SOCIAL ENTERPRISES: Part of the NHS Family

An explanatory guide for the wider NHS
1.0 WHAT IS A SOCIAL ENTERPRISE?

Social enterprises are business that exist to change the world for the better. Like traditional businesses, they need to balance the books. But they don’t exist to create value for shareholders. Their focus is their social mission and they use their surpluses to reinvest back into delivering that mission. This is particularly important in the health and social care sector where challenges are long term and require long term investment in change. Social enterprises occupy every walk of life, from running coffee shops and cinemas, pubs and leisure centres, banks and bus companies.

Social enterprise is not limited to a single legal form and these businesses can be legally set up through a variety of structures such as Companies Limited by Guarantee, Community Interest Companies (CICs), Co-operative or Community Benefit Societies, for instance. Many are registered charities. But all social enterprises:

- have an enshrined primary social or environmental mission
- principally direct surpluses towards that mission
- are independent of government; and
- primarily earn income through trading, selling goods or services

There are 100,000 social enterprises contributing £60bn to the UK economy and employing nearly two million people. Research shows social enterprises are outperforming traditional businesses, for example, in innovation, workforce diversity and pay.

SOCIAL ENTERPRISE & THE FUTURE OF THE NHS

Social enterprises are part of the NHS family and central to the diversity of health and care provision in the UK. Collectively, they have a turnover of £1.5bn and employ around 100,000 staff. They play a significant role in the delivery of community care, out of hours care and a host of other services. They are financially viable (96% of social enterprises delivering health and care services made a surplus last year) and, the vast majority, are rated Good to Outstanding by the Care Quality Commission (CQC).

Many of the largest social enterprises originally “span out” of statutory NHS bodies - and staff and patients still recognise them now as fundamentally part of the NHS. Social enterprises reinvest their surpluses back into their services and into the communities they serve.

Many social enterprises have found that greater independence from the statutory sector allows them quicker decision making, leading to increased innovation, greater opportunities to engage staff, a greater focus on what they do and a commitment to delivering social value.

This guide will help you get to grips with social enterprises and the role they play in delivering better health and social care outcomes for the communities they serve.
2.0 WHY DO SOCIAL ENTERPRISES EXIST IN THE NHS?

The National Health Service has always been delivered by a mix of state and independent health providers. While hospitals and other local health services are often state-owned and controlled, GPs, dentists, opticians and pharmacists have more commonly been self-employed or privately contracted. Independent sector providers have delivered services for NHS patients for many years and charities play a critical role in delivering a wide range of health services.

The NHS itself was created on the shoulders of a strong social enterprise and co-operative tradition. The 1942 Beveridge Report recommended that the NHS be structured along co-operative principles, with mutual friendly societies at its heart. As he launched the English National Health Service, Bevan announced: “All I am doing is extending to the entire population of Britain the benefits we had in Tredgar”, where the Tredgar Medical Aid Society supplied healthcare free at the point of need to all members in return for an annual contribution.

Today, around a third of all community health services are delivered by social enterprises, and health and social care social enterprises turn over £1.5bn a year and employ over 100,000 staff.

Despite the massive part social enterprises play within the NHS, they can be overlooked. The 2013 Fair Playing Field Review addressed the extent to which providers of NHS care have a fair opportunity to offer their services to patients. In response, NHS England recognised the importance of addressing distortions against the interests of patients. For instance, the majority of social enterprises providing NHS services follow the NHS pay framework, Agenda for Change, offering the same terms and conditions as NHS Trusts. All health care workers providing NHS services should be treated the same, whoever their employer, so that a gap in pay does not result in workers being drawn away from primary, community and social care services, negatively impacting on patient care. Similarly, social enterprises should have equal access to capital budgets or transformation funding, so that areas served by social enterprises do not receive less investment than others.
3.0 SOCIAL ENTERPRISES IN SYSTEM LEADERSHIP

All around the country there are examples of social enterprises playing key roles in their local health systems. The inclusion of social enterprises in the systems demonstrates how they are valued by their local NHS, and local authority partners:

In West Yorkshire and Harrogate, Locala is a member of the Leadership Executive, public Partnership Board and also represents community providers on the smaller System Oversight Group (the engine room). The CEO chairs the Integrated Provider Board which includes all health and social care providers in the STP.

In Wakefield Spectrum Community Health’s CEO is the Senior Responsible Officer (SRO) for integrated workforce transformation and is therefore an important member of the ICP Board as well as chairing the HR Directors network.

Social enterprise Bristol Community Health is a partner with the CCG, NHS Trusts and Local Authority on the local Partnership Board and Executive Leadership Group. Bristol Community Health CEO co-chairs the Integrated Care Steering Group.

City Health Care Partnership CIC leads the Humber, Coast and Vale Partnership (which comprises six CCGs).

And in Mid and South Essex STP, Provide CIC’s CEO is the Executive Digital lead, Organisational Development lead and Leadership Development lead on the Board.

In Kent, Medway Community Healthcare’s Managing Director, has been confirmed as the Senior Responsible Officer (SRO) for the Medway and Swale ICP. The Medway and Swale Integrated Care Partnership (ICP) serves a registered Population of 412,000 people and sits within a system that is part of the wider Kent and Medway area. The MD is responsible for driving the development of the ICP and working across the partners within the Medway and Swale footprint. As SRO he is accountable for ensuring that the ICP’s work is governed effectively and delivers the objectives that meet identified need. He is also responsible for championing the programme at a senior level to secure commitment and buy-in from all partners.
4.0 WHAT IS SOCIAL VALUE OR SOCIAL IMPACT?

Social value is a term used to describe the additional value that an organisation or project can make to the community within which they are operating above and beyond delivering a particular service. In a health or social care setting, this might be the additional value created in the delivery of a contract which has a wider community or public benefit. Social enterprises because they are driven by their social mission are particularly effective at generating social value. Creating social value also often has the positive by product of delivering long term savings through more effective services and earlier interventions.

Social impact covers all the positive benefits that an organisation or a project can make to society, the environment and the wider economy. This includes the social value that it creates as well as the positive impact that a particular service delivers.

The Public Services (Social Value) Act 2012 requires commissioning authorities, including all NHS commissioners, to consider how an area’s economic, social and environmental wellbeing may be enhanced in making procurement decisions. It recognises that public bodies can do more with the money they spend to create better outcomes and reduce demand by preventing need. Delivering services with or through a social enterprise is a simple way that commissioners can meet their obligations under the Social Value Act.

Social enterprises by definition have a responsibility to their social mission rather than to shareholders, which for social enterprises usually means focusing on better health and care outcomes for their communities. Social enterprises reinvest their surpluses into their social or environmental mission and directly create social value for the communities in which they work.

5.0 WHAT EXAMPLES ARE THERE OF SOCIAL IMPACT BY SOCIAL ENTERPRISES?

Social enterprises are set up to deliver social value and their independence can allow them to be more innovative. They identify areas of need in their communities and often seek solutions which go beyond NHS-funded services, offering additional support and better outcomes for patients. Many social enterprises also have charitable arms or foundations through which they fund local communities and projects.

Social enterprises are also pioneering ways of integrating health and social care services – offering integrated services from which the rest of the NHS and local authorities can take inspiration. They are delivering real value throughout the country, a few examples being:

Anglian Community Enterprises

Anglian Community Enterprise (ACE) provides community health and wellbeing services in North East Essex and parts of Suffolk. Each year, ACE gives a percentage of its profit to Anglian Community Trust (ACT) to award social impact funding to projects in the communities it works in. In 2018/19 ACT focused on supporting the increasing number of people who are homeless in Colchester, awarding £20,000 funding to Colchester Borough Homes to support an outreach worker/advocate project working with rough sleepers in the area. The provision of a health-based resource working as part of the street outreach team will reduce risk of harm and increase the likelihood of a solution to issues, with the aim of reducing the number of people sleeping rough in Colchester. The longer-term aim is to make accommodation available through existing resources and develop new accommodation such as short-term lodgings, immediate access short term rooms and move on accommodation, where support through mentors and the outreach team will continue. Colchester Borough Council expect that 50 people each year will be either prevented from becoming homeless or assisted into accommodation from the street.

acecic.co.uk
Bristol Community Health

Bristol Community Health’s mission is to make lives better through integrated community healthcare. They are a staff-owned social enterprise and in 2017/18 they also supported 25 apprentices in clinical and non-clinical roles.

Reducing isolation and loneliness amongst older people

Their community navigators’ scheme, uses volunteers to reduce isolation and loneliness amongst older people in Bristol. 250 local people were supported by 35 volunteers.

Prison services

7150 prisoners were supported to access better quality healthcare. Bristol Community Health have trained prisoners to provide peer mentoring support for other offenders, to support them to understand and better manage their health. The mentors gain a qualification and increase their confidence. Another innovative intervention is the HealthBar a community pharmacy shop based in prisons, this allows patients an element of self-care and the opportunity to purchase medicines to self-treat coughs and colds.

IC24

IC24 provides integrated urgent care services across the South and East of England, they are driven by their social mission to add value to the communities they serve through patient care, employment opportunities and support for disadvantaged groups through charitable work.

In 2017/18, IC24 launched a three-year bursary scheme to provide financial support to two colleagues per year to complete clinical or further education. Apprenticeships are now available to people across the whole organisations, 20 people are enrolled on apprenticeships. The organisation has launched a Quality Champions Programme, the first to be delivered in an urgent care setting, this will give members of IC24 tools and time to implement a quality improvement project that will benefit patients and patient care.

John Taylor Hospice

John Taylor Hospice in Birmingham runs a social isolation group which started from work with a group of bereaved relatives. It has been a real success with some of the members now becoming volunteers, developing social relationships outside of the group.

It is also partnering with Birmingham St Mary’s hospice to lead the STP work stream on End of Life care, working with the CCG, Mental health Trust and University Hospitals on a group to remodel the service currently provided. This is based on creating a co-ordination hub and a 24/7 phone line for overnight support to families as well as developing a programme of education, looking at IT connectivity and common documentation between partners.

Medway Community Healthcare

Medway Community Healthcare (MCH) provides over 80 high quality NHS community services and personalised social care services in and around Medway – from community nursing and dementia care to specialist rehabilitation services and children’s therapy teams.

In 2012, the social enterprise set up a sister charity - Medway Cares – which supports projects and activities that enhance the health, care and wellbeing of local people and aims to address health inequalities in the local community. To date, Medway Cares has awarded over £185,000 to support local people and new projects nominated by staff - just one of the ways the staff and co-owners in the social enterprise have a say in how any surpluses are reinvested for the benefit of the local community. These awards often address the determinants of health and take a preventative approach - funding apprenticeships, supporting patients at risk of falling, supporting single parent families to meet and learn together on the allotment, providing treatments that do not meet the criteria for NHS services, helping people monitor their weight more easily, and more.
Provide

Provide is a social enterprise delivering a broad range of health and social care services. As well as delivering quality services for patients it is also looking at its wider environmental as well as social impact. In 2011/12 Provide generated 484 tonnes of CO2 emissions from gas usage. This has now been more than halved to 235 tonnes. The impact of this reduction is potential savings of £240 per tonne of CO2 emissions reduced for gas/electricity production (Carbonfootprint.com), which is the equivalent of nearly £60,000 of social value.

Spectrum Community Health CIC

Spectrum Community Health CIC is a social enterprise working across the north of England offering a range of community and offender healthcare services. It has a mobile unit which hosts staff and citizen wellbeing events in local communities and on prison sites such as Kirkham and HMO Liverpool. Spectrum also invests in two wholly owned charities, Transform Research Alliance and Spectrum People- supporting social enterprise research and local social inclusion programmes including a health garden, recycling projects and an intergenerational project. It also hosts and administers the Wakefield branch of the Dolly Parton Imagination Library – a free book gifting scheme for children. It hosts medical students from Lancaster University and GP trainee placements from the University of Manchester and is in conversation with the University of Central Lancashire to run a similar scheme taking undergraduates into placements in prisons and other social exclusion models of care.

There are many more excellent social enterprises working in this field if you would like to know more about them please contact Social Enterprise UK.

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