commissioning process and how to engage with it i.e. not social prescribing." (Living Well, Living Better Pilots)

Some respondents felt that this behaviour generally results in less innovative social prescribing, with patients being referred to established VCFS organisations and funding was not filtering down to the smaller VCFS organisations smaller organisations. This focus on channelling funding into larger organisations was mirrored to an extent by the funding of organisations like ONE Lancashire:

"Their preferred model is to work with one larger organisation…it's an issue at the County, and that's why they really are behind ONE Lancashire, is it's just so much easier for commissioners…to work with one or two big partnerships…But in the meantime, how do you get back to the grassroots?" (Living Well, Living Better Pilots)

Additionally, there were comments made about the VCFS only being considered from some areas of the statutory sector at the end of the process, rather than at earlier planning stages, again leading to inclusion of larger infrastructure organisations with which a relationship is already established:

"I think there's still quite a lot of tokenism about setting up a group, this is from the statutory sector side, and going, 'oh, we need somebody from the voluntary community faith sector…who should it be?', tending to go to an infrastructure organisation, like [a] CVS or ONE Lancashire." (Living Well, Living Better Pilots)

Part of the challenge of funding in the VCFS is that councils for voluntary service (CVS) in different localities across Lancashire are actually in competition with smaller VCFS organisations for the same funding:

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[14] VCFS Crisis organisations include those that may seek or win contracts / commissions / service tenders which are generally fixed term and target driven – e.g. hospital discharge service provided by Age UK.

"Because of the natures of CVSs…they become organisations in their own right that need to bring in their own funds. So, what happens generally, is they become in competition with other local groups." (Living Well, Living Better Pilots)

4.3.4 Lack of leadership and 'voice' for the VCFS

It was argued that there is currently a crisis of leadership and governance in the VCFS:

"We're actually short of voluntary sector leaders, who've actually got the capacity and the appropriate skills." (Third Sector Lancashire)

Despite a key mission of Third Sector Lancashire was to be the voice of the VCFS, respondents from the public sector felt that this wasn't so clear in practice:

"That sort of representational perspective…that's quite problematic in Lancashire because no one knows who speaks on behalf of the third sector…I think we've had…quite a lot of competition from different groups setting up, but nobody engages wider from those groups… I think that is the biggest issue with the third sector." (Living Well, Living Better Pilots)

Although ONE Lancashire and Third Sector Lancashire were widely valued, there was concern that their Lancashire wide remit mitigated against them having adequate knowledge of the issues close to the ground and being in a strong position to support the needs of local VCFS bodies. This challenge is perhaps demonstrated by an example given of a lapsed infrastructure organisation, where there was a perceived lack of commitment from the VCFS regarding networking meetings with council partners:

"We used to have a great forum: Volunteer Lancashire. However, although people attended there was no commitment from others to help beyond the basic attendance. In the end I pulled out and unfortunately the group folded. It sometimes feels from a public sector [perspective that] we give a lot in time, money and energy and this isn't always reciprocated." (Lancashire Volunteer Partnership)

Clearly, in this example, the VCFS appears to lack the coherent leadership required to take co-ownership of such a network in a way that removes organisational burden from LCC. Both Third Sector Lancashire and ONE Lancashire were aware of these issues and respondents from each emphasised that the proposed restructuring (with the incorporation of Third Sector Lancashire into ONE Lancashire which has now occured) is intended in part to address concerns and shortcomings and to more clearly represent the VCFS so that networks such as that described in the above example are more sustainable.

4.3.5 Distrust in motivations for community mobilisation

As highlighted in Section 4.1.3, there was a strong sense that VCFS organisations were suspicious of the motivations underlying the public sector's drive to mobilise communities and their assets:

"Because we're talking about assets a lot…so that people can look after themselves more and aren't as reliant on public services, I think they think we're trying to get something for nothing…we're expecting them to fill the gaps of services that are being reduced." (LCC Public Health)

Respondents understood this suspicion, recognising that – whilst driven by a genuine commitment to harnessing and releasing assets – community mobilisation was in part a by-product of austerity and funding shortfalls within local government and encouraging the community to do work that would previously have been organised by the LCC:

"If we were…to try and build this social capital in communities at probably a wealthier time, there'd be less criticism …but they just think we're looking at it because we're pulling services out." (LCC Public Health)

4.3.6   Increase in burden and risk

Linked to this, key members of the pilot project teams discussed the increased pressure and burden being laid on small VCFS organisations to deliver, specifically in difficult areas that would have traditionally been picked up by the public sector:

> "Universal services are disappearing and it's the higher needs that are being able to access statutory services. Well where are all the others going? Well guess where? They're going to voluntary, community, faith sector." (Living Well, Living Better Pilots)

An example was given of one local VCFS organisation that was struggling to cope with this additional burden due to lack of skills and resources:

> "They're not really equipped …They're very happy to do what they do but they are a bit of a dumping ground for what would have been picked up by statutory services and there isn't that there now." (Living Well, Living Better Pilots)

Coupled with this increased pressure, there was concern that some VCFS organisations might be putting staff and service users at risk through trying to respond to the needs of vulnerable people without adequate safeguarding and training.

4.4   CASE STUDIES FROM PILOT SITES

4.4.1 Pilot Site Case Study: Chorley

Chorley Council took a primarily strategic approach to Living Well Living Better, focusing on service reform and appointing a Public Sector Reform Programme Officer to project manage the pilot. The council's aim has been to embed the Lancashire Wellbeing Service[15] across all areas of delivery, whilst targeting services for vulnerable residents by developing a number of initiatives. The aim was to work towards sustainable outcomes, transforming public services and increasing data and information sharing between agencies. This has been achieved through co-located integrated action teams, including a varied range of stakeholders from local agencies (including Lancashire Fire and Rescue Service; Citizen's Advice, and Chorley Council). This way of working was not established with TCA funding, but rather built on existing relationships between key agencies in the area. This was seen as a locality-specific strength that contrasted with some other local authorities:

> "Chorley [Council] has always had a very close working relationship with the voluntary sector."

This suggests that such an approach was greatly facilitated by a pre-existing ethos of cross-agency collaboration, with networking opportunities such as the Voluntary and Community Faith Sector Network already being well-established in the locality.

One of the positive factors regarding multi-agency working has been that frontline officers have carried out the work as part of their specific roles, rather than being specifically funded to do Living Well, Living Better work with vulnerable people. The funding has therefore been a long-term investment aimed at developing and further connecting multi-agency working in the locality through dedicated staff in the council and the creation of networking opportunities:

> "One of the most successful things over the past two years has just been people learning about what each other do and services that are available in the community that we didn't necessarily know about…I still think there's…a huge way to go there, but people just…making those connections has been one of the best things. That it's giving us that time and space…to learn that about each other and to get that intelligence."

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[15]   A targeted service aimed to support adults, families and carers who are understood to have long term health conditions, low-level emotional health ad with lifestyle or social issues.
http://www.lancashirewellbeing.co.uk

Alongside this focus on a multi-agency approach, they offer an annual 'small grants pot' to organisations.

As part of the Living Well, Living Better pilot, Chorley Council conducted their own evaluation into their public service reforms[16] and their main finding was around the need to strengthen existing networks, post-TCA funding:

> "How do we utilise those more or how do we look at where the gaps are?... What can we do to build up new projects to address those gaps? And some of those gaps we're finding in the work that we're doing with vulnerable people. And it's just about, is there something out there, and there usually is, it's just trying to find it and make that connection."

4.4.2 Pilot Site Case Study: Rossendale

Rossendale Living Well Living Better pilot project was focused on how local assets can be used to reduce loneliness and isolation vulnerable members of their community. The specific areas they targeted to work with were based on bespoke data from LCC ('Hidden from View') and Age UK's nationwide 'Loneliness mapping' of the UK[17]. The Whitworth locality was designated 'very high risk' of loneliness in the 65+ age range, and Haslingden was also identified as another 'at risk' area. Both areas looked at developing neighbour networks. The Rossendale pilot focused on a 'bottom up' grassroots approach. The project manager targeted local councillors, community activists and volunteers to work out, via an appreciative enquiry, how to strengthen connections in the VCFS. The core team working on Living Well, Living Better included community engagement and partnership development workers and a community development worker from Spice.

The project has been implemented through a series of interventions and community scoping events, focusing on issues such as transport and communication. As a consequence of Living Well, Living Better, one of the community engagement and partnership development workers is leading a partnership group that has been formed to look at volunteering within Rossendale. After consultation and conversations with local residents, Rossendale Living Well, Living Better was concerned with a lack of inclusivity within a few local VCFS organisations: in particular, that lonely and isolated people are not using them because some are perceived to be cliques. The team developed a charter and spoke to organisations about the initial impressions new participants might have. They also sought to improve the inclusivity of the VCFS with a rolling 'small grants' model: inviting local small VCFS organisations to apply, via a straightforward process, for a grant of up to £1000 to tackle loneliness and isolation. This was used as a 'door opener' to enable members of the Living Well, Living Better team to access organisations, enabling them to give advice and steering to the groups:

> "We realised there were some groups that, without realising it, were perhaps not as welcoming to new people as they might be. So [the project lead] came up with a…really simple 'warm welcome' charter: have somebody nominated who you come in to…and to…show people around."

The development worker also discovered that an overly directive approach towards health and wellbeing improvement was hindering engagement with certain VCFS groups:

> "It's trying to get people connected but in an informal way. Interestingly, when they tried to do too much, they got a real kickback from the people that attended the sessions…saying…'this is supposed to be a social event and you're lecturing us all the time'."

This resulted in the team shifting their original approach of arranging guest talks within sessions to a more discrete approach, using the facilities to make available leaflets and pertinent information.

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[16] Chorley Public Service Reform Partnership: Evaluation of Year 2 Final Report January 2017-October 2017.
[17] http://data.ageuk.org.uk/loneliness-maps/england-2016/rossendale/

The view of the team was that long-term sustainability beyond the LWLB pilot period will require additional long-term core funding:

> "[Living Well Living Better is] a short term fix…And whatever happens after that, it will be a three year Lottery Bid or it will be [another fixed-term project], so it will be a gradual limp forward. I can't see anybody, the local authority or anyone else, Lancashire County Council, being able to actually embrace it and fund it."

The intention is therefore to equip key VCFS groups with the ability and confidence to bid for large-scale funding. And identify local organisations willing to pick up pieces of the work relevant to their core purpose and take that forward.

5.   FINDINGS: CHARACTERISTICS OF EFFECTIVE CROSS-SECTOR WORKING – PRIORITIES FOR THE FUTURE

In the 'future focus' stage of the study, participants were asked to consider what works in cross-sector working between the VCFS and LCC, as well as being asked specifically what they believed the key priorities to be from their organisation's perspective. Drawing on perspectives from these interviews and focus groups, and from the wider data, the following seven themes emerged as key characteristics considered to be important in framing future cross-sector working:

- An equitable and joined-up approach
- A collaborative and strategic approach to funding
- A focus on enhancing connectivity and sharing data
- A shift to intelligence-led commissioning that fosters innovation
- A supportive and coherent infrastructure
- An investment in networking and training
- A commitment to monitoring and evaluation

5.1   AN EQUITABLE AND JOINED-UP APPROACH

It was felt that resource constraints and other challenges have resulted in the relationship between the public sector and the VCFS feeling more distant and less productive than it had previously:

> "It hasn't felt like a partnership with the public sector over the past four or five years. And what would help that, is what we said at the beginning really, it's about a proper collaboration, to sit down around the table." (ONE Lancashire)

There were thus calls for stronger leadership to ensure that the VCFS has a more prominent role within partnerships and is built into programme designs from earlier stages:

> "VCFS organisations [need to] become an equal player around the table, as opposed to just being…'the nice to have extra' that sits on the periphery. And…I think we still need to do a lot more work …[so] that they are at the beginning, not…'oh we've tried everything else, now is there anyone in the voluntary sector that could come and help with this?'" (Living Well, Living Better Pilots)

This focus on shifting the balance of power, so that there is a more equitable relationship between sectors, was understood to be key in looking to the future. However, there was some doubt about whether public sector organisations were serious in their intent to support such a shift and co-create a new collaborative approach to cross-sector working:

> "There's no acknowledgement that there might be a new model, which is an alliance between the voluntary sector and public services." (Third Sector Lancashire)

This concern has led for calls for a cultural shift in the relationship between the key stakeholders, with collaboration being the 'first principle' rather than an afterthought.

> "We've got to change this cultural dynamic and it's got to be an effective sustainable partnership with the voluntary sector, which is about co-design first, then co-commissioning and co-delivery. It's not got to be, 'oh we can palm off the costs and the risks, you know, to the voluntary sector'. This is about joined-up services and meeting the needs of our customers, and that's the key dynamic that needs to change for me." (Third Sector Lancashire)

A joined-up approach was clearly understood to be the most effective in tackling health and wellbeing issues in local communities. However, in many cases, this was something referred to in a historic sense, a way of working that needed to be returned to rather than current practice:

> "I think it's incumbent on us all to make sure those connections are made, you know. Like if county is feeling a little bit disconnected and dispersed, then what can we do to help them to become a little bit more connected…We can't keep moaning about the fact that they're not connected and then missing opportunities." (ONE Lancashire)

Despite these current difficulties in connecting between organisations, the Countrywide Infrastructure Support Programme (CISP)[18] was given as exemplar of good practice, with LCC Public Health meeting with ONE Lancashire to create a shared plan and objectives across organisations.

5.2   A COLLABORATIVE, STRATEGIC AND SUSTAINABLE APPROACH TO FUNDING

One of the main barriers in relation to organisations working together is that funding is essentially siloed: grants available are so specifically geared to different organisations, it actually limits the potential for collaboration. To move forward, a cross-sector leadership focus on funding needs was suggested, with LCC (and other bodies) and the VCFS working together to look beyond the traditional resourcing role of the public sector and placing a greater emphasis on working across sectors to secure income from multiple sources:

> "I would like to see everybody targeting resources, as they become more scarce…there's a vast array of grant aid that could be brought into the sector. But targeted specifically, on meeting the greatest need. And that's not done at the moment because County Council maintain this elevated position of the benefactor for the sector, and they need to start being more of a partner with the sector." (ONE Lancashire)

ONE Lancashire has been able to bring in £9.2 million of Big Lottery Fund/EU European Structural and Investment Funds for local VCFS organisations. So, clearly it is possible and worthwhile for prioritising seeking external funding and allocation capacity for key staff to ensure this work continues.

If the sector is going to be more sustainable, then it was argued that it needs to be more accountable concerning funding:

> "[The council] give out funding and part of that should be sustainability… however when the funding ceases the sector panics then around sustainability. So they're back into that circle, looking for more funding to sustain them." (Lancashire Volunteer Partnership)

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[18]   A programme funded by LCC aimed ensuring sustainability and offering support to voluntary, community, faith and social enterprise (VCFSE) bodies in Lancashire.

It was suggested that one way this could be addressed is to challenge the traditional model of funding, so that more of the payments that currently go to the statutory sector are redirected to the VCFS:

> "Instead of paying non-executive directors on these boards in the NHS structures, etc., a remuneration, they should be there paying that back to an organisation, where that officer is being released. So they can backfill…so that organisation doesn't suffer. It's a model that they should be considering." (Third Sector Lancashire)

Furthermore, it was argued that the VCFS needs to take more from the social enterprise model, thereby increasing the likelihood of services being sustainable long-term:

> "The voluntary sector's being asked to move into the space, which was previously occupied by public services. It finds it very difficult to transition across to becoming and recognising that it could be a paid for service. And it still seeks to provide it at no cost or low cost…there's a real question mark about quality and without quality there's lack of sustainability. And that bit the voluntary sector just hasn't got its head round it. It just says, 'oh, shall we do this for free? We've just got to use volunteers'. That's fine but if one of those volunteers doesn't turn up or they're sick or they decide to go and get a job or die, the whole thing just falls over." (Third Sector Lancashire)

5.3   A FOCUS ON ENHANCING CONNECTIVITY AND SHARING DATA

It was argued that a cultural shift is required so that data is captured in a smarter way and intelligence is used more effectively across sectoral boundaries:

> "County don't make best use of the intelligence that's already there, not just from partners like the voluntary sector, but their own officers sometimes. They're…not asked whether this feels right to do. And I think…culturally, that needs to change. For this programme to work, I think they're going to have to get to grips with how they consult, how they capture data from programmes." (ONE Lancashire)

One of the issues that organisations struggle to bypass is being too protective over data and not fully disseminating the value of their work to others:

> "We are one of the worst for collating our social value, our impact on knowledge and intelligence, we are the worst at…sharing it. We like to protect it because, ultimately, it could have a monetary value to the sector that is very, very under resourced." (ONE Lancashire)

5.4   A SHIFT TO INTELLIGENCE-LED COMMISSIONING THAT FOSTERS INNOVATION

Echoing reflective comments made in Section 4.3.3 concerning allocation of resources to larger organisations, it was argued that current commissioning protocols are too rigid and risk-averse, and that both LCC and the CCGs needed to be more creative in their funding choices:

> "They're mitigating the risk around…the accountability of public money. But what they're doing at the same time, they're stifling innovation."(Lancashire Volunteer Partnership)

In order to make this shift and foster innovation more widely, it was suggested that the CCGs and LCC Public Health need to gain a better understanding of local needs and assets in specific localities, in order to make informed choices, target appropriate areas for funding and avoid duplication. This echoed concerns about the need for improved data sharing and was an area in which the Living Well, Living Better Pilot Projects felt they had made real progress:

> "You can't commission until you really know what's out there. And I think understanding what's out there has been a really big part of what we've done, not just for us, but for other organisations and other voluntary sector organisations." (Living Well, Living Better Pilots)

The importance of being able to adapt and respond to the development of the VCFS was stated: a conscious avoidance of falling into cliques or established relationships and patterns of working that make it difficult for new VCFS organisations to join the existing network:

> "We want [ONE Lancashire] to be more responsive to changes in the community. So not just carry on working with the same community groups…we're looking at some asset transfer of some community buildings, can they get involved in that? So they react to meet needs, rather than just business as usual, if you will." (LCC Public Health)

5.5   A CONSISTENT, COHERENT AND SUPPORTIVE INFRASTRUCTURE

There were concerns that some CsVS are so focused on sustaining their own infrastructure funding that their focus has shifted away from supporting and, where appropriate, providing leadership to grassroots organisations. Alongside this, respondents commented that CVS coverage is uneven across the region, a situation which was understood to be exacerbated by Lancashire's local authority set-up, with the existence of two unitary authorities adding an additional layer of complexity for cross-sector working:

> "CVS coverage across the county is hit and miss, the equality bit of the service isn't there and I'm not convinced that they truly represent the sector. In the East of the county, the CVS appears to be well set up, managed and run yet in Preston due to withdrawal of funding there is no CVS, so how can CVS say it represents the sector?" (Lancashire Volunteer Partnership)

Interview and focus group participants highlighted the importance of there being individuals who are visible within localities, dedicated to enhancing communication and strengthening partnerships, and seen as the 'go to' person to connect organisations and groups within the sometimes disparate VCFS. A variety of phrases were used to describe these locality-based individuals, most frequently 'community connectors', 'community co-ordinators' or 'community developers'. For those working in the Living Well, Living Better pilot localities, these were seen as an inexpensive, valuable and cost-effective option:

> "There's a lot of focus around trying to…really understand somebody's needs, give them a holistic approach and really support all the elements. But if you don't really have a coordinator in there or a point of contact or a key worker that can help all that and get them to a steady point, if you just go in and say, here's a load of agencies that can help you, off you go, it will just not work and people will keep coming through at the more higher end cost level and in acute complex crisis needs." (Living Well, Living Better Pilots)

> "For very little money, you can have somebody… in the community…which is not rocket science …as you're getting round and meeting people and joining the dots." (Living Well, Living Better Pilots)

Interestingly, a similar role was also described from Lancashire Volunteer Partnership's perspective, but with a concern that such a dedicated role is unrealistic in the current financial climate:

> "If everybody had a partnership/communication/marketing type person, who would be responsible for going out and remapping…what's still out there…[that] would be the icing on the cake. However, I don't think that's reality." (Lancashire Volunteer Partnership)

5.6   AN INVESTMENT IN NETWORKING AND TRAINING

Echoed across several of the key stakeholders' interviews and focus groups was the idea that more sharing and co-operation is needed both within the VCFS and with the public sector:

> "What we're looking to do, moving forward, is do that better: share best practice better, work together better, but still meet and identify local needs [across] the different areas across Lancashire." (LCC Public Health)

One of the key questions was how to build capacity in order for this to occur, and some felt that this required network development (or in some cases, network re-building):

> "I did have really good voluntary sector contacts, however some of them now I haven't spoken to for years. Now that's as much my problem as it is theirs, but it's time and workloads…if you had a focus, so you'd got everybody together, then possibly, yes, that could work better because those networks have definitely been lost." (Lancashire Volunteering Partnership)

An issue with networking is that volunteers and key staff would need to be freed up to attend meetings, which is challenging in the current financial climate:

> "LCC's…not got the capacity to be able to reach real grassroots organisations and communities. I think networking events do work as it keeps people connected, however public services haven't got the money to fund such events now." (Lancashire Volunteering Partnership)

Acknowledging that resource pressures were likely to make investment in networking a continuing challenge, it was suggested that a rethink in how to approach training was required. Mechanisms for sharing resources, perhaps making greater use of websites and online presence, were identified as a gap in the current set-up, and one which if filled could help free up or build capacity be reducing travel and increasing flexibility.

Linking retired people to their local VCFS organisations so that they could provide and help transfer valuable skills (e.g. financial) was suggested as another way of being smarter with local assets.

It was argued that VCFS organisations needed to allocate time for vital training. There was a degree of frustration concerning an inequitable level of access to training and development between the VCFS and other statutory and public services. This resulted in roles being filled by those who had better access to training, rather than the local individuals who would be better suited but are prevented from accessing appropriate training:

> "Even if you had people committed and motivated…they should really [pay] for that skills transition for those individuals because…those boards and committee structures are going to benefit with an enrichment of that individual's leadership skills and understanding." (Third Sector Lancashire)

5.7 A COMMITMENT TO MONITORING AND EVALUATION

It was acknowledged that, whilst monitoring and assessment are routinely built into individual projects and programmes, evaluation hasn't been conducted to demonstrate the effectiveness or efficiency of cross-sector working and inform future work. It was argued that this can only be measured meaningfully if there is clarity about goals and intended results:

> "The effectiveness has to be measured in the outcome. So then one needs an outcome at the start of the process. *Why* are you doing it, you've got to really focus on…We're saying that we want this sort of better engagement, better consultation… Why do we need that? That gives us our outcomes and then we get our results." (ONE Lancashire)

It was suggested that monitoring referral information and see how much of an influence organisations from the VCFS have had in particular cases (e.g. to prevent individuals telephoning the police or visiting A&E unnecessarily). Further examples given included being able to evidence a reduction in duplication of work, which is only possible though sharing resources and knowledge.

6. CONCLUSION

This report has presented findings from a study exploring opportunities to enhance the effectiveness and sustainability of cross-sector working and maximise the potential of the VCFS in building resilience and wellbeing. This formed part of LCC's Living Well, Living Better Programme and was informed by learning from pilot work conducted in Rossendale West and Chorley Central. Prioritising a co-creative and co-productive approach, the study used reflective and future-focused interviews and focus groups with individuals from LCC Public Health and key VCFS bodies operating at the strategic Lancashire level.

Reflecting on the current relationship between the VCFS and the public sector, stakeholders identified four key themes: the complexity of and a lack of clarity regarding the current model; the state of organisational flux, with seemingly constant restructuring and staff changes; the shifting funding landscape, with resource constraints highlighting the need for transparency and meaningful consultation; and the importance of harnessing assets, sharing information and building resilience. They went on to highlight four key facilitators for effective cross-sector working between LCC and VCFS: valuing and combining 'bottom-up' and 'top down' approaches; building trust, honesty and mutual respect between individuals and organisations; recognising and valuing diversity of organisations and approaches; and the Living Well, Living Better programme itself. Alongside these facilitators, they suggested that a number of key challenges need to be addressed to ensure effective cross-sector working: the reduction in funded networks to enable peer support and partnership development within and between sectors, coupled with organisations' lack of capacity to release staff to participate in such networks; a lack of connectivity between organisations and an inequitable model of engaging with the VCFS; tensions between larger (often infrastructure) organisations and smaller VCFS organisations, exacerbated by a tendency of public sector bodies to commission the former; a lack of coherent leadership and meaningful 'voice' for the VCFS; distrust of the public sector's motivations for focusing on asset-based community mobilisation; and a perceived increase in burden and risk across VCFS organisations.

Looking to the future, those interviewed discussed seven key characteristics considered to be important in framing future cross-sector working:

- an equitable and joined-up approach, involving strong leadership and a cultural shift such evidenced by genuine commitment to co-production throughout the partnership journey
- a collaborative, strategic and sustainable approach to funding, working across boundaries to challenge siloed approaches and secure income from multiple sources
- a focus on enhancing connectivity, so that data is captured in a smarter way and intelligence is used more effectively across sectoral boundaries
- a shift to intelligence-led commissioning that is adaptive and responsive, and fosters innovation and creativity
- a consistent, coherent infrastructure that supports and provides leadership to grassroots organisations across Lancashire
- an investment in networking and training that can enhance co-operative working, sharing of best practice and capacity-building
- a commitment to monitoring and evaluation in order to demonstrate the effectiveness and efficiency of cross-sector working and inform future work.

7.   STRATEGIC FRAMEWORK

Interview and focus group participants from both LCC and the VCFS suggested that in order to enhance the effectiveness of cross-sector working, it would be helpful to have a strategic framework, which is accessible to and owned by multiple stakeholders.

In the spirit of co-creation, the following outline framework is informed by the research data and is presented with a view to further co-development across sectors: underpinned by a set of principles that should infuse all working practices, it sets out the seven key characteristics of effective cross-sector working that are understood to enable progress towards the overarching vision of achieving mobilised and resilient communities and improved health, wellbeing and health equity.

Outline Strategic Framework
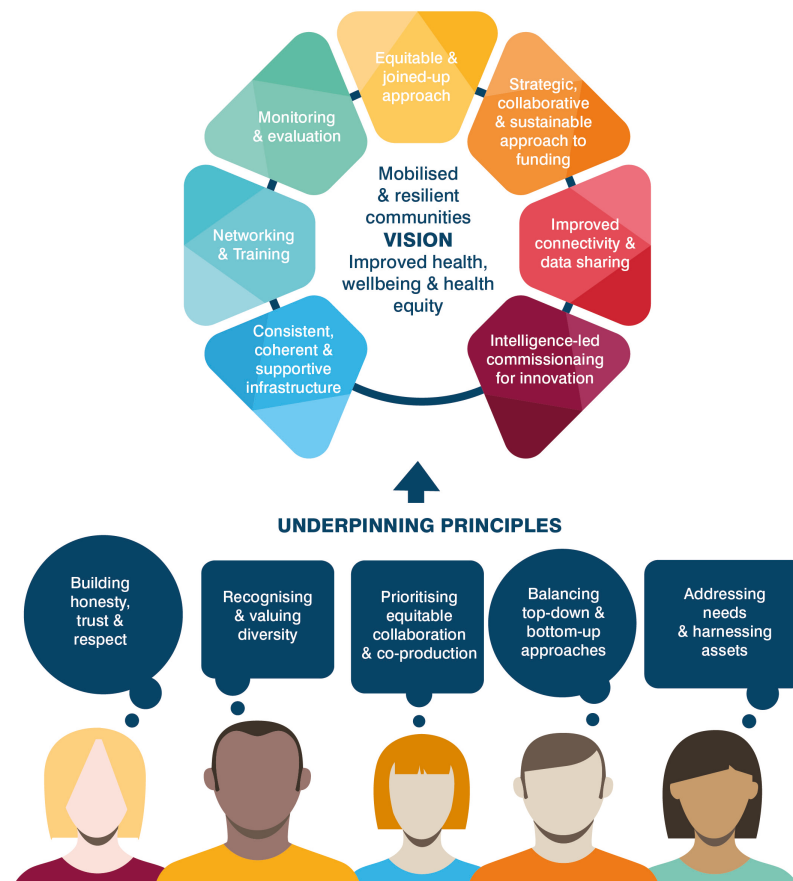
APPENDIX 1: INDICATIVE INTERVIEW/FOCUS GROUP SCHEDULES

Reflective consultation (one to one interviews, telephone and face-to-face)

[Introduce the project and specifically the 2nd step [Reflective Consultation]

Can you please explain your role in [location] / Lancashire?

How long have you been in this role? [How] has your role changed?

Could you reflect on the current relationship between the VCFS and the public sector, with regard to its role in building health, wellbeing and resilience within local communities?

…How have things changed over recent years?

…What have been the factors driving this change [probe as necessary re. community mobilisation, asset-based approaches, place-based health and care systems etc.]?

…How effective and sustainable is the current [business] model of collaboration between these sectors?

What are the key facilitators and assets in the locality/region that enable effective cross-sector working?

What are the key challenges and barriers that inhibit effective cross-sector working?

Looking ahead, what changes need to take place?

Future-focus workshop (focus groups)

[Introduce the project and specifically the 3rd step [Future Focus]

In an ideal scenario, how would we want the relationship and model of collaboration between the VCFS and public sector to look?

What is already working well and what do we already have in place to help us achieve that vision?

What isn't working well and what do we need to develop, change or add?

What capacity-building and development is needed to improve cross-sector collaboration [in this locality/across Lancashire]?

What support do we need to put in place at strategic and operational levels?

What are the key priorities?

How can we assess the effectiveness and efficiency of cross-sector working?