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The values and value of the third sector:

Collaboration with the statutory sector
to deliver health and social care in Wales

May 2024

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EXECUTIVE SUMMARY

At a time when our health care system needs to shift from acute services to prevention and from hospital to community, the contribution of the third sector is needed more than ever.

The Bevan Commission has been an advocate of prudent health care for a decade now¹. Its latest report 'Foundations for the Future Model of Health and Care in Wales'² articulates afresh the principles and key drivers that point the way to the sustainable, equitable and integrated health care we need in Wales. This is based upon ongoing conversations with the public³ which reveal a strong desire for radical change, including more emphasis on prevention and early intervention.

Third sector organisations have always contributed to positive health and social care outcomes, by virtue of their commitment to 'public benefit'. Some of them have been actively meeting health and care needs since before our welfare state came into being (A blog 'What would Lord Beveridge say' looks back at the role of the sector over 75 years). Since 1948, different relationships with statutory services have evolved: in some cases taking the lead (as in hospice care and some emergency rescue services), in other cases delivering commissioned services or working in direct partnership with statutory health or social care partners. Many more function quite independently, yet working towards the same broad goals for health and wellbeing.



Third sector organisations have always contributed to positive health and social care outcomes, by virtue of their commitment to 'public benefit'

1 [Bevancommission.org/prudent-healthcare-the-provisional-principle2014](https://bevancommission.org/prudent-healthcare-the-provisional-principle2014)

2 [Bevancommission.org/the-future-foundations-for-the-future-model-of-health-and-care-in-Wales2024](https://bevancommission.org/the-future-foundations-for-the-future-model-of-health-and-care-in-Wales2024)

3 [Bevancommission.org/a-conversation-with-the-public-report2023](https://bevancommission.org/a-conversation-with-the-public-report2023)

Aim and method

This paper is intended as a companion to 'The values and value of volunteering – our hidden asset'⁴ – which explores the role of volunteers both within statutory and within the third sector, in relation to health and social care. Our research gave rise to rich information based on the experiences of a wide variety of organisations (from third and statutory sectors). Some of this material is being worked into an additional paper entitled 'Why the third sector matters for health and wellbeing in Wales'.



We have previously explored the statistical profile of the third sector in relation to health and care in Wales through analysis of public data sources, (this is summarised in an [infographic](#)) and our research was able to build on the insights and contacts which this generated.

The focus of this paper, therefore, is the touch points between statutory and third sectors and the potential for more effective collaboration to achieve health and care outcomes in Wales.

Focus groups and one to one interviews were held with 121 individuals. Phase 1 explored opportunities and challenges for third sector/statutory sector relationships, from different perspectives, including statutory, third sector and membership/infrastructure organisations. Phase 2 explored emerging issues to focus on three broad themes: building cross sector relationships, determining and communicating value and delivering transformational change.

Case studies were developed with 11 organisations to capture the variety of context, benefits and challenges experienced. The contribution of all those who played their part in shaping this narrative is gratefully acknowledged.

4 [Bevancommission.org/publication-4](https://bevancommission.org/publication-4) 2022

Third sector values and strengths

Third sector organisations are characterised by being agile, resilient, connected, independent, trusted and by being values-driven. The wider reach of the third sector into communities, including to marginalised and minority groups and those living with specific chronic conditions, is highlighted in this paper. Also highlighted is the 'wider benefit' – delivery which is 'above and beyond' statutory requirements or service specifications, made possible through philanthropic or other funding sources, through contributions in kind (such as volunteering) and which in general focuses on wellbeing and prevention more than on acute need.

Whilst recognising that much of the third sector has no formal relationship with the statutory sector, (yet nevertheless plays a significant role in relation to wellbeing and prevention), we identified seven ways in which third sector organisations can enrich and support mainstream services. They are:

hospital to home support, social prescribing, integrated delivery, co-production, innovation, addressing inequalities, early intervention.

These are the areas in which we feel that the third sector can make the most significant contributions to statutory sector delivery.

Collaborating for better health care - recommendations

Issues and potential solutions are explored under four headings, which are clear themes for change:

- Collaboration and co-operation
- Representation and planning
- Sustainable for the future
- Recognition, learning and innovation



The wider reach of the third sector into communities is highlighted in this paper

Concluding recommendations

In conclusion, we identified five overarching recommendations. Progress in addressing these will significantly help us to realise a health service that is fit for the future.

- 1 Ensure early and consistent dialogue between all relevant parties, to enable collaborative solutions, integrated services and ensure that all available assets and resources can be drawn upon to deliver priority outcomes.
- 2 Make use of existing third sector infrastructure and strengthen existing networks.
- 3 Protect and prioritise investment in the following areas. These are where the third sector can make the most significant contributions: social prescribing; hospital to home; early intervention; co-production; addressing inequalities; innovation; integrated delivery.
- 4 Adhere to Welsh Government's [Code of Practice For Funding The Third Sector](#).
- 5 Develop a national, 'whole system' approach to monitor service delivery by public, private and third sectors against strategic and funding priorities.



INTRODUCTION

Research for this paper, commissioned by Wales Council for Voluntary Action (WCVA) in association with the Bevan Commission, sought to identify the values and value of the third sector in supporting health and social care outcomes in Wales. It builds on work which has been previously published (including 'The values and value of volunteering – our hidden asset'⁵ and an infographic based on available data sources).

Whilst acknowledging that the third sector supports a broad spectrum of health and social care activities in Wales, this paper focuses on the 'touch-points' between the third sector and statutory service delivery and explores the issue through the lens of statutory sector duty, responsibility and opportunity for collaboration.

Our current context is one of immense demands and untenable services. The Bevan Commission aims to challenge, change and champion thinking and practice to ensure sustainable health and care that is fit for the future. This is underpinned by the four prudent principles of healthcare⁶ - as depicted in Figure 1.



5 [Bevancommission.org/publication-4](https://bevancommission.org/publication-4) 2022

6 [Bevancommission.org/a-prudent-approach-to-health-prudent-health-principles](https://bevancommission.org/a-prudent-approach-to-health-prudent-health-principles) 2015

This paper contributes to that call for new thinking. It articulates the diverse ways in which Wales's third sector currently supports health and social care delivery and the vital wider impact and benefit of this to citizens and communities across Wales. It informs the future role that the third sector can play in supporting health and social care in Wales, given the acute challenges that all sectors face, and identifies opportunities for more effective cross sector collaboration.



WCVA has received three-year funding from Welsh Government to develop a Health and Care Project for the third sector. Over three years it will seek to effectively mobilise relationships, volunteering and support across the health and care system to address priority challenges and maximise the recognised contribution of third sector organisations and volunteers towards health and social care outcomes.

Figure 1 The four prudent principles



SECTION

01

STRATEGIC CONTEXT

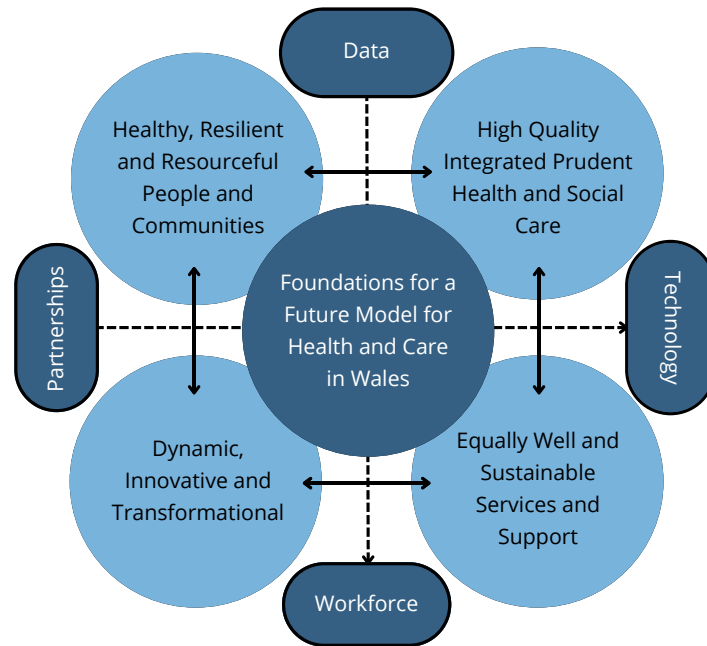
Health care in Wales, as provided by the NHS, is under acute pressure and the present position is unsustainable. Technological advancements allow us to effectively address many aspects of ill health. They also raise public expectations and improve longevity. The result is an ever increasing demand for services, especially in relation to chronic conditions and morbidity associated with later life. More than one in three people in Wales is forecast to have a major illness by 2040; and the number is increasing faster than the number of people of working age.

Effective care can prevent the need for referral to statutory health services, or speed up discharge from in-patient health care to independent or supported living.

This is a complex ecology which comprises the statutory, third and private sectors; each undertaking both strategic and operational roles through delivering and planning services. The position of the public, as service users, is important both through their expectations of treatment and lifestyle approaches which affect demand for health services.

There is a cross-sector obligation to work collectively to reform and transform services, working innovatively to maximise the resources that are available to support the nation's health and care. This requires a move from a traditional medical model to one that is focused on wellbeing, creating an Equally Well Wales.

Figure 2 Foundations for the future model of a sustainable health and care service for an equally well Wales



Four 'Foundations for the Future Model of Health and Care in Wales', described by the Bevan Commission, are shown in Figure 2. To achieve these goals, attention must be paid to four identified drivers:

- **Partnerships:** Cooperation and collaboration, not competition, is needed alongside a willingness to share learning and adapt and adopt new ideas together.
- **Data:** The effective use of data will be critical to ensure we make use of all the resources we have available in the most efficient way, targeting especially those in greatest need.
- **Technology:** Technology will be key to ensure we empower and engage people in their own health and to support professionals in achieving the most prudent systems and solutions.
- **Workforce:** It will be critical to develop a workforce including professionals, patients and the third sector, with the flexible skills and competencies to address future needs, building upon all the above.

To the latter we might also add 'volunteers' (who are active within both statutory and third sector contexts).

SECTION

02

THE THIRD SECTOR WITHIN A CROSS-SECTOR ECOLOGY OF HEALTH AND CARE

The health and care ecology comprises organisations from across the statutory, private and third sector, along with unpaid carers and citizens.

Organisations within this ecology play differing yet interdependent roles, providing support for the wider population.

The third sector is a diverse range of organisations that share a set of values and characteristics. It operates on a not-for-profit basis and is independent of government. Organisations are established voluntarily by individuals, motivated by social, economic, or cultural purposes. It is widely recognised that third sector organisations exist to deliver social change and/or public benefit (this being a requirement of charitable status). While registered charities operate within the third sector, there are many other types of organisations including community associations, self-help groups, voluntary organisations, faith-based organisations, social enterprises, community businesses, housing associations, development trusts, co-operatives and mutual aid organisations.

The diagram below illustrates the position of the third sector in supporting health and social care outcomes for the Welsh population.

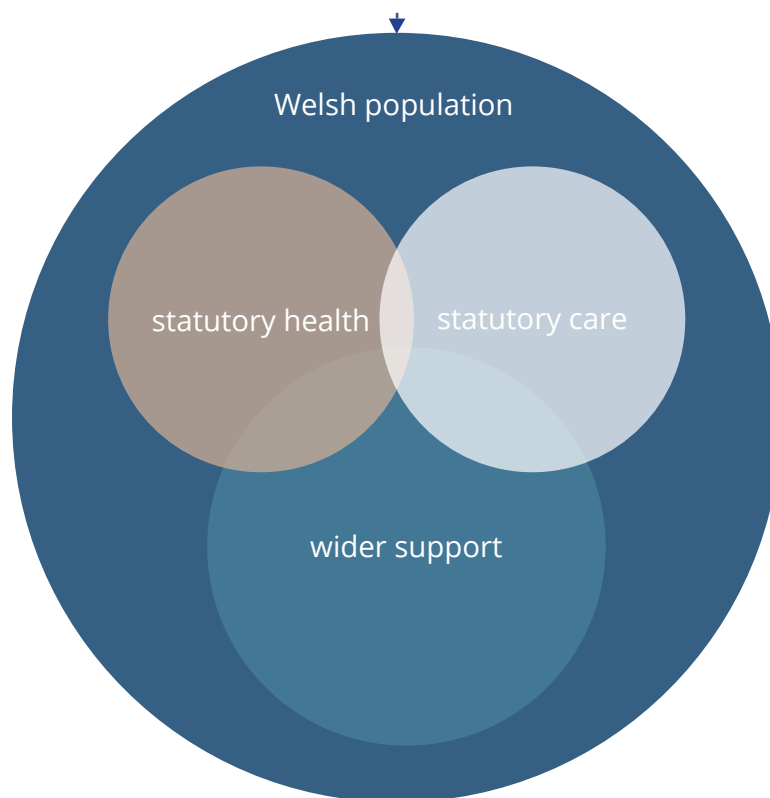


Figure 3 Position of the third sector in supporting health and social care outcomes

Third sector organisations may provide services (often legally required), which are commissioned by statutory health and social care organisations. They may provide wider support that reaches beyond statutory obligations / commissioned services.

Most direct contracting with the third sector is likely to be focussed on acute need and statutory duty, rather than preventative response. A public body will have first decided to outsource delivery (as required under public contracts legislation), which is not the same as deciding to outsource to the third sector. However, the competitive procurement process may result in contracting either directly with the third sector, or indirectly through a mixed supply chain. Inevitably it is the larger, well constituted third sector organisations that can engage with the statutory sector at this level.

The number of third sector organisations involved in 'wider support' is far greater than those involved in fulfilling statutory duty. Many of these have no formalised relationship with statutory service providers. This wider support is diverse in scale and style and is more reflective of the preventative and well-being agendas.

Third sector services may be delivered by staff and/or volunteers and include activities which:

- **Connect users to health/care provision** e.g. patient transport, air ambulances, first responders, pathways/support for independent living.
- **Provide alternative treatment/support environments** e.g. the hospice movement, social prescribing, peer support.
- **Address health inequalities:** through education, testing and access to specific communities, including those under-represented in mainstream health and care services.
- **Enhance the user experience:** through delivery of activities such as hospital shops, ward visits and befriending, counselling, or volunteering at vaccination centres.
- **Provide advice or advocacy:** to those in receipt of statutory health and care services. This can extend beyond 'condition-related' support to include advice with benefits, and practical support in respect of end-of-life arrangements.
- **Provide support to family and friends** affected by a loved one being in receipt of health or care provision, including bereavement support, home adaptations or dedicated family facilities within a hospital.
- **Build capacity** of health and care sectors through funding research, vocational education and training, or workforce planning and standards (e.g. via the Medical Royal Colleges).

Third sector support is likely to use community strengths (volunteers, knowledge, property and facilities) to support the independence of local communities and in doing so, reduce reliance on statutory services.

SECTION

03

THIRD SECTOR INFRASTRUCTURE AND NETWORKS

Third sector organisations connect with each other through a national infrastructure and national and regional networks.

At national level, [Third Sector Support Wales \(TSSW\)](#) provides coordination and support to the sector through [Wales Council for Voluntary Action \(WCVA\)](#) and 19 [County Voluntary Councils \(CVCs\)](#). One function of WCVA is to facilitate dialogue between third sector organisations and Welsh Government ministers, through the [Third Sector Partnership Council](#); meetings between organisations representing health and social care meet with the relevant ministers twice a year.

The infrastructure described above is unique to Wales and an asset we can be proud of. It provides recognised channels for government and statutory bodies to relate to what would otherwise seem a baffling and disorganised array of organisations.

National infrastructure bodies too, such as [Carers Trust Wales](#) and [Community Transport Association Wales](#) provide support and representation for specialist organisations. Networks such as the [mental health alliance](#) or [cancer alliance](#) enable coalitions of organisations with similar interests to work together informally.

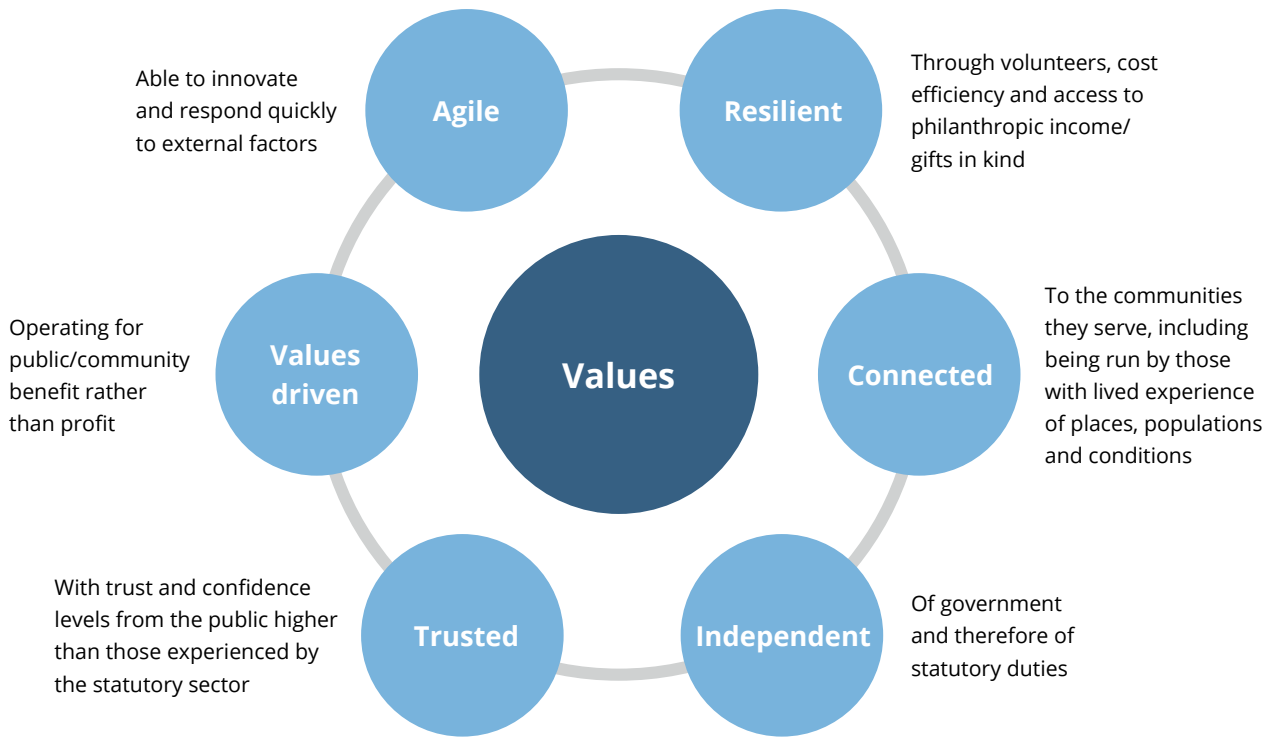


SECTION

04

THE VALUES AND BENEFITS OF THE THIRD SECTOR

Whilst the third sector in Wales constitutes many thousands of diverse organisations (see our infographic) it shares a common set of values, which we have identified from our research as:



Through these values the third sector can offer considerable benefits to health and social care delivery in Wales.

Consultation with third sector organisations for this paper highlighted the fact that they prefer to talk about *benefits* delivered as opposed to *value* delivered. This links with the concept of delivering public benefit, which is a pre-requisite for registering as a charity. It feels less quantitative than 'value' and reflects the fact that many benefits are challenging to quantify – particularly for smaller organisations who have limited capacity to expend on evaluation.

Some third sector benefits relate to **resourcing**, including -

- Ability to secure resources from wider sources than the public purse, such as philanthropic giving, gifts in kind and trading income.
- The involvement of volunteers to enhance service delivery (it should be recognised that the statutory and private sector also engage with volunteers). A separate Bevan Commission paper '[The Values and Value of Volunteering](#)⁷', noted the difficulty of quantifying the value of volunteer activity in health and social care.
- Volunteering also delivers wellbeing benefits to the volunteer and can play an important role in workforce planning, providing an entry point from which to build career pathways into the health and social care sector.

Even when third sector organisations deliver services on behalf of a statutory organisation, they often are able to deliver benefits that extend beyond the initial service specification. Third sector organisations including Tenovus, Alzheimer's UK and Mind, for example, explained to us how support and information services they provide exceed what they are paid to deliver and that such services have been developed with philanthropic, rather than statutory funding. The brand awareness associated with such organisations has made them the 'go to' place for information on specific conditions, which is recognised and used by the public and by professionals alike.

Third sector benefits also relate to **operational delivery**, for example -

- Ability to **engage with/represent hard to engage communities**. Third sector organisations, via their governance, staff or volunteers, are often able to engage, build trust and empower behaviour change beyond the reach of statutory organisations. In developing this paper, we heard from large third sector organisations delivering commissioned statutory services, who recognised that small grassroots third sector organisations were essential to their delivery, even if not formally recognised as such.
- Agile third sector services, free from statutory duty, can curate responses that **reach beyond the constraints faced by the statutory sector** (including risk control and management hierarchies). Through cost efficiency and resilience they can adapt to surges in service demand. Increasing food poverty is being met by increasing provision of foodbanks, for example, and it is recognised that the third sector response to the covid crisis, at a community level, was ahead of the statutory sector.
- **Formal partnerships between the third and statutory sector** can enhance operational delivery. Cwm Taf Morgannwg University Health Board told us of the additionality that stemmed from its relationship with Macmillan. Macmillan is able to provide wellbeing support for cancer patients (and their families) that complements the health services that the Health Board can provide.

7 [Bevancommission.org/publication-4](https://bevancommission.org/publication-4) 2022

SECTION

05

ENHANCING AND SUPPORTING 'THE SYSTEM'

*Mainstream health and social care services can be enriched
and supported by effective collaboration with the third sector.*

Such collaboration can support statutory sector providers to achieve their required contributions towards health and care priorities such as those in the NHS Wales Integrated Medium Term Plan, as well as wider commitments such as those under the Wellbeing of Future Generations (Wales) Act.

Collaboration differs from the 'transactional' nature of commissioned services and may not involve financial resourcing by the statutory sector. It is based on trust, communication, transparency and co-operation, with an equity in status between partners.

Below are examples of practice which:

- align with the principles of prudent healthcare
- achieve 'real' engagement with people and communities
- value community assets
- contribute to informing, planning and improving services
- realise self/place-generated solutions to maintain health and wellbeing

These examples draw briefly on case studies that show how the third sector can contribute to the foundations for a future model for health and care in Wales. A more extensive list, with links to the full case studies, is given in Appendix 2.

Enabling Co-production

Credu is a voluntary organisation that provides support to unpaid carers and their families in Powys, Ceredigion, Wrexham, Conwy, and Denbighshire. The long-term nature of Credu's relationship with Powys Social Services means that they are a trusted provider and have helped shape services and advocate for creative solutions to individuals' situations.

Hospital to Home Service Delivery

PIVOT is a partnership between the British Red Cross, Pembrokeshire Association of Community Transport Organisations (PACTO), Royal Voluntary Service, Care & Repair and Pembrokeshire Association of Voluntary Services (PAVS). The service prevents hospital admissions, facilitates discharge arrangements and reduces support required from statutory agencies.

Social Prescribing

Denbighshire Community Navigator service. Denbighshire Council collaborates with the third sector on its Talking Points project, running sessions in every library throughout the county. The Talking Points scheme can prevent people from falling into crisis and needing more expensive services in the future.

Tackling Inequalities

Macmillan/Coalfields Trust/ Cwm Taf Morgannwg. The Coalfields Regeneration Trust (CRT) is leading on a project with Macmillan Cancer Support to improve cancer outcomes in former coalfield communities in Bridgend, Rhondda Cynon Taf and Merthyr Tydfil by connecting with local people in community-based settings. The partnership wants to improve understanding of engagement barriers in communities of high deprivation, raise awareness of cancer services and co-create inclusive solutions.

Using existing infrastructure for early intervention and prevention

Môn Community Link. Medrwn Môn is a County Voluntary Council (CVC), providing support and advice to voluntary and community groups on sustainable funding, volunteering, good governance and engaging and influencing. Medrwn Môn's Community Link programme has become the single point of access for early intervention and prevention services for many statutory providers, including the Community Mental Health Team, Community Resource Teams, Housing Support Providers forum, GPs, and North Wales Police. Môn Community Link has seen an increased attendance at community groups, use of community buildings and opportunities for volunteering.

Integrated Delivery

Healthy Help. This Bevan exemplar project presents a model of good practice for involving volunteers in preventative services and a recommendation that the model is invested in and adapted to benefit more people regionally and nationally. It clarifies the collaboration necessary between statutory Health and Social services and voluntary sector staff and volunteers, to support people with complex conditions.



Medrwn Môn is a County Voluntary Council (CVC), providing support and advice to voluntary and community groups on sustainable funding, volunteering, good governance and engaging and influencing

Early Intervention

Solva Care is a charity set up by the community in Solva and Whitchurch in Pembrokeshire. As well as reducing isolation and improving wellbeing, Solva Care has prevented hospitalisations and helps residents come home from hospital more quickly.

Supporting Wider Wellbeing

The Birth Partner Project in Cardiff offers support to pregnant sanctuary seekers who face giving birth alone. By providing practical and emotional support, the goal is to improve health outcomes, maternal wellbeing and the life chances of the babies. A further benefit of the charity's work is that it promotes integration and builds community relationships.

Innovation

ProMo Cymru is a social enterprise and registered charity that works collaboratively to develop digital communications to increase a target audience's engagement with services. It supports the third and public sectors in imagining, testing and creating better services. Its work involves finding solutions that work for different audiences, and is informed by experience of delivering digital youth information projects. The organisation attracts employees whose values align with public service. It is committed to delivering high-quality work that benefits the wider community.



SECTION

06

OPPORTUNITIES FOR CROSS SECTOR COLLABORATION

There are clear opportunities for collaboration and co-production between the statutory and third sectors to create a more effective health and care eco-system.

The Bevan Commission reports that *'80-90% of good health [is] coming from factors outside of our designated health and care systems,[so] these systems cannot be remote from the rest of our daily lives. Wider impacts on health must permeate other public planning and decision-making processes – especially at times of great change'*⁸.



Wider impacts on health must permeate other public planning and decision-making processes

Working with the third sector shows recognition of the wider determinants of health.

Greater collaboration between the statutory and third sector can contribute to a health and care ecology that ensures an equally well Wales, benefitting society as a whole in line with the Bevan Commission's four foundations for the future (see Figure 2) as well as the wider [Principles of Prudent Health Care](#)⁹.

- **Healthy, Resilient and Resourceful People and Communities**

The third sector is a key community asset. It engages with people and communities, empowering them to take control of their own wellbeing.

- **High Quality, Integrated Prudent Health and Social Care**

The third sector can contribute to more integrated service planning and delivery. Maximising the potential of volunteers, mutual aid groups and citizen voice is essential in meeting whole population needs and delivery of services close to home.

- **Equally Well and Sustainable Services and Support**

The third sector has a key role to play in supporting the public at large to adopt a prudent approach to their engagement with health and care services, as well as the in developing the delivery models used.

- **Dynamic, Innovative and Transformational**

The third sector is uniquely placed to help define community/place-based needs, and to develop innovative responses to these needs which can be scaled up locally, regionally and nationally.

8 <https://bevancommission.org/people-place-health/>

9 <https://bevancommission.org/about-us/prudent-healthcare-principles/>

SECTION

07

THEMES FOR CHANGE: ISSUES AND SOLUTIONS

Research to inform this paper highlighted the need for equity. To be transformational, third and statutory sectors need to treat each other in a fair and impartial manner. It is recognised, however, that the two sectors are not equal, given their significant difference in structure, scale, resources and obligations.

Opportunities for change have been identified, which are summarised below under four broad themes. For each theme we highlight issues identified in our focus groups and interviews, along with possible solutions.

Further examples of the challenges facing individual organisations and how they are addressing these can be seen in Appendix 2.

1. COLLABORATION AND COOPERATION

We need to secure long term effective collaboration and co-operation between the two sectors on a Wales-wide basis.

Identified issues	Possible solutions
<p>No baseline data</p> <p>Neither third nor statutory sector could provide collective information on current collaborative relationships¹⁰.</p> <p>Without understanding the baseline we cannot make an evidence-based call for wider collaboration.</p>	<p>Common reporting structure</p> <p>- for public bodies to gather consistent data and understand the role of the third sector in delivering statutory services.</p>
<p>Culture and attitudes</p> <p>Whilst cultural differences can add strength to any collaboration, they must be understood and respected.</p> <p>Attitude differences between organisations (in either sector) exert their positive or negative influence. We found that positive relationships were often dependent on individuals.</p> <p>It is often presumed that cross-sector collaboration is linked to financial transaction. This creates caution when other forms of collaboration are explored.</p>	<p>Raise awareness</p> <p>- of both sectors, including the opportunities, challenges and constraints that they face.</p> <p>Increase awareness, also, of the social model of health, through shared learning and awareness events and leadership programmes such as Social Care Wales' Compassionate Leadership Programme.</p>
<p>Fostering competition</p> <p>Third sector organisations often perceive that they are in competition with each other, especially for funding (from all sources). This creates barriers to co-operation and collaboration within the third sector.</p>	<p>Make use of existing infrastructure bodies</p> <p>- including Third Sector Support Wales, Cwmpas, national networks and umbrella bodies, to:</p> <ul style="list-style-type: none"> • Bring people together • Help identify needs and more prudent solutions • Help to use resources more effectively • Enable better signposting and targeted support • Develop solutions that build on community assets

10 Richard Newton Consultants unpublished data 2023, on behalf of WCVA

Structural barriers

Risk assessment and data sharing constraints, for example, can pose barriers to collaboration. Individuals from both sectors, when reflecting on the pandemic, highlighted how relaxation of such constraints by the statutory sector enabled better collaboration and service delivery.

Engage third sector organisations in patient pathways and multi-agency teams

In doing so, we can map and address the barriers to co-operation that arise.

2. REPRESENTATION AND PLANNING

We need to recognise the role that the third sector can play in representing and advocating for others and ensure that it is able to participate in planning processes.

Identified issues	Possible solutions
Delivery of place focused services Design and delivery of services that are responsive to local communities is a challenge, given the size of statutory partners who deliver health and social care.	Empower the third sector - to co-produce services with local communities in a meaningful and achievable way.
Effective representation of the third sector - given that it comprises of thousands of independent organisations – varying in size, reach, nature and purpose.	Make use of infrastructure bodies Recognise the breadth of third sector and work with the most appropriate infrastructure organisations in respect of each planning theme. This includes generic, geographical focused networks such as Third Sector Support Wales and thematic organisations such as Children in Wales, Community Transport Association and condition focused organisations such as RNIB.
Inconsistent resourcing and coordination - of effective representation across Wales	Equitable resourcing of third sector representation and voice Representation at strategic partnerships including local (Public Services Boards, Primary Care Clusters), regional (Regional Partnership Boards) and national (forums, networks, sub-groups which feed into the planning process), to ensure the voice of the sector and of communities in planning.

Identify how representational roles are currently resourced and 'level up' where necessary. Resources to support representation should be accessible to both sectors.

Planning and time scales

The time required for co-production with the local community does not easily align with statutory sector's planning cycles.

Statutory sector planning is often driven by acute and immediate needs, but much third sector support is focused on early intervention and wellbeing, with outcomes that are harder to measure.

Third sector organisations lack confidence

- to hold statutory sector organisations to account, without fear of jeopardising relationships (funded or other).

3. SUSTAINABLE FOR THE FUTURE

We need to ensure that services, whether delivered by the statutory or third sectors, are sustainable. Sustainability can be improved by adopting **prudent principles**, and taking a system wide and long-term approach.

Identified issues	Possible solutions
A narrow perception - that statutory/third sector relationships are always under-pinned by a financial transaction.	Encourage non-financial resource sharing For example: premises, training and information, professional oversight, feedback and insight.
Short term funding Funding relationships are often short term. Funding allocation processes often promote competition and short sighted goals, rather than collaboration for long term outcomes.	Clear priorities; adherence to the funding Code of Practice Prioritise investment in the following. These are areas where the third sector can make the most significant impact. <ul style="list-style-type: none">• social prescribing

- hospital to home
- early intervention
- co-production
- addressing inequalities
- innovation
- integrated delivery

Adhere to Welsh Government's Code of Practice for Funding the Third Sector (currently under review).

No exit strategies

Often little or no consideration is given to exit strategies by either party, when entering into time limited agreements.

Planned exit strategies

Both parties need to give due consideration to what happens after the agreement comes to an end. The statutory sector should be cautious in developing new activity without considering sustainability; the third sector should not assume a financial dependency on the statutory sector when developing activity.

Commissioning decisions do not recognise the 'additional benefit'.

Third sector organisations often deliver benefits beyond the specific purpose of the funding. This may be in terms of wider service delivery, knowledge or access to additional resources (funding/volunteers, etc).

Commissioning based on shared leadership

Develop commissioning based on shared leadership and decision making, pooled budgets, qualitative feedback and finding innovative solutions - rather than on 'purchasing the same services'.

Recognise and develop existing assets within each community; develop responses based on community strengths.

Recognise the added benefits of working with third sector organisations and of formalising social value and community benefits in procurement.

Statutory sector should risk assess the impact of planning and resourcing decisions on the third sector in terms of market stability, to avoid causing harm inadvertently (especially to organisations they do not fund).

Disproportionate assessment, reporting and administration

- can hamper relationships with the third sector and waste resources.

Proportionate processes

Reduce disproportionate, duplicative and over-burdensome management of relationships with the third sector.

Adopt third sector-friendly commissioning within public contracts legislation (language, lead in time, length of funding, proportionality of requirements).

4. RECOGNITION, LEARNING AND INNOVATION

We need to recognise and build on what works well, moving from isolated pilot studies toward embedded collaborative practice.

Identified issues	Possible solutions
<p>Failure to build on prior learning</p> <p>The commissioning and grant funding process often fails to consider learning from prior delivery and therefore the ability to innovate is compromised.</p>	<p>Embed continuous improvement into statutory funding cycles</p> <p>Adhere to the Code of Practice for Funding the Third Sector.</p>
<p>Lack of awareness by the statutory sector of the extent of its relationship with the third sector.</p> <p>Lack of appreciation by the public (who are service users) of the scale of health and social care support provided by the third sector and, therefore, the importance of the third sector.</p>	<p>Gather and publicise information</p> <p>Develop a common reporting structure for public bodies to gather consistent data and understand the role of the third sector in delivering statutory services.</p> <p>Embed the expectation of co-production with the third sector into the mindset of statutory sector and the public.</p>
<p>Limited capacity and ability to evaluate</p> <p>Third sector lacks capability to evaluate its activities and develop the business case for support.</p>	<p>Collective evaluation processes</p> <p>Enable the third sector to engage collectively in evaluation processes, to show its value in delivery of health and care services.</p>
<p>Insufficient opportunity for sharing good practice</p> <p>A lack of structure and systems through which sharing of good practice can take place.</p>	<p>Enable shared learning</p> <p>Establish forums to showcase and celebrate innovative partnerships and to enable knowledge transfer between organisations.</p>

SECTION

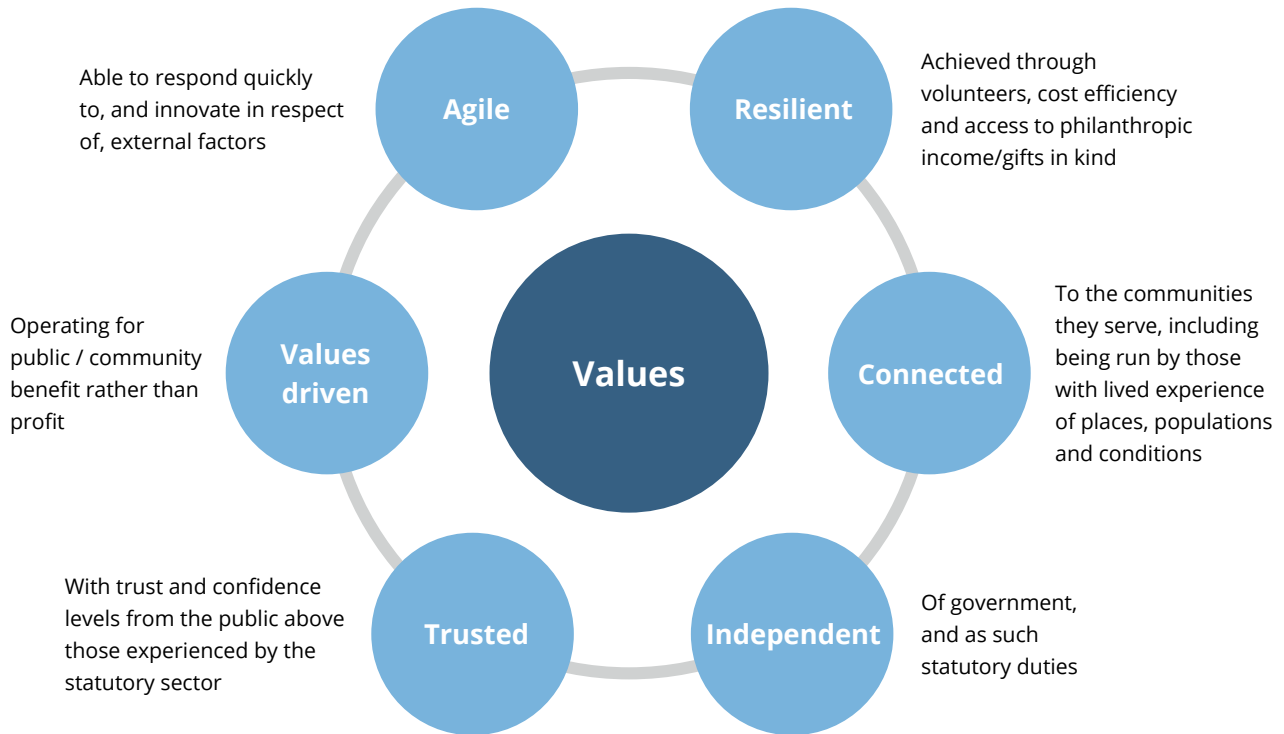
08

CONCLUSION AND RECOMMENDATIONS

It is evident that the third sector has a clear role to play in supporting health and social care outcomes in Wales, particularly given the need to move to delivery informed by prudent principles and the societal and political commitment which currently exists, to embrace a wellbeing model of health care.

Conclusions

The third sector is characterised by its adherence to values which can enable the shift we want to see:

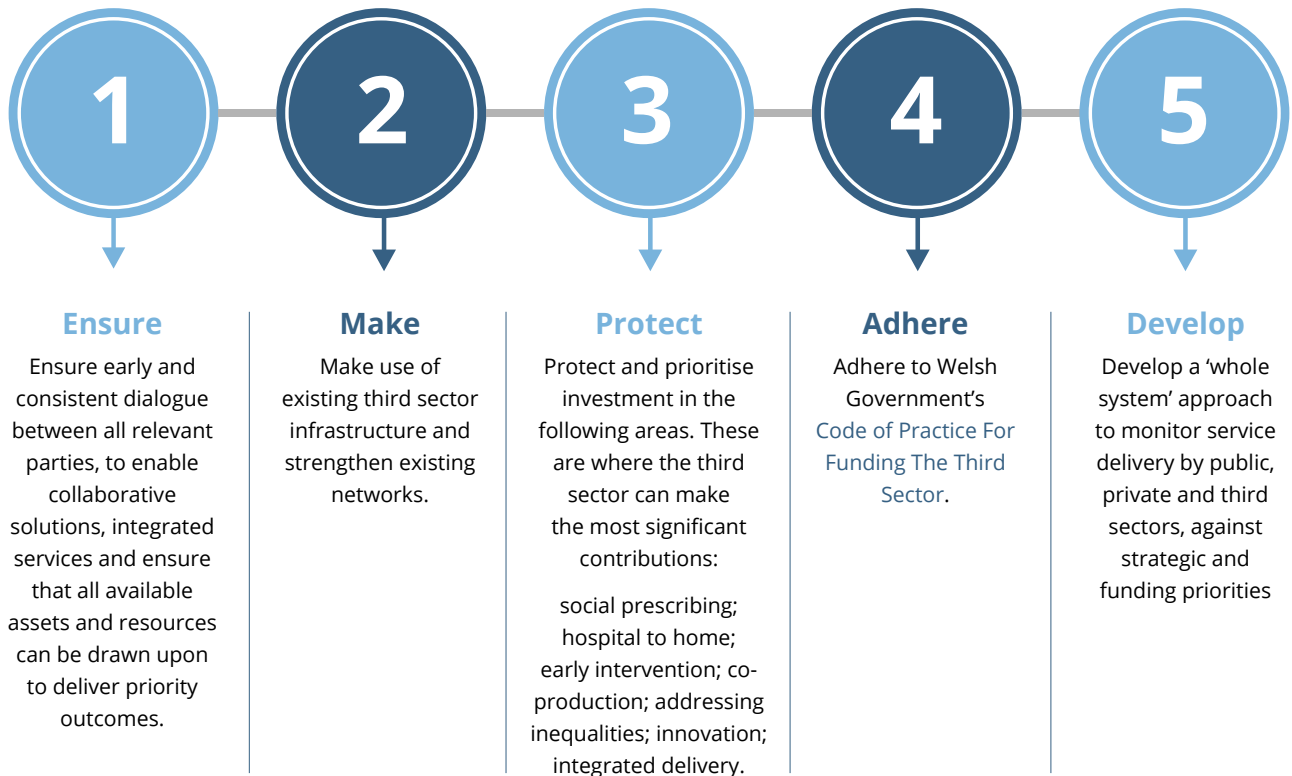


Some issues and solutions have been explored in the paper, grouped under four broad themes for change:

- Collaboration and co-operation
- Representation and planning
- Sustainable for the future
- Recognition, learning and innovation

Our main, overarching recommendations are noted below. These will enable the development of optimal, asset based and integrated services for the people of Wales.

RECOMMENDATIONS



SECTION

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APPENDIX 1 – METHODOLOGY

This paper was authored between January and April 2023, with later revision in winter 2023/24.

The work was led by Richard Newton, Richard Newton Consulting, supported by –

- **Iwan Jones** – Projects Manager Richard Newton Consulting
- **Kate Rimmington** – Associate Consultant Richard Newton Consulting

The team was supported by –

- **Judith Stone** – Assistant Director Support & Invest – WCVA
- **Johanna Davies** – Head of Health and Social Care – WCVA
- **Fiona Liddell** – Helpforce Cymru Manager – WCVA
- **Helen Howson** – Director – Bevan Commission

The project team met on a weekly basis throughout the project delivery period.

Project delivery was split into three phases –

- i. Exploring opportunities and challenges in respect of third and statutory sector relationships in respect of health and social care driven by purpose, following three channels of participants; statutory organisations, third sector organisations and membership organisations.
- ii. Exploring the outcomes of phase one through three themes; the foundations of strong cross sector relationships, determining and communicating value and delivering transformational change.
- iii. Report authoring

A range of approaches were used including –

- **Focus Groups** – 18 focus groups were held digitally across phase 1 and 2
 - **Structured conversations** – with key stakeholders
 - Case study interviews
 - Desk based research
-

Total individual orgs invited	305	Individual orgs across Stage 1 and 2
Total attended - overall	121	Total individual orgs or individuals who attended at least one Focus Group or one to one
% attended of invited	40%	

SECTION

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APPENDIX 2 - LIST OF CASE STUDIES

Follow the links to read the full stories.

Providing vital support to pregnant seekers of sanctuary



Cardiff's Birth Partner Project offers support to pregnant sanctuary seekers, including asylum seekers and survivors of trafficking.

Supporting cancer sufferers in coalfield communities



The Coalfields Regeneration Trust (CRT) is leading a project aimed at improving cancer outcomes in former coalfield communities in Bridgend, Rhondda Cynon Taf and Merthyr.

Incredible Credu provide support for carers



Credu provide support to unpaid carers and their families in Powys, Ceredigion, Wrexham, Conwy, and Denbighshire.

Community transport services go the extra mile to support people



The Community Transport Association (CTA) supports the community transport sector, working alongside organisations that are involved in delivering or accessing accessible, inclusive, not-for-profit transport.

Healthy Help: Enabling people through volunteering



Collaboration between statutory health and social services and voluntary sector staff and volunteers in Monmouthshire supports people with complex conditions.

Talking Points helps people avoid reaching crisis point



Denbighshire Council collaborates with the third sector on its Talking Points project, running sessions in every library throughout the county. The sessions offer an informal, non-judgmental environment with the aim of removing the stigma and fear associated with seeking help.

When communities shape their own places, those communities benefit



Medrwn Môn provides support and advice to voluntary and community groups on sustainable funding, volunteering, good governance and engaging and influencing. Additionally, it runs two largescale projects: the Place Shaping programme and Môn Community Link.

PIVOT deliver vital services in Pembrokeshire



A partnership of third sector organisations in Pembrokeshire support individuals home from hospital.

Collaborating with young people on designing digital services



ProMo Cymru is a social enterprise and registered charity that works collaboratively to develop digital communications to increase a target audience's engagement with services.

Supporting blind and partially sighted people to access services



RNIB Cymru provide practical support and services to blind and partially sighted people, as well as their families, friends, and carers.

Taking care to help people stay part of their community



Solva Care is a charity run by the people of Solva and Whitchurch in Pembrokeshire to improve residents' health and wellbeing and remain part of their community.

The Circuit can save people suffering cardiac arrest



The Circuit is the UK-wide defibrillator database, and the result of a partnership between the British Heart Foundation (BHF), Resuscitation Council UK (RCUK), St John Ambulance, and the Association of Ambulance Chief Executives (AACE).

Vital aftercare for stroke survivors



The Stroke Association has many years of experience in helping stroke survivors in the UK to rebuild their lives. They have also further developed their expertise through links with organisations in other countries.

Comisiwn Bevan Commission

School of Management,
Swansea University Bay Campus,
Fabian Way, Swansea SA1 8EN

www.bevancommission.org
bevan-commission@swansea.ac.uk
+44 (0)1792 604 630
