

Briefing Paper – What VCFSE organisations contribute to Health, Social Care and Wellbeing

Introduction

As part of the Neighbourhood Health Plan development process LVET was asked to succinctly describe the VCFSE role in supporting community resilience and in supporting the social care, health and wellbeing of people in Lincolnshire. What follows is a statement of what VCFSE organisations contribute to Health, Social Care and Wellbeing. It serves a position statement for LVET, and our members, and as a ‘shared’ starting point whenever we talk about the role of VCFSE organisations within health and social care.

Statement of VCFSE role

Voluntary, Community, Faith and Social Enterprise (VCFSE) organisations — recognised as “the custodians of universal support and of people’s wellbeing” — represent a diverse and highly skilled sector that is deeply embedded within Lincolnshire’s communities.

They range from small, hyper-local volunteer-led groups to large countywide and regional charities, alongside specialist organisations providing focused expertise in areas such as mental health, dementia, learning disability, housing, bereavement, domestic abuse, financial wellbeing, physical activity, and cultural inclusion.

This breadth enables the sector to offer tailored, responsive support that reflects the varied needs, identities, and strengths of local communities.

Across this wide spectrum, VCFSE organisations share a distinctive professional capability: they are trusted, approachable and able to build relationships with residents in ways that statutory services often cannot. Their proximity to communities, coupled with deep cultural insight and lived-experience networks, enables them to connect with people who may be marginalised, isolated, disengaged or seldom heard. This unique reach means they play a vital role in addressing the wider determinants of health — including social connection, housing stability, financial resilience, digital inclusion, employment, and access to community-based activities.

Communities sit at the heart of neighbourhoods, and VCFSE organisations are a catalyst for community-led action. They foster self-organising support, with groups forming organically in response to local need. In the non-clinical, non-medicalised spaces they create — community centres, church halls, clubs, social groups, peer support networks, warm spaces and activity hubs — they enable prevention, early intervention and ongoing wellbeing support. These spaces are often the first point of contact for people managing long-term conditions, low-level mental health challenges, caring responsibilities, and the effects of loneliness or financial strain.

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VCFSE organisations deliver a broad range of commissioned and non-commissioned services, consistently meeting high standards of quality, governance and outcomes.

Commissioned services are delivered with robust assurance frameworks, strong safeguarding practices and reliable reporting, ensuring they perform to the level expected of statutory providers while remaining grounded in community insight.

Non-commissioned services — often grant-funded or community-funded — provide essential flexibility. They allow organisations to respond quickly to emerging needs, reach groups who fall outside formal service criteria, and test innovative, preventative approaches.

Together, this blend of structured commissioned work and agile non-commissioned activity strengthens neighbourhood support, improves access, and helps reduce inequalities by addressing the wider determinants of health.

The sector’s role in supporting people in their “natural neighbourhoods” is central to enabling people to live active, connected and independent lives. VCFSE organisations provide critical pathways between communities and statutory services: identifying emerging need early; building trust; offering culturally and locally relevant support; and helping individuals navigate health, care and social systems. They also play an essential role in supporting social care by enabling access to community-based activities, promoting independence, and reducing escalation into more intensive services.

Looking forward, VCFSE organisations will continue to identify community strengths, mobilise public voice, support co-production, and spot opportunities to maximise their contribution to neighbourhood health. Their involvement ensures this plan is rooted in the lived experience of communities and that the full value of community-based support — across health, social care and wellbeing — is realised where it makes the greatest difference - in the places people live, connect, and belong.

Where else to look?

NAVCA’s [Unseen but Essential](#) reports and briefings provide some detail of the role of VCFSE organisations in health systems

NAVCA also have some great [overview infographics](#) that can help people to talk about VCFSE organisations and how big we are collectively. They can be found online.