

## LCH 3<sup>rd</sup> Sector Strategy: 2024-2027

LCH's first Third Sector Strategy, 2020-'23, was co-produced with Forum Central (FC) through wide engagement with LCH staff and third sector organisations and approved by LCH Board in August 2020. The aim of the strategy was:

*To deliver outstanding care to the people we serve by developing effective partnership working with the third sector, maximising use of their expertise and contribution, achieve a culture change in LCH where our people fully recognise their value and support sector resilience*

Strategy implementation has been directed and overseen by a bi-monthly joint LCH third sector steering group co-chaired by LCH Director of Operations and Volition Direction on behalf of FC.

Steering Group meetings have a focus on significant current and anticipated challenges, risks and developments to enable responsive support, and implementation and development of the implementation plan.

### 1. Current Context

The 2020 – 2023 strategy was developed before the pandemic. This strategy refresh is at a time of unprecedented pressures and challenges for communities, NHS providers, the wider public sector and the third sector due to the combined impact of the pandemic, prolonged austerity and cost of living pressures resulting in:

- significant increase in people living in poverty
- deterioration in physical and mental health and well-being and widening health inequalities
- increased and more acute and complex demand for statutory and 3<sup>rd</sup> sector services, much longer waiting times
- the combined effect of the above has resulted in significant reduction in the number of 3<sup>rd</sup> sector organisations, employees, trustees and volunteers and difficulty retaining and recruiting staff. [Click here](#) to see the State of the Sector Report infographic
- reduction in funding across all health and care partners statutory and 3<sup>rd</sup> sector for 24/25, and forecast for the following 2 / 3 years, will result in a reduction in workforce and services, and combined with government focus on reducing hospital waiting lists risks
  - further widening health inequalities - LCH Quality and Value programme aims to ensure no adverse impact on health inequalities; there will be an EQIA for all proposed changes
  - shift in funding to provision in the community and for prevention, earlier intervention and self-management – left-shift - not materialising

In 2023 a city Third Sector Strategy was approved which sets out how all partners need to work to ensure a resilient third sector that continues playing a vital role in supporting communities in Leeds to thrive: [Case study pack - TSS \(b-cdn.net\)](#)

## 2. Progress Implementing the 2020-23 Strategy Objectives - Alignment with the Implementation Plan

Objective1: Optimise integrated working, co-delivery that recognises the collective role in achieving left shift

Objective2: Utilise health inequalities expertise

Objective 3: LCH offer supports 3<sup>rd</sup> sector resilience

Objective 4: Champion a 'one health system' - infrastructure

Objective 5: Fair and equal approach to business development

Objective 6: Develop shared agendas

Objective 7: Enable navigation and links

N.B This does not include 3<sup>rd</sup> sector partnership development progressed separate to the Implementation Plan.

Objectives	Implementation Plan Action	Progress at end of March
23/24 WORKSTREAM		DEVELOP INCLUSIVE, ACCESSIBLE SERVICES
2,3,	i. Support people with sensory impairment (PSI) to bridge the last 10 metres	<ul style="list-style-type: none"> <li>LCH supported BID's successful application to NHS Charities Together to provide a be-friending service for PSI and work with NHS partners to improve access for PSI.</li> <li>BID has provided sensory awareness training for all LCH front of house (FoH) plus Admin staff, SMT and some clinical staff. Focus was then FoH new starters. Exceptionally positive feedback. Posters displayed in Health Centres advise PSI that staff have been trained.</li> <li>Work underway to ensure there are functioning and maintained hearing loops in all LCH retained facilities</li> <li>BID linked with PLACE inspection lead about participating in 24/25 PLACE inspections to provide PSI perspective</li> <li>Work to establish a process to meet and greet PSI arriving at health centres by taxi when project management capacity is available.</li> </ul>

2,3,7	ii. Better meet vulnerable groups communication needs	<ul style="list-style-type: none"> <li>LCH funded 3rd sector support for the 1st round of Quality Improvement Communication projects through the Community of Interest Network: supported the March '23 celebration and learning event, providing insight into patient and community experience of communication, training and input into programme evaluation.</li> </ul>
2	iii. Develop Easy Read service information	<ul style="list-style-type: none"> <li>LCH LD Project manager established links with several 3rd sector groups, through Forum Central Health Task Group and LYPFT Health facilitation team, and has worked with those groups to co-produce Easy Read resources. Groups gave very positive feedback about their involvement and appreciated the opportunity to understand LCH's services better.</li> </ul>
1,2,3	iv. Deliver more services in / co-deliver with 3rd sector partners	<ul style="list-style-type: none"> <li>ABU established an Ambulatory Clinic at OPAL and a leg club with NET Garforth and LS25/26PCN, both run alongside 3rd sector social activities creating opportunities for people to connect with the 3rd sector organisation and develop social connections. OPAL also provide transport.</li> <li>LCH-Forward Leeds wound clinics were piloted in 3 Forward Leeds premises for people who are homeless, drug users and sex workers: Forward Leeds supported people to attend. Due to low attendance an alternative model is being tested that enables attendance at any Ambulatory Clinic, with appropriate adjustments. Forward Leeds support people to attend where necessary and their capacity permits.</li> </ul>
23/24 WORKSTREAM		CONNECT BETTER
1,2,3,4,7	v. Invest in 3rd sector capacity to enhance capacity in NTs and better support people	<ul style="list-style-type: none"> <li>In year 2 Enhance support offered to wider ABU teams, LTHT hospital discharge teams and where 3rd sector delivery partners (DPs) had capacity, Adult Social Care, Primary Care and referrals from the Enhance delivery partners.</li> <li>Falls avoidance referral pathway developed with LCH Community Falls lead, Leeds ICB, West Yorkshire Fire and Rescue Service (WYFRS) and Enhance to enable WYFRS to refer to LCH Falls service / Enhance as appropriate.</li> <li>NT referrals increased as a result of DPs having a regular presence in NT bases, however still low for some teams. Impact on people evaluated positively, 53% of people supported live in IMD1/2.</li> <li>December '23 Board approved funding for year 3: LCH referrals only - NTs and other ABU, SBU services where enables greatest time savings and ensure robust evaluation</li> </ul>

2,7	vi. Enable 2-way info flows with vulnerable communities	<ul style="list-style-type: none"> <li>• Patient Engagement Team re-established links with the Communities of Interest Network (COIN) and regularly attend, enabling 2-way sharing of information.</li> </ul>
2,6,7	vii. Strengthen links to Local Care Partnerships (LCPs)	<ul style="list-style-type: none"> <li>• Seacroft NT engaged in Seacroft LCP work around Frailty, End of Life, Domestic Violence and Abuse. Most NTs not able to attend LCP meetings due to operational pressures. CBU involved in work in South Leeds LCP on children and young people's mental health. Range of services attend HATCH meetings and engaged in Domestic Violence and Abuse workstream. Diabetes service worked with HATCH LCP to explore alternative models to improve access and engagement with diverse communities. Focus in some LCPs on Enhance.</li> <li>• LCP Development Team have had stalls at BU and organisational events.</li> </ul>
7	viii. Re-establish a central point to support NT focus on developing local 3rd sector links	<ul style="list-style-type: none"> <li>• Not progressed in 23/24 due to operational pressures, focus on the Neighbourhood Transformation Programme, establishing Triage Hubs and Enhance.</li> <li>• Exploring how this fits with the Admin Quality &amp; Value programme.</li> </ul>
3,7	ix. Develop intranet pages to support navigation and links	<ul style="list-style-type: none"> <li>• Intranet partnership pages launched in June to encourage and facilitate partnership working with the 3<sup>rd</sup> sector, Local Care Partnerships and Primary Care Networks.</li> <li>• 3<sup>rd</sup> sector content includes links to 3<sup>rd</sup> sector directories and networks to enable navigation and links; case studies, videos and vlogs to inspire; link to city volunteering opportunities (Be Collective website) and LCH staff testimonials to encourage and enable volunteering</li> </ul>
3,7	x. Enable links through <ul style="list-style-type: none"> <li>• LCH 3<sup>rd</sup> sector networking event</li> <li>• Holding Steering Group meetings in 3<sup>rd</sup> sector venues</li> </ul>	<ul style="list-style-type: none"> <li>• LCH and FC jointly planned and delivered the 1<sup>st</sup> LCH 3<sup>rd</sup> sector networking event, November '23. The event was well attended and had over 20 3<sup>rd</sup> sector and LCH market place stalls. 3<sup>rd</sup> sector partnership working showcased through joint presentations: CBU: Mindmate SPA and The Market Place, Community Stroke Service and the Stroke Association, NTs and Enhance. Table discussions informed the refresh of the strategy. Many attendees requested further events.</li> <li>• From January '23 – March '24 Steering Group most meetings held in 3<sup>rd</sup> sector venues across the city to widen 3<sup>rd</sup> sector links and support those organisations: some venues provided at no cost.</li> </ul>

23/24 WORKSTREAM		SUPPORT 3 <sup>RD</sup> SECTOR GROWTH, SUSTAINABILITY
1,2,3,4,5,7	xii. 3rd sector funding & contracting support resilience	<ul style="list-style-type: none"> <li>• Focus at March'24 Board workshop on supporting 3rd sector resilience through our approach in relation to being a lead provider and contracting. Agreed: <ul style="list-style-type: none"> <li>• Review alignment of length of 3rd sector contracts with LCH contracts – as a result extended Northpoint contracts in Mindmate SPA,</li> <li>• Commitment to review objectively opportunities for third sector partners to lead</li> <li>• Be more proactive about how partnerships and lead provider arrangements are agreed when services go out to tender to avoid rushed decisions being made due to tight timescales. Pipeline of opportunities being scoped</li> <li>• Where LCH is the lead provider ensure more rigour in mapping corporate infrastructure requirements from the start</li> <li>• Introducing focus at contract review meetings with 3rd sector partners on the impact of contracts on partner's resilience, share and implement good practice - not fully embedded</li> </ul> </li> </ul>
3,6	xiii. Steering Group focus on key challenges, risks and opportunities	<ul style="list-style-type: none"> <li>• Focus on impact of cost of living pressures on communities and the 3<sup>rd</sup> sector enables 2-way support in population boards, PEG and other system forums e.g. raising concern about impact of de-funding resulting in closure of the Bereavement service.</li> <li>• LCH Population Board forum met for the 1<sup>st</sup> time in March – supports shared understanding, joined up comms and greater influence comms on key issues at Population Boards</li> </ul>
23/24 WORKSTREAM		DEVELOP A 'ONE HEALTH SYSTEM' INFRASTRUCTURE
1,4	xiv. Enable information-sharing with 3rd sector partners to support partnership working	<ul style="list-style-type: none"> <li>• LCH request for Age UK access approved: will facilitate partnership working, particularly with the Home Ward, Recovery Hubs and NTs. Timeframes reliant on TPP.</li> <li>• Providing Enhance 3rd sector partners with NHSmail: ensures all referrals are secure and is more efficient for LCH referrers and Enhance 3rd sector partners.</li> <li>• Linked LOPF to work instigated by Home First and Anticipatory Care Programmes to develop a Recovery Plan on Leeds Care Record to support joined up timely discharge from hospital and enable information sharing. Will initially share information between LCH and LTHT. Early planning looking at enabling sharing with PC and key third sector partners</li> <li>• Board level action to seek support from Leeds and WY systems to lobby nationally for greater flexibility with definition of direct care not progressed due to competing priorities</li> </ul>

23/24 WORKSTREAM		• ENABLE MORE EFFECTIVE SELF-MANAGEMENT
1,2,6,7	xv. Promote digital inclusion by linking services with 100% Digital and Digital Health Hubs	• 100% Digital presented at Leaders Network, ABU forums, Digital Champions Network and have had a stall at Trust and BU events to raise awareness about digital inclusion and support from 100% Digital and the Digital Health Hubs for clinicians, patients and carers. Services and Business Units were keen but due to competing pressures, only the Stroke Service followed through: digital inclusion awareness team training. CBU have strong links with 100% Digital CBU.
1,2,3,7	xvi. Expand self management Health Hubs in 3 <sup>rd</sup> sector premises	• The self-management team have established 4 Health Hubs, provided in Enhance 3 <sup>rd</sup> sector partner premises which are well utilised. Enhance partners support people to attend, connect them to social activities and provide wider support. Expansion was paused due to ABU restructuring.

### 3. Refreshed 2024 – 2027 Strategy

- The Third Sector Strategy Steering Group led a light touch review of the strategy, mindful of work underway to review the organisational strategy. The review was informed by:
  - wider LCH and 3<sup>rd</sup> sector views about priority focuses through discussions at LCH 3<sup>rd</sup> sector networking event in November 2023 and subsequent testing of priority focuses with attendees
  - reviewing whether 2020-23 Implementation Plan actions remained a priority to continue with action leads
  - consideration of alignment with the city Third Sector Strategy.
- The Steering Group decided:
  - no change in the strategy aim.
  - to consolidate the 7 objectives down to 4 objectives
- The refreshed Implementation Plan was agreed at April '24 Steering Group. There is significant continuity from the 23/24 Implementation Plan.
- Assurance on progress implementing the strategy will continue to be provided through 6-monthly updates to Business Committee

**Objective 1:** Drive culture change in LCH where our people fully recognise the value of the 3<sup>rd</sup> sector and pro-actively seek to optimise 3<sup>rd</sup> sector partnerships and enable 2-way navigation and connections

- ✓ Enable 2-way connections and navigation across LCH and the 3<sup>rd</sup> sector
- ✓ Ensure effective 2-way information flows with vulnerable communities
- ✓ Enable sharing and spread of good models, practice, ways of working and learning
- ✓ Celebrate and raise awareness internally and externally of 3rd sector partnership models, good practice, contribution and impact
- ✓ Optimise LCP and social prescriber links

**Objective 2:** Strategic approach to developing 3rd sector partnerships that enable left shift, develops inclusive accessible services and reduce health inequalities

- ✓ Strategic approach to identifying potential for greater role of 3rd sector through:
  - ✓ Trust strategy development and the Quality and Value programme
  - ✓ Ensuring effective 3rd sector engagement and partnership working when developing and implementing tender bids & service models
- ✓ Enhance capacity in LCH services through investing in 3rd sector capacity to provide holistic person centred support
- ✓ Optimise NT ability to connect service users, carers to local services, support
- ✓ Deliver more services in 3rd sector premises / co-deliver with 3rd sector partners: Integrated (Ambulatory) Clinics and self-management Health Hubs
- ✓ Co-produce Specialist Business Unit service delivery models with 3rd sector
- ✓ Co-produce the remote monitored Home Ward solution & mobilisation
- ✓ Childrens services engaging more inclusively
- ✓ Develop strategic approach that drives awareness of digital inclusion across BUs, enables staff to directly support, signpost or connect people to support and embeds focus in change processes
- ✓ Support People with Sensory Impairment (PSI) to 'bridge the last 10 metres' when attending health centres
- ✓ Better meet vulnerable groups communication need
- ✓ Encourage collaboration with the 3rd sector in research around shared agendas to enable co-design, community focus and responsiveness to those with the greatest needs

**Objective 3:** Champion and support 3<sup>rd</sup> sector resilience

- ✓ 3rd sector funding and contracting support resilience
- ✓ Maintain an honest, open dialogue internally and with system partners to understand and address challenges and threats to 3rd sector sustainability and resilience
- ✓ Increase the number of LCH staff volunteering with 3rd sector organisations, especially as Trustees
- ✓ Potential role for 3rd sector in managing LCH volunteers

**Objective 4:** Champion a 'one health system' where infrastructure is aligned to enable all statutory and 3<sup>rd</sup> sector partners to successfully contribute

- ✓ Enable information sharing with the 3rd sector
- ✓ Share learning around Leadership / OD support.