Working in Partnership:
NHS and the Voluntary and Community Sector

It is widely documented that the NHS is currently facing challenges on many fronts. Rising demand and limited resources means it must adapt and innovate to remain sustainable. It must build new relationships and partnerships across sectors to drive new models of care and support.

The NHS Five Year Forward View 2014 places the Voluntary and Community Sector at the heart of future health service delivery. It articulates a stronger and more developed relationship between the sectors, a desire to make it easier to do business and a recognition of the expertise available and ability to reach underserved groups.

ACEVO and Central Southern believe that partnerships between the NHS and the voluntary and community sector will make a significant contribution to sustaining the NHS through the challenge of the coming five years. The principles that we have developed in this short document aim to make the aspiration behind the Forward View a reality. We hope that it will support more productive conversations and shared understanding between commissioners and voluntary sector providers.

Existing statutory, private and voluntary sector providers of services have central role to play, but successful engagement and cross-sector collaboration will also rely on intelligent commissioning and procurement practices. Commissioner skill in effectively using the capability and expertise of the voluntary sector will be an indicator of their ability to ensure delivery of high-quality, patient-centred care. We hope these principles will help commissioners to understand the role they have in supporting a vibrant and sustainable voluntary sector.

The UK has one of the most vibrant voluntary sectors in the world and providers in the sector have long been operating in areas that statutory sector providers have only just begun to address, specifically preventative services and the integration of delivery. These areas are increasingly the focus of commissioners who rightly see them as a way of managing resources effectively and developing patient-centred services. We hope these principles will help the voluntary sector approach local commissioners with confidence and provide a guide to what they should be looking for in a partnership.

Overall, there are perceived barriers to effective partnership working between commissioners and the voluntary sector; engagement needs to be improved, partnerships need to be developed and contracting needs to be more intelligent and straightforward.

This set of principles sets out our thoughts on how to start to address these barriers and show how, with the right approach and understanding, relationships and partnerships can be built. They have been developed by ACEVO and Central Southern to help both sectors work together. The journey of partnership development can be challenging. If these principals are applied consistently they will help partnerships grow.
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<th>Principle one – Sustainability</th>
<th>Principle five – Proportionality</th>
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<td>Organisations should seek to build partnerships through jointly committing leadership time and resource to understanding each other’s operating environments and contexts.</td>
<td>Both partners should be equal in the partnership but should be proportionate in their requirements of each other.</td>
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<td><strong>In Practice:</strong> Longevity is typically characterised by mutual trust, a clear understanding of the roles of each partner and a firm understanding that together they are stronger organisations. This means protecting time to invest in building the relationship and understanding each other’s values, culture and ambitions.</td>
<td><strong>In Practice:</strong> Partnerships between the NHS and the voluntary and community sector can seem like David and Goliath. Each should be mindful of each other’s capacity and capability, particularly in relation to sharing risk and contractual requirements.</td>
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<th>Principle two – Transparency</th>
<th>Principle six – Innovation and Improvement</th>
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<td>Organisations should be open with each other and clear about the purpose and benefits of the partnership for partners, patients and the public.</td>
<td>Organisations should seek to share, develop and implement innovative solutions.</td>
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<td><strong>In Practice:</strong> this means sharing strategic, operating and commissioning plans, being open about the pressures that each face and, when necessary, having difficult conversations in a mutually respectful way.</td>
<td><strong>In Practice:</strong> Organisations could work together to identify opportunities for improvement and Innovation. Identify a particular local problem and work together to find a bespoke solution. In doing things differently, it might be necessary to take a small risk in order to realise a large benefit.</td>
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<th>Principle three – Joint Vision</th>
<th>Principle seven – Accountability and Governance</th>
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<td>Organisations should share their vision and plans as early as possible so that they can identify synergies and opportunities to develop a joint partnership vision.</td>
<td>Be clear about how decisions are taken within each organisation and within the partnership. Agree how you will hold each other to account.</td>
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<td><strong>In Practice:</strong> Building upon organisational plans organisations should identify areas of commonality and seek to develop a joint plan that compliments each organisations, incorporating each other's short and long term business objectives.</td>
<td><strong>In Practice:</strong> Develop an agreement on decision making, which includes how decisions are made and by whom within each organisation. It is also important to agree how joint decisions will be made about the partnership itself. Develop an accountability statement to create the environment in which to hold each other to account.</td>
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<th>Principle four – Joint Capability</th>
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<td>Organisations should seek to enhance each other’s capability.</td>
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<td><strong>In Practice:</strong> this can manifest itself in different ways, joint provision of services, upskilling or knowledge transfer between the partners. For example, charities can provide a source of advice for commissioners on particular needs which can be complemented by complex demographics and population knowledge held by commissioners.</td>
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*References: The Independent Commission on Good Governance in Public Services*