

NHS SUMMARY REPORT

Volunteers for Health,
Northants
June 2026

EXECUTIVE SUMMARY

The VfH Northants Programme is on track and delivering as intended at this stage, with strong progress in establishing the foundations needed for system-wide volunteering. These include shared strategy, partnerships, tools, and early delivery models.

The programme has appropriately focused on alignment, capability-building and testing approaches, rather than premature scaling. As a result, infrastructure is now in place and early delivery is demonstrating value, though robust data impact evidence is still emerging as pilots complete.

Progress is primarily constrained by external factors—including the pace of neighbourhood model development, unclear commissioning routes, and variable organisational readiness—rather than issues with programme delivery itself.

Overall, the programme has moved volunteering from fragmented activity towards a coordinated, credible system offer but has not yet reached full system integration. The next phase is therefore critical in demonstrating impact, identifying scalable models, and securing a clear role within emerging system

WHAT HAS BEEN ACHIEVED

Significant progress has been made in moving volunteering from a fragmented set of activities toward a more coordinated, system-ready offer. This is most visible in the strengthened collaboration across partners, with a clearer shared direction and growing sense of joint ownership. While full system embedding has not yet been achieved, volunteering is slowly being positioned as a credible contributor to wider health and care priorities, rather than remaining peripheral.

A core achievement has been the establishment of key infrastructure to support consistency and scale. The publication of the Volunteering Strategy, Charter and Good Practice Toolkit, alongside emerging shared processes, provides a common framework for delivery across organisations. In parallel, digital capability is beginning to develop, particularly through the NBCT “One Pathway” platform, which will support more structured volunteer management and improved data capture should it be funded and fully implemented across willing participant organisations.

There has also been clear progress in building capability across the system, through the Delivery Partners. Training on inclusive volunteering has been rolled out with strong engagement and positive feedback; these are tangible improvements in knowledge and practice. Alongside this, organisational support, ongoing co-production, peer learning and partner engagement are helping to embed skills and confidence across a diverse range of organisations.

Finally, the Test & Learn programme is now established, providing a structured way to pilot new approaches, generate insight, and share learning across the partnership. Rather than isolated projects, these pilots are operating as a coordinated system for innovation, laying the groundwork for identifying scalable models in the next phase.

CURRENT EVIDENCE OF PROGRESS

Early evidence demonstrates that the programme is generating tangible activity and outcomes, although full impact is still emerging in line with delivery timelines. Test & Learn pilots have mobilised over 100 active volunteers contributing approximately 10,000–14,000 hours, indicating both strong engagement and meaningful additional capacity within the system.

Alongside this, there are clear early outcome signals. These include improved access to volunteering opportunities, increased diversity in roles and participation, and better retention linked to more tailored and inclusive approaches. Though it's not VFH docus, there are also examples of progression into employment, suggesting wider social and economic value beyond our initial plans.

At an organisational level, partners are reporting increased capability and confidence, particularly in adopting more inclusive volunteering practices. This is reinforced by training outcomes, where participants consistently report high satisfaction and universal improvement in knowledge and understanding, with many identifying specific changes to their own practice.

Overall, the evidence indicates that the programme is successfully moving from activity to early outcomes, with a growing base of data and insight that will be critical for demonstrating impact and informing scale in the next phase.

WHERE WE ARE CONSTRAINED

Progress at this stage is being shaped less by delivery challenges and more by system-level readiness. While the programme has established a strong foundation, full integration into the wider health and care system has not yet been achieved, particularly due to the absence of a clearly defined role for volunteering within the planned Neighbourhood Care model and a lack of clarity on commissioning or funding routes.

Some of the programme's original ambitions—most notably volunteer passporting and mobility—have not progressed, largely due to limited appetite and concerns around data sharing, highlighting practical and cultural barriers to standardisation across the system.

In parallel, the programme is still developing a robust and consistent evidence base. While there is growing data from Test & Learn and delivery partners, system-wide insight remains incomplete, reflecting variation in data collection approaches and capacity across organisations.

Finally, partners continue to operate within significant capacity and resource pressures; rising service demand and reliance on short-term, fragmented funding. These factors limit the ability of organisations to fully engage in system development and pose ongoing risks to sustainability beyond the life of the programme.

Overall, these constraints are characteristic of a system in transition and reinforce that future progress will depend on system recognition of volunteering value, investment, and structural inclusion, rather than changes to programme delivery alone.

STRATEGIC POSITION AND RISK

The programme establishing a credible infrastructure, strong partnerships, and a functioning delivery model, positioning VfH Northants as a viable system-wide offer. But we remain at a transitional point between pilot delivery and system integration.

Without clear alignment to commissioning, sustained funding, and defined roles within emerging system structures, there is a significant risk that progress remains contained at programme level, rather than becoming embedded as core health and care infrastructure.

At this stage, the key strategic challenge is not proving ability to delivery but attempting system adoption, trying to translate value into long-term investment and structural inclusion.

WHAT'S NEXT

The immediate priority is to assess Year 1 Test & Learn activity, and commence of Year 2, using these to identify which models are effective, scalable and aligned to system priorities.

Alongside this, there will be a stronger emphasis on building robust evidence of impact through valuable data beyond simple NHS requirements. The University of Northampton evaluation will contribute to moving beyond activity data and demonstrate clear value to the health and care system.

Work will also focus on embedding the tools, training and shared approaches already developed by delivery partners, ensuring consistency and practical adoption rather than further design. At the same time, improving shared data and insight will be key to strengthening system-wide understanding.

Critically, the programme will aim to increase its focus positioning at system level, working to ensure volunteering is recognised within the emerging Neighbourhood Care model and wider system planning.

Overall, this phase represents a shift from **“testing what works”** to **“proving value and securing a place in the system.”**