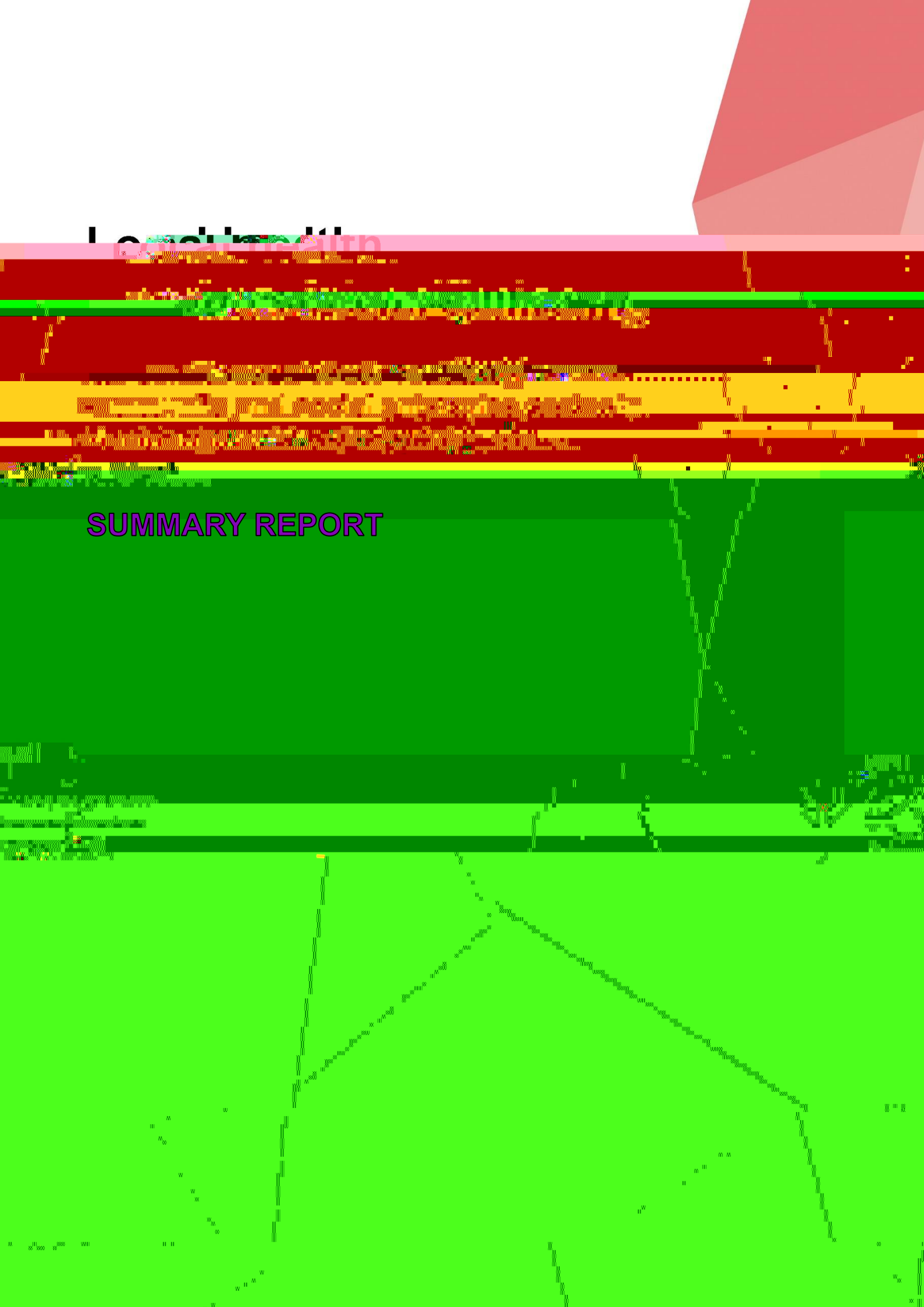


Local Health

SUMMARY REPORT



About the authors

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Acknowledgements

Third Sector Trends is a joint effort involving thousands of people and organisations. The study could not continue without the enormous amount of support it receives.

We would like to thank all the participants in the study who took the time to do the survey and to write about their experiences. Many of the people who responded will have been involved in the study for many years now. So our thanks go to them for sticking with it this far and hopefully continuing to take part in 2025.

Help to get people to respond to the survey has come from many local infrastructure organisations, community foundations and grant-making trusts across the country by sending invitations to their lists of members or grantees, putting stories in their newsletters or promoting the study via

1 Purpose of the report

The local voluntary, community and social enterprise sector (VCSE) is a 'home grown' resource, formed of many organisations and groups which were set up to tackle a wide range of local soci527fD 5/L.rg0.184 0.329 0.588 RG[)JTJET&MC /Span #MC

2 Summary of key findings

Sector size and structure

volunteers at the national living wage would be £115 million, and at 80 per cent of average local wages: £224.9 million.

Most VCSE organisations in

- About a third of the sector is optimistic about income increasing in the next two years. This is quite consistent amongst statistical neighbours (34% - the national average is 33%).
- Private sector support is provided to about a quarter of VCSE organisations in Buckinghamshire, Oxfordshire and Berkshire West (24% - the national average is 25%).
- Grants from trusts and foundations: a quarter of VCSE organisations believe that grant income will increase (26% - the national average is 32%).
- Expectations about support from volunteers are high: a third of organisations in the area expect this to happen (31% - the national average is 34%).
- A fifth of VCSE organisations in the area expect that statutory funding will increase in the next two years (21% - the national average is 23%).

Relationships and influencing

Relationships within the VCSE sector in Buckinghamshire, Oxfordshire and Berkshire West are strong. Most organisations have useful informal relationships with other organisations or groups (70%). Slightly fewer work quite closely but informally with other organisations (60%). Formal partnership working is less common (26%). The level of informal, complementary or formal partnership working in Buckinghamshire, Oxfordshire and Berkshire West is substantially lower than at national average levels (72%, 65% and 34% respectively).

About half of VCSE organisations in Buckinghamshire, Oxfordshire and Berkshire West (49%) have working relationships with the private sector: a majority of which work mainly with local firms. The benefits of working with business are varied: in the last two years, 32 per cent of VCSE organisations received money, 22 per cent got in-kind support, 15 per cent had help from employee volunteers and 18 per cent received *pro bono* expert advice. Levels of beneficial engagement with private sector business is generally lower in Buckinghamshire, Oxfordshire and Berkshire West than at the national level.

Relationships with public sector organisations are strong.

- The vast majority of VCSE organisations in the area feel valued by local public sector bodies (92

Local health and wellbeing:

- Two thirds of VCSE organisations (66%) participate in formal activities (orchestrated by, for example, local authorities, health authorities or local infrastructure organisations) which address local social and public policy priorities

Local health and wellbeing:

to deliver complex programmes of work. As is the case with smaller VCSE organisations, many big organisations were established to meet the needs of beneficiaries that had been unrecognised, neglected or ignored by the state or private sector. In this sense, they remain firmly rooted in civil society.

Small is beautiful?

Small, informal organisations have an annual income below £50,000. They rarely employ staff and tend to operate quite informally in terms of their policies and practices – they operate mainly at a local level, but not exclusively so. They are largely or completely reliant on voluntarily given time to sustain their activity. These organisations are the bedrock of the Third Sector. In Buckinghamshire, Oxfordshire and Berkshire West, there are over 2,500 registered micro organisations with income below £10,000 (33% of the whole sector) and 2,300 small VCSE organisations

Local health and wellbeing:

decisions. More often than not that desire for accountability centres on issues associated with 'value for money'.

Government expectations need to be proportionate. Of course big, ambitious, expensive social programmes which are delivered by (usually bigger) VCSE organisations should be well constructed to ensure that outcomes are achieved more or less in line with the social value they produce. But to plant equivalent expectations on modest financial investments in medium-sized VCSE organisations is usually inappropriate.

These debates were put on hold during the pandemic and funding flowed much more freely. But many funding organisations have been reviewing their strategies, including major players such as the National Lottery Community Fund, and the likelihood is that some foundations will start to tighten up funding procedures in the future. Already, a number of funding bodies and government departments are returning to the theme of how to improve the way organisations work by building their capacity, working in partnership, scaling-up and widening the range of their programmes of work, and so on. They would do well to look more closely at how ineffective many of these programmes were in the past.

It can be wearing, being stuck in the middle between the big VCSE organisations which have the capacity to do things at scale and have more power to negotiate what is required of them, and very small organisations and groups which can operate independently without need of much financial support because they rely almost wholly upon volunteers.

Criticism of medium-sized organisations, even if meant constructively, has been delivered by commentators who have an idea in mind about what the 'gold standard' should be for an effective organisation. There is an abundance of diagnostic tools to help show medium

engage with local social and public policy. They do so in the firm belief that they are already valued by local public sector organisations.

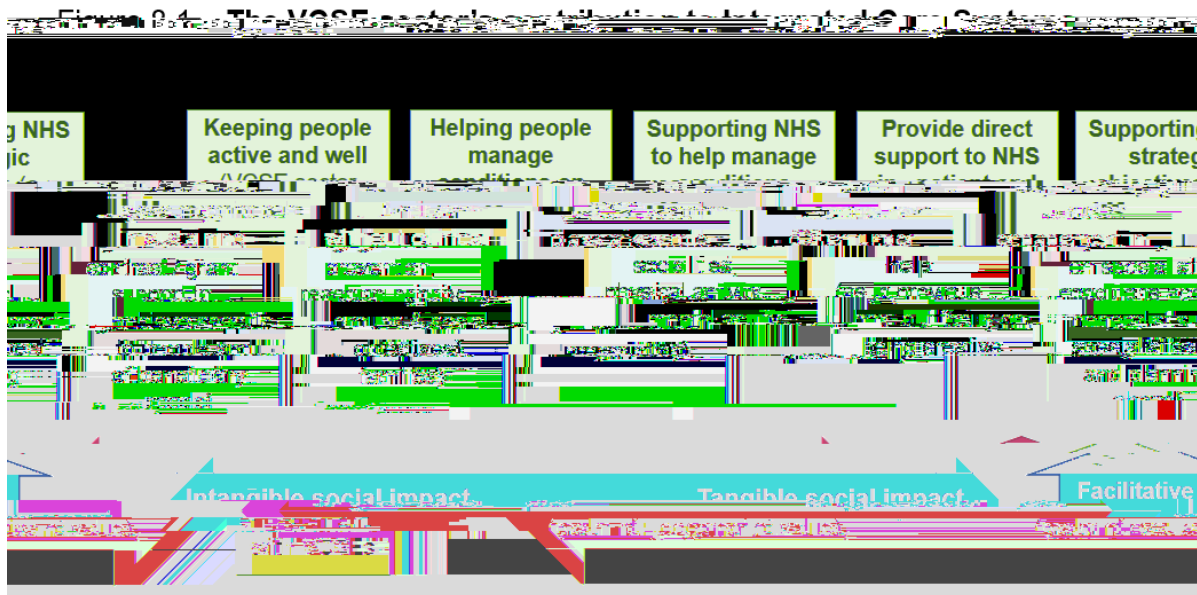
When health, public and social policy strategic initiatives are devised, emphasis is often stressed on the importance of including the VCSE sector in the definition and

and particularly so in the realm of prevention or in complementary but autonomous aspects of activity which contribute to the alleviation of health conditions.

This can be a good thing. Because it means that the VCSE sector is already finding the resources to create the energy to tackle issues on its own terms which contribute to the greater public good (see Figure 8.1). Consequently, the NHS and local authorities can learn how to value that contribution and factor it into thinking about the purpose of ICSs – but without feeling the need to take responsibility for it, or to attempt to control it.

But there is a downside to this. The VCSE does not operate with the same levels of energy in poorer areas as it does in the richest. There are about two and a half as many small organisations and groups in richer areas, by resident population numbers, as there are in the poorest areas. And, of course, more affluent areas do not have more healthy, socially engaged and confident residents – they have a lot of charities – they have more charities because they are healthier, wealthier, socially confident and engaged.

The idea of ‘unleashing’ the hidden potential of poorer or more spatially isolated areas and ‘harnessing’ that energy (as some think tanks argue, somewhat perversely) to improve social wellbeing is therefore deeply flawed. People shape their priorities differently when in poverty and living in marginalised communities that have poorer facilities and where opportunities are limited.



Next Steps

This report has laid a statistical foundation on the current strengths of the VCSE sector and the challenges it faces. Because the analysis was undertaken in comparative context, it is possible to determine where the situation of the local sector is similar to or distinctive from other areas.

Analysis at a wide area level has its shortcomings. It is not, for example, possible to get finely tuned understanding of the impact of local conditions in Buckinghamshire, Oxfordshire and Berkshire West. Consequently, the NHS BOB VCSE Health Alliance has now commissioned a second phase of qualitative research to examine the detail below the statistical headlines.

The specific focus of this work is still being developed. But now it is clear that there is a pressing need to understand local sector employment conditions. In particular, qualitative researchers intend to undertake case studies to explore challenges surrounding staff and volunteer recruitment and retention.

The research will not be limited to members of the VCSE sector, but will be expanded to consider the perspectives of public authorities – especially those working in the field of public health. This will enable researchers to offer observations and recommendations on what might be done to alleviate or manage the consequences of current labour market conditions.

Additionally, it is likely that researchers will need to look in more depth at staff and volunteer training and personal development needs – not just

Local health and wellbeing:

