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Through different eyes:

How different stakeholders have understood the contribution of the voluntary sector to connecting and supporting people in the pandemic

October 2021



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Space to Connect is a partnership between the Department for Digital, Culture, Media and Sport (DCMS) and Co-op's charity, the Co-op Foundation, to unlock the potential of community spaces where people can connect and co-operate. Between 2019 and 2021, 57 community organisations received grants totalling £1.6 million to help build social connections, address local challenges like loneliness or access to services, and expand activities.

Leeds Beckett University and Locality are Space to Connect evaluation partners. The experience of Space to Connect projects, the ambitions of the funders and the learning from the programme is captured in a variety of tools, reports and briefings available at:

<https://leedsbeckett.ac.uk/spacetoconnect>



Department for
Digital, Culture,
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Contents

Introduction	5
What do we mean by voluntary, community and enterprise sector organisations?	6
Contributing evidence	6
What have VCSE organisations been doing to connect and support people during the pandemic? ..	6
How have VCSE organisations adapted their practice?	9
How have VCSE organisations been working with other partners?	10
What impact have VCSE organisations had on individuals, communities, and local health systems?	12
Impacts on individuals	13
Impacts on communities	13
Impacts on wider health and care systems and other stakeholders	14
What has enabled VCSE organisations to connect and support people?	15
Community relationships	15
Common goals	16
What challenges have VCSE organisations faced when connecting and supporting people?	16
Key recommendations for funders and commissioners: moving forward	18
For funders and commissioners	18
For local authorities and health bodies	18
Policy and practice: looking forward	19
Appendices	20
Appendix 1 Evidence sources and contributions	20
Appendix 2 Methods	23
References	26

Introduction

Throughout the COVID-19 pandemic there has been a considerable response from voluntary, community and social enterprise (VCSE) organisations in the UK. Much has already been written about the support these organisations were able to provide to individuals and communities.

This briefing takes a step back and reflects on what different stakeholders have been saying about the VCSE responses to the COVID-19 pandemic and, going forward, what this means for how the VCSE is valued and supported for its contribution to local health and care systems.

This briefing will examine:

3. The types of services and activities that VCSE organisations have been providing during the pandemic, including how they have adapted practices and worked with other partners and stakeholders.
4. The impact that VCSE organisations continue to have on individuals, communities, and wider health and care systems, including NHS, social care, and local authority provision.
5. The factors that enabled or challenged VCSE activities during the pandemic, and the support that VCSE organisations continue to need from commissioners and funders.

This briefing was produced by bringing together evidence from a range of sources, such as reports and summaries, published from 2020 onwards. The information here is presented as high-level summaries of the key issues identified from the source documents provided in the References section at the end of the briefing.

Key Findings

- Communities are at the heart of this – It is not surprising that most of the reports produced come from either the voluntary sector or, to a lesser extent, local government. VCSE organisations not only produce more reports, but they also much more engaged with describing the opportunities and complexities of working within communities. They describe how the VCSE quickly responded to needs in communities and, as importantly, to collectively mobilise assets – primarily citizens – across communities and organisations. These reports describe a practical manifestation of value-led approaches to inclusive, strength-based community responses. The VCSE recognised the importance of addressing fundamental factors that affect wellbeing, such as social isolation and poverty.
- A partial view – By their nature, government perspectives on the VCSE contribution are fewer and more distant. They are less likely to demonstrate detailed understanding of the complexity of the response and the importance of the long-term relationships that embedded voluntary organisations have with communities. Suggested actions tend to focus on narrow areas of policy, which can feel like rather simplistic responses to the complex relationships and challenges at a local level.
- Connection and collaboration – An important part of the story is how local government and the VCSE worked together. Central to this is the role of a number of VCSE organisations

played as “community hubs” or “community anchors”, enabling connectivity between citizens, community organisations and the local state.

What do we mean by voluntary, community and enterprise sector organisations?

Voluntary, community and enterprise sector (VCSE) organisations are those whose primary purpose is to “create social impact rather than profit”. The VCSE is often called the third sector, civil society or the not-for-profit sector (1). The sector is broad, including everything from tenants’ and residents’ groups, to community businesses and social enterprises, to grant making trusts and companies limited by guarantee – plus a host of other organisational types (3). The VCSE can deliver services, support other community groups, and lobby for specific issues (2).

Contributing evidence

We included 34 sources of evidence that cover a range of perspectives (VCSE, local government, central government), different types of VCSE organisation (mutual aid groups, community organisations, community businesses and social enterprises, and community hubs and partnerships), and which report on different aspects, including examples of support, the impact VCSE activity has had, enabling and challenging factors, and recommendations for funders and policymakers.

The biggest perspective comes from VCSE organisations themselves about their own experiences responding to the urgent needs of the population during the crisis. They add a rich understanding of the complexities of volunteer and community activity at all levels, and offer key insights into how stakeholders can work together and how funders and commissioners can better support the VCSE and other sectors as we move forward into the recovery phase of the COVID-19 pandemic. We located fewer than 10 sources of evidence that represent the perspectives of local and central government. These focus on recommendations and proposals for policy change, rather than detailing how VCSE organisations have supported people, or how the sector has impacted individuals, communities, and the wider health and care system.

Appendix 1 shows the contributions each source has made to this toolkit. It is worth noting that most of the sources did not focus on a specific population. Only two sources (Black South West Network 2020, Murray 2020) specifically focussed on communities experiencing racial inequality or people from racialised communities; one focussed on older people (NCLF 2020b); and another on children and families (NCLF 2020c).

What have VCSE organisations been doing to connect and support people during the pandemic?

We looked at reports and summaries detailing what VCSE organisations have been doing during the COVID-19 pandemic. A wide range of organisations have been supporting and connecting

people in a variety of creative ways. The pandemic has seen “one crisis, many responses”, and the range of services and activities provided by community-led organisations has been, and continues to be, significant. The information relating to what VCSE organisations have been doing is drawn from the perspectives of the VCSE. Two reports written from a local authority perspective discuss the NHS Volunteer Responders scheme and mutual aid groups, although the report by the Local Government Association focusses on organised volunteering and misses the depth and richness that New Local have brought in their understanding of the wider volunteering infrastructure (4, 5).

The included evidence described a wide range of VCSE activity. We have reproduced a table below from McCabe et al 2020a which succinctly captures the full range of activities that we found (6) (Table 1). VCSE activity occurred at a number of different “levels”. Hyper-local groups at a street-level responded quickly, using WhatsApp and Facebook to organise support. Established community organisations supported mutual aid groups who had greater street level reach and coordinated activity. Some organisations were involved in partnerships with multiple organisations and across sectors (eg local authorities and NHS partners) to deliver support across whole areas. What is striking is how well coordinated this activity was, despite it happening at different levels, with different groups: some informal and others more formal. Much of this activity emerged in a very short period – with new collaborations developing quickly at neighbourhood and place level. The importance of this mesh of formal/informal community infrastructure at neighbourhood level and its relationship to place-led activity merits further exploration. This experience is reflected in the stories we captured in our Learning and Evaluation programme for the Space to Connect Programme (further details available at: <https://leedsbeckett.ac.uk/spacetoconnect>).

Table 1
Different VCSE activity during the COVID-19 pandemic, adapted from McCabe et al (2020a)

Information	<ul style="list-style-type: none"> • Sharing/signposting information • Newsletters • Webpages and social media posts/WhatsApp groups 	Space	<ul style="list-style-type: none"> • Making community hubs available for food distribution
		Funding	<ul style="list-style-type: none"> • Funding for local response activities – food, creativity, mental health support, etc • Funding for individuals, eg for making PPE
Food	<ul style="list-style-type: none"> • Drop-and-shop type activities • Street food (bring and share) tables • Free school meals for those not currently eligible/children’s lunches • Cooking and distribution of hot meals • Community fridges and freezers • Food banks • Recipe boxes 	Staffing	<ul style="list-style-type: none"> • Redeployment/secondment of staff • Covering staff childcare costs
		Outreach	<ul style="list-style-type: none"> • Street activities • Doorstep conversations • Identifying changing needs
		Wellbeing	<ul style="list-style-type: none"> • Wellbeing calls • Family support sessions online • Befriending services • Mental health support services
		Targeted interventions	<ul style="list-style-type: none"> • Support for refugees/those without recourse to public funds • Support for young people in school transition/young people’s mental health
Creative	<ul style="list-style-type: none"> • Community choirs • Drama • Street art • Giving out seeds/plants • Activity packs • PPE mask making/distribution 	Supporting local economies	<ul style="list-style-type: none"> • Social enterprise support to meet health and wellbeing needs • Support for local business to survive and come out of lockdown • Supporting small scale enterprise

Technology	<ul style="list-style-type: none"> • Getting people online • Giving out tablets and paying for Wi-Fi access • Online activities, eg knit and natter, coffee mornings, yoga, training courses, youth projects 	Volunteers	<ul style="list-style-type: none"> • Recruiting and supporting volunteers • Coordinating volunteer activity
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How have VCSE organisations adapted their practice?

During the COVID-19 pandemic the UK has faced numerous restrictions as part of public health initiatives to control the virus, including social distancing measures, travel restrictions, and closure of social spaces. As individuals, we may have changed the way we communicate, socialise, and work, and the same is true of VCSE organisations that are meeting communities' needs.

The principal change has been how we connect. Digital technology – smartphones, tablets, laptops, and PCs – have enabled organisations to stay in touch with people through text messages and telephone calls, telephone befriending, and online groups. Organisations moved to online meetings using videoconferencing software. Community groups used text services like WhatsApp and social media groups such as Facebook to share information, and are also using videoconferencing software to host small local events like quizzes and coffee mornings. Services that had traditionally been face-to-face, such as counselling and mental health support, have had to change to telephone and online. However, this can be problematic for some vulnerable people who cannot talk privately in their homes or who do not have access to the technology.

Many organisations that have encountered “digital exclusion” issues found non-digital ways to engage with and support people, such as posting flyers and leaflets through doors, delivering creativity packs to children, delivering seeds and plants for community gardening endeavours, organising street parties (eg for VE Day), and delivering Easter eggs. Non-digital ways of connecting not only help those who cannot access activities and support online but maintain the presence of community celebrations and events that are key to communities.

Community anchor organisations and groups with physical assets (buildings and spaces) have been able to use these as community hubs, acting as emergency response centres for coordinating support advice. One of the most important activities has been around the delivery of food, either as food parcels, hot food deliveries, or food bank provision. Many food banks have started to provide more than just food, for example toiletries, clothing, and toys for children. To comply with social distancing requirements, food has been safely delivered to people's homes with doorstep deliveries, and many communities have set up community fridges or community tables so that people can safely access foods. Many services that have traditionally been social and indoors, such as lunch clubs, have changed their offer to home deliveries of hot food, food parcels, or “soup and a roll” deliveries.

How have VCSE organisations been working with other partners?

Throughout the pandemic, demand for support has increased. Many people who have never needed to engage with charity organisations now rely on their services, and existing service users and beneficiaries find themselves with more complex support needs, resulting in VCSE organisations filling the gaps. To provide support that spans emergency needs such as food, social needs such as befriending, and financial needs such as applying for universal credit, VCSE organisations have had to be creative in using resources effectively. Many have forged new formal and informal collaborations with public services, local authorities, statutory services, private businesses, food banks, local charities, faith organisations, and other community groups. To reduce the pressure on frontline services, local charities and voluntary organisations have supported hyper-local responses by providing training and support with accessing information on child protection, safeguarding, mental health and wellbeing.

Some of these collaborations have grown from existing relationships, while others formed out of necessity to increase capacity. Collaboration at the hyper-local level is more likely in places with existing networks of community action, and often a local authority or umbrella group organises the activities and brings different sectors together. Community hubs have been particularly responsive to community needs as a local point of contact for the community. They have brought together public and VCSE organisations to coordinate and signpost to services, with a range of skills from dispersed departments (libraries, social care, community development) that allowed for a streamlined and effective response.

A report by New Philanthropy Capital(7) suggests that in terms of organisations working together due to the pandemic there has been:

- faster collaboration
- a stronger shared focus
- more pooling of data and resources, and less bureaucracy
- and the lowering of organisational boundaries.

There are lots of examples of collaborations and reciprocity, often between unlikely partners, that are “throwing orthodoxy out of the window” (8) to find new ways of working. Some staff and volunteers seem to enjoy the new challenges and learning new skills, and are reluctant to go back to old ways. These are underpinned by attitudinal changes which include (7):

- stronger levels of trust, demonstrable appreciation of the third sector and a relinquishing of power by local councils
- a willingness to take risks and try new things
- more honesty about what’s working and what’s not working in meeting needs
- and a stronger awareness in the community of underlying societal issues, which have been exacerbated by this crisis.

Some examples taken from the sources are illustrated below. If you find these inspiring and want to read more, please see the key documents listed below.

Morecambe Bay Foodbank was supported by the council to provide additional food parcels, increase staffing, and use a large leisure centre during the pandemic. The food delivery network also engaged with other food banks and food clubs to ensure that surplus food (from closed restaurants and local businesses) went to those who needed it the most. (9)

Staff at the Welcome Centre have been working on the editorial board of the newspaper. The local Voluntary Community & Social Enterprise (VCSEE) steering group has been co ordinating the paper by speaking to different organisations and members of the local community including GPs and the local police, to encourage them to contribute pieces. The paper has also profiled and interviewed local councillors and MPs about the local authorities' COVID-19 response.

(10)

The day after the Charles Burrell Centre (CBC) closed, staff were having conversations with local infrastructure organisations about how they were setting databases and networks of volunteers around the county [...] The council now plays a vital strategic coordination role. CBC have found themselves better placed to manage relationships with local mutual aid groups than the council. Council staff are concerned that their interventions may be seen as intrusive or controlling, whereas CBC can discuss safeguarding or risk management issues in a more collaborative, peer to peer way that seems to be a better cultural fit. (11)

What impact have VCSE organisations had on individuals, communities, and local health systems?

Much of the evidence has focussed on what activities VCSE organisations have done to support people, and how they have changed practices to do so. There is information reported that directly discusses the impacts that VCSE organisations have had on individuals, communities, and wider health systems – although there are gaps in the reporting of impacts on wider health systems, and the conversation is dominated by VCSE perspectives rather than local or central government perspectives. This strikes a chord with commonly reported themes from VCSE perspectives that often there is a disconnect between VCSE organisations and local authorities and public service providers, who fail to engage with VCSE organisations or value their contributions. In their discussion of the NHS Volunteer Responders Scheme(4), the local government perspective seems to value the official volunteer response and suggests that mutual aid groups are best kept between neighbours rather than bolstering local health systems.

Not all impacts have been positive, however. For example, an indirect impact of the change in delivery of VCSE activity has been that many vulnerable individuals have experienced digital exclusion, resulting in being unable to access key services. Local authority perspectives also realise that there has been a reduction in public trust in local councils, particularly in areas where councils have worked less than optimally with local VCSE organisations. The tables below summarise the positive and negative impacts reported in the evidence.

Impacts on individuals

The impact on individuals and families is mostly reported from a VCSE perspective. In many cases, the impacts have been life-saving, as vulnerable individuals have, for example, been provided with essential food and medicines or, as a result of befriending services, felt less isolated (see Table 2).

Table 2 Impact on individuals of VCSE response during the COVID-19 pandemic

Positive impacts	<ul style="list-style-type: none"> • Increased connectedness to others • Reduced isolation and loneliness • Friendship and social support • Alleviation of boredom • Improved wellbeing • Maintained independence for those shielding
Negative impacts	<ul style="list-style-type: none"> • Some service users exposed to greater harm as usual support not available; for example, pregnant women, people with mental health conditions, older people • Some people isolated because activities cancelled • Digital exclusion

Impacts on communities

A recurrent theme in the evidence is that where different sectors have worked together, volunteers and staff from VCSE organisations and local authorities have reported increased morale and sense of collective purpose; an appreciation for others' roles, skills and expertise; and improved service delivery (see Table 3).

Communities have felt the most impact where local authorities have helped local VCSE efforts. However, not all local authorities share an ethos that values community-led activities and enables local decision making. This can have an effect on the impact when VCSE organisations may be hampered in their efforts – some local authorities have added layers of bureaucracy to funding, or tried to professionalise volunteers, which leads to negative impacts for communities.

Mutual Aid groups reveal the importance of the attitude of local government. Local government has significant “make-or-break” power over community initiatives, and the extent to which they succeed depends in large part on the attitude of councils. (6)

Table 3 Impact on communities of VCSE response during the COVID-19 pandemic

Positive impacts	<ul style="list-style-type: none"> • Improved community cohesion • Sense of belonging • Enhanced sense of community • Increased community spirit • Increased trust between neighbours/towards councils
Negative impacts	<ul style="list-style-type: none"> • Reverting back to deficit approaches rather than asset-based approaches • Community not shaping activities – command and control • Digital exclusion an issue for refugees and asylum seekers

Impacts on wider health and care systems and other stakeholders

Throughout the COVID-19 pandemic, VCSE organisations have worked alongside NHS and care workers on the frontline and have “bolstered” the response to the crisis(6) (see Table 4). In many cases the impact has been mutual, and both VCSE and wider health and care systems have benefitted from working together. Hyper-local responses were in place before officially organised local authority and public service responses, and because of local knowledge (needs, resources, availability) were able to target individuals that may have escaped the notice of larger organisations. The hyper-local response was particularly effective in the early emergency crisis of the pandemic as a frontline rapid response supporting hard-to-reach, vulnerable people.

Mutual Aid groups have been crucial to our society’s COVID-19 response. These groups were not “nice to have” – they provided essential support to vulnerable people and prevented further negative outcomes emerging from the crisis. (5)

There has been a faster response too in places where hubs and partnerships have formed or existed previously. VCSE knowledge and networks have contributed to being able to reach and engage more service users. For hubs in particular, having an integrated system has reduced gaps in service delivery and increased capacity as VCSE organisations share skills, knowledge, and learning.

Table 4 Wider impact of VCSE response during the COVID-19 pandemic

Positive impacts	<ul style="list-style-type: none"> • Partnership working • Shared goals improved staff morale and delivery of services • Good public sector relationship and increased trust with VCSE sector • Increased confidence in VCSE organisations
	<ul style="list-style-type: none"> • Increased sharing (power, resources, space, people, skills) • Volunteers and staff have learnt new skills and gained confidence
Negative impacts	<ul style="list-style-type: none"> • Delivery of key services challenging as services stretched • Staff wellbeing impacted by continual work and mental load of complex cases • It is difficult to engage with harder to reach communities who need support

What has enabled VCSE organisations to connect and support people?

There are several common threads in the evidence that shine a light on what enables VCSE organisations to connect and support people in their communities. In responding to the crisis, VCSE organisations have partnered and collaborated with other stakeholders in a way that has not happened before. This has enabled ways of working that have made a difference not just to the individuals and communities they serve, but to volunteers and staff members who have shared knowledge and learning with one another. The following list is by no means exhaustive, and more detail can be found in the list of sources at the end of the briefing.

Community relationships

Overwhelmingly, during the response to the COVID-19 pandemic, VCSE organisations have worked at their best with communities when they have:

- Solid relationships built on trust
- Pre-existing relationships with communities
- Deep community knowledge
- Community-led infrastructure
- Good local leadership

Common goals

Many charities and organisations have stated that collaboration with other sectors (charities, local authorities, private sector) has been important, often crucial, for delivering services in a changing landscape. Community hubs are a good example of working together, and show how sharing spaces, resources, and knowledge have enabled services to support and connect individuals and communities. Working together relies on partners having a sense of collective purpose, and is often “organic” and “intuitive” rather than planned. It can work well when partners are able to:

- Have a common priority and focus
- Signpost to services that are available in the area to refer to wider specialist support
- Stay in touch – online meetings also mean more targeted conversations
- Share up-to-date information
- Have a specific coordinator to avoid duplication of effort, who knows who has what expertise
- Have a solid stream of income and being able to use funding flexibly
- Have a physical space (e.g. a community hub)
- Be able to repurpose “closed” spaces for new activities

What challenges have VCSE organisations faced when connecting and supporting people?

Despite many success stories of VCSE organisations creatively adapting their practices, working well with others, and delivering essential services to communities throughout the UK, there have been challenges and obstacles that have got in the way of connecting and supporting people. At the beginning of the crisis, the response was by necessity urgent and hyper-local – mutual aid groups effectively provided much of the immediate emergency response. As the pandemic continued, the need shifted from emergency provision of food and medicines to responding to social needs such as financial hardship, and a focus on recovery.

It is worth noting that VCSE organisations with staff and existing clients may face different challenges than self-organising groups. However, many of the challenges are universal:

Managing services

- Community capacity – many existing volunteers at the onset of the pandemic were older or clinically vulnerable adults who had to shield
- Surplus volunteers/volunteers not deployed or being given suitable and meaningful tasks
- Increased demand for services
- Skills and resource gaps, particularly with digital initiatives

Service delivery

- Intense working environments – staff burnout
- Competition between groups to represent the community instead of focusing on delivering services
- Red tape – DBS checks, monitoring forms, writing grant bids, sometimes with shifting requirements from funders
- Volunteers cost money and resources (training, support, admin)
- Adapting services is costly – many small organisations can't afford to do so and miss out on funding, especially with loss of income
- Centralised models of delivery can't accommodate more fluid and informal approaches of smaller community groups
- Inability to use public spaces means nowhere to deliver services
- Lack of face-to-face engagement – can't deliver services and/or engage with those who need support
- Struggle to adapt to working online with little time to plan for remote working

Communication

- Often activities limited to “those already known” and in some cases, faith groups “looking after their own” (6)
- Strong narrative of neglect over time by local authorities often means little trust that anything would be different in the face of COVID-19
- Difficulty engaging with volunteers who are locked down/isolating
- Breakdown of trust between organisations and community
- Poor understanding of long-term needs
- Lack of communication between partners and stakeholders

Moving services online and finding digital platforms has been an enabler for many VCSE organisations. However, repeatedly the evidence has shown that throughout the pandemic there are individuals and communities who have been unable to access devices, such as phones or tablets, and/or cannot afford to connect to the internet. “Digital exclusion” has resulted in some communities not being able to access services and, in particular, has left many older people socially isolated. More information about digital exclusion can be found in our digital toolkit available at: <https://leedsbeckett.ac.uk/spacetoconnect>.

Overwhelmingly, the evidence focussing on challenges comes from the VCSE perspective. However, local authority perspectives recognise the disconnect between government and local VCSE organisations, and the need to work with VCSE organisations to map local capacity and understand better which groups can offer which services best. Community organisations and local authorities working collaboratively should be well-placed to lead the response as we move from emergency crisis to recovery.

Key recommendations for funders and commissioners: moving forward

The COVID-19 pandemic has shifted how national, local, and hyper-local organisations work together. There has been much learning over the past 12 months that can help organisations move forward from the emergency crisis responses and into long-term planning to overcome the challenges our communities face. It is apparent that throughout the COVID-19 pandemic, many of the challenges communities and VCSE organisations have faced were pre-existing and have been exacerbated by the crisis – for example, a lack of access to services, inadequate funding, and access to resources and expertise.

For funders and commissioners

Issues around funding were identified as major challenges, and it is not surprising that many sources from the VCSE perspective focussed on the future of funding and commissioning for VCSE organisations. The following is a summary of recommendations for funders:

- Remember the difference between funding the response to a national crisis and “normal” funding; find out what needs to be done to shift to long-term funding.
- Don’t burden grantees (processes, form filling, monitoring).
- Offer unrestricted funding to allow VCSE organisations the “agility” to respond to local need in the way they determine is right.
- Small pots of money that may not help nationally can do a lot locally – much of the response has and continues to be hyper-local.
- Consider if your criteria and processes exclude some organisations (too small?).
- Fund new mutual aid groups to become formal and sustainable.
- Think about what else can you provide other than grants, such as resources, networks and expertise.

For local authorities and health bodies

As this briefing has shown, the role of VCSE organisations been crucial in supporting people throughout the COVID-19 pandemic, and we found a strong sentiment expressed that the “unofficial” pandemic-related responses of volunteers must be recognised and acknowledged alongside the responses of the NHS and public services. Moving forward, the following recommendations could help shape local authority services:

- Invest in volunteer training and development and find creative solutions to support the retention of volunteers throughout the recovery stage.
- Make more buildings and spaces open to VCSE organisations.
- Trust VCSE organisations as partners and value their contributions.
- Remove barriers (e.g. red tape/funding requirements) to working together to deliver services.

- Carry out needs analysis – what is needed in times of crisis and for ‘normal’ times?
- Include VCSE organisations in local decision-making and infrastructure along with NHS and local authorities – the evidence has shown that working across sectors has led to efficient and effective support for communities.
- Include VCSE organisations in the strategic recovery plan for communities and ensure that long-term planning is built into structures and processes.
- Give VCSE organisations more control over budgets and assets to respond effectively and appropriately.

Policy and practice: looking forward

We included sources which focussed primarily on the future role of VCSE organisations in the continued response to the pandemic, and post-pandemic recovery plans for the UK(12-16). Whilst it is beyond the remit to detail the full reports, we have summarised recurring threads to help continue the conversation forward.

Tiratelli 2020 recommends many aspects of strategies presented in other evidence, and suggests strategies should be:

- Individuals-based – which begin with the needs of specific people and work out how community assets can be built and deployed to alleviate suffering.
- Groups-based –which look to pre-existing groups within communities and strive to build and empower them.
- Places-based – which try to make an area as conducive to community mobilisation as possible. This means thinking about things such as infrastructure, assets and the practices of the state.
- Services-based – which look to empower those within communities who may be able to improve services and help them to build their capacity.

It is quite clear from this review that the most comprehensive description and analysis of the contribution that the VCSE has made comes from the voluntary sector itself, and to a lesser degree from local government. This is not surprising: these two sectors are the closest to communities and place. However, in England, policy making and resource allocation making is highly centralised. It is therefore particularly important that the deeper understanding of what happened at a local level is carried forward into governmental and NHS policy in particular.

There are examples of how this experience is understood at a national level. For instance, the report “Levelling up our communities: proposals for a new social covenant” (Kruger 2020), commissioned by the Prime Minister, centres its proposals for levelling up communities around three key themes: power, people, and places(15). A key point under “power” is the development of a Community Power Act. These themes are echoed in NHS England’s report, which highlights the community’s right to serve. The Act should “enshrine the right of communities, charities and social enterprises to a voice in the design of policy and where appropriate a role in the delivery of

public goods”, which includes healthcare, social care, education, crime prevention(14). The NHS report also recommends that government should utilise the “What Works” team to explore options for a new Civil Society Improvement Agency, which is perhaps where Kruger 2020 found inspiration in What Works Wellbeing’s principles of “place, people, power”(17).

Both Kruger and NHS England support the introduction of a volunteer passport to match the supply and demand of volunteers, however the rationale for this – given the significant response of the VCSE during the pandemic – is unclear.

However, neither of these reports recognise the more detailed actions that we summarise above in our key recommendations section. These recommendations emerge from the more grounded experience of the VCSE and local government in particular.

One of the most fundamental concerns remains the amount of funding that is available at community level and how this is controlled, in particular ensuring that funding reaches those who need it most. Locality advocate that some of the funding budget be given direct to local people and community-led partnerships(12), and Kruger 2020 suggests the introduction of a “match trade” scheme for social enterprises, such as the Community Business Trade Up scheme, which is set to help post-COVID recovery and regeneration(16).

Appendices

Appendix 1 Evidence sources and contributions

Source	Publisher	VCSE activities	Example	Impact	Enablers/ challenges	Recommendations
VCSE perspective						
Alakeson and Brett 2020(18)	Power to Change	Community organisations Mutual aid groups Community businesses Community hubs	✓	✓	✓	✓
Black South West Network 2020(19)	Black South West Network in partnership with Locality and	Community organisations	✓	✓	✓	✓

	VOSCUR. Funded by Power to Change, Bristol City Council and Quartet Community Foundation					
Blake et al 2020(8)	Voluntary Action Leeds	Range of Third Sector organisations	✓	✓	✓	✓
Clay and Collinge 2020(20)	New Philanthropy Capital	Mix of charity organisations	✓	✓	✓	✓
Coults et al 2020a(21)	Carnegie UK Trust	Mix of local authority, mutual aid, community hubs, VCSEE sector	✓	✓	✓	✓
Coults et al 2020b(9)	Carnegie UK Trust	Community hubs	✓	✓	✓	✓
HTC 2020(10)	The National Lottery Community Fund	Help through Crisis (HtC) partnerships	✓	✗	✓	✓
Locality 2020a(11)	Locality	Community-led organisations and hubs	✓	✓	✓	✓
McCabe et al 2020a(6)	Local Trust	Big Local Partnerships	✓	✓	✓	✓
Murray 2020(22)	The Ubele Initiative	Mix of organisations	✓	✓	✓	✓
NPC 2020(7)	New Philanthropy Capital	Coordinators and key individuals from three areas	✗	✗	✓	✓
NLCF 2020a(23)	The National Lottery Community Fund	Mix of community groups	✓	✓	✓	✗
NLCF 2020b(24-26)	The National Lottery Community Fund	Focussing on Ageing Better partnerships	✓	✓	✓	✗
NLCF 2020c(27)	The National Lottery Community Fund	Better Start partnerships	✓	✓	✓	✓
The Place Based Social Action (PBSA) programme (28)	Renaisi	PBSA partnerships	✓	✓	✓	✓
Wylter 2020(29)	Local Trust/Big Local	Big Local partnerships	✓	✓	✓	✓
McCabe et al 2020b(30-38)	Local Trust in partnership with Third Sector Research Centre	Big Local partnerships	✓	✓	✓	✗

	(TSRC) and Sheffield Hallam University					
Locality 2020b(12)	Locality	-	×	×	×	✓
Power to Change 2020(16)	Power to Change, the School for Social Entrepreneurs and Renaisi	-	×	×	×	✓
Local government perspective						
Local Government Association 2020(4)	Local Government Association	The NHS Volunteer Responders scheme	✓	✓	✓	✓
Tiratelli and Kaye 2020(5)	New Local	Mutual aid groups	✓	✓	✓	✓
Tiratelli 2020(13)	New Local	-	×	×	×	✓
Central government perspective						
Kruger 2020(15)	-	-	×	×	×	✓
NHS England 2020(14)	NHS England	-	×	×	✓	×

Appendix 2 Methods

The key questions guiding this review were:

1. What have VCSE organisations been doing to connect and support people during the COVID-19 pandemic?
 - a How have they adapted their offer?
 - b How have they worked with other stakeholders (e.g. the wider health and social care system)?
2. What impact have VCSE organisations had during the pandemic on:
 - a Individuals?
 - b Communities?
 - c Local health systems?
 - d Other stakeholders?
3. What factors have supported or challenged VCSE organisations to connect and support people during the pandemic?
 - a What has helped?
 - b What have been the challenges?
 - c What do they still need from funders/commissioners, now and in the future?

A list of 30 organisations known to be active in producing documents and reports concerning the role of the VCSE in health and care systems was compiled (see below) and their websites searched for potentially relevant documents. We did not carry out a search of academic literature as, for this review, we were interested in gathering first-hand perspectives of the role of the VCSE in the pandemic response from different stakeholders.

1. <https://www.cdhn.org/>
2. <https://copronet.wales/>
3. <https://www.fcdl.org.uk/>
4. <https://www.local.gov.uk/>
5. <https://locality.org.uk/>
6. <https://www.nesta.org.uk/>
7. <https://www.nurtureddevelopment.org/>
8. <https://participation.cymru/en/>
9. <https://www.powertochange.org.uk/>
10. <https://phelibrary.koha-ptfs.co.uk/laph/>
11. <http://www.wales.nhs.uk/sitesplus/888/home>
12. <https://www.scdc.org.uk/>
13. <https://supportingcommunities.org/>
14. <https://www.health.org.uk/>
15. <https://www.kingsfund.org.uk/>
16. <https://www.tnlcommunityfund.org.uk/>
17. <https://www.thinklocalactpersonal.org.uk>
18. <https://www.gov.uk/government/publications/community-development-handbook/community-development-handbook>
19. <https://whatworkswellbeing.org/>
20. http://www.scarletdt.com/wp_WWNT/
21. <https://youngfoundation.org>
22. <https://www.goodthingsfoundation.org/>
23. <https://www.thinknpc.org/about-npc/>
24. <https://digital.nhs.uk/about-nhs-digital/our-work>
25. <https://neweconomics.org/>
26. <https://www.ncvo.org.uk/>

27. <https://www.inspiringimpact.org/>
28. <https://www.carnegieuktrust.org.uk/>
29. <https://localtrust.org.uk/>
30. <https://www.newlocal.org.uk/>

Potentially relevant evidence was screened for inclusion by two reviewers based on the following criteria:

Type of evidence	Reviews or summaries, including reports, policy documents, collections of case studies (with some synthesis/summary) NOT individual case studies
Country	UK only
Dates	2020+
About	What VCSE organisations have been doing to connect and support people during the COVID 19 pandemic
	The impact VCSE organisations have had during the pandemic on individuals, communities, and other stakeholders

Data were extracted into an Excel spreadsheet: author, publisher and source of the evidence; details about the types of VCSE activities described; what VCSE organisations have been doing to support people and the impact this has had; and reported details enabling and challenging factors. Extracted data was combined into a narrative synthesis.

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