Powys Association of Voluntary Organisations Cymdeithas Mudiadau Gwirfoddol Powys

Helping organisations; improving people's lives

**Evaluation of** 

2015-16 Intermediate Care Fund

**Powys Befrienders Pilot Scheme** 







April 2016



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## **Executive Summary**

Funded by the 2015-16 Intermediate Care Fund, PAVO, through PB and the PB delivery partner Crickhowell Volunteer Bureau (CVB), was tasked with delivering a pilot project for a total of 35 registered clients, both current Day Care Centre (DCC) clients from the DCC in Crickhowell and new clients over the age of 60 in the surrounding areas, working alongside the services that they already receive to provide added benefit to their lives.

The pilot sought to establish a safe and consistent service model that would demonstrate an increase in the health, well-being and independence of the registered clients, as well as a decrease in feelings of loneliness and isolation, whilst also providing demonstrable benefits for carers and the local community.

The project used a three tiered approach in response to the clients' needs, offering low level, focussed or group befriending as required, thus enabling a clear 'step up – step down' approach to client pathways and delivering a range of support and information to find solutions to everyday living at a local level, affording the clients choice and control.

It is clearly evident from the results that the project succeeded in its aim of increasing the quality of life for its clients, as well as providing additional benefits for all those who were involved in some way, including the volunteers, carers, the local community and the agencies that are responsible for ensuring that the clients' needs are met. Although all three tiers of befriending, low level, focussed support and group activities, were available to the clients, all of those who became actively engaged with the project participated in the group activities, occasionally with initial low level support to facilitate their attendance. None were identified as requiring focussed support and it is also worthy of note that, although signposting to other support agencies was available, only one individual, a carer, required this.

All clients, including those who currently attend the DCC and those who are resident in nursing homes, benefited from the increased opportunities for socialisation and stimulation. It is to be hoped that the initial reservations that it is understood were felt by DCC staff were overcome, given the positive outcomes for the clients.

The pilot service was to be compared with day care, but there were three exclusions, the project being unable to provide transport to the DCC, lunch or personal care. However, CVB arranged community and other transport as required and the activity also gave some clients the confidence to make arrangements for themselves, largely resolving this issue. The Lunch Club proved a resounding success and while at £6 - £8 per head the cost was greater than the £4.50 charge by the DCC, the added social interaction and change of scene was obviously, given the take-up, felt by many to merit the additional cost. The possibility of registration with CSSIW and providing training for staff to undertake personal care if required was investigated. After discussion with PCC it was agreed that this was not practicable and that a preferable solutions would be to consider buying this in for specific clients if and when required.

The model has the potential to be applied across Powys, with an infrastructure already in place not only in Brecon, Crickhowell, Llandrindod Wells, Llanidloes, Newtown and Ystradgynlais, the areas that are currently served by DCCs, but also in Builth Wells, Hay on Wye, Knighton, Presteigne Machynlleth, Rhayader and Welshpool, to provide the volunteers and community transport that are key to success of the activities.



However, in order to ensure consistency and equality of service across all areas, monitoring the safety and effectiveness of the delivery and liaising with statutory partners to ensure that the needs of the clients and the requirements of the agencies are met, it would be advisable to have in place an overarching third sector body to coordinate the activity.

The total actual costs incurred by CVB in delivering the project were £37,088, against a budget of £37,078. This equates to £1,060 for each of the registered clients, although this increases to £1,483 per head for those who actively participated and reported improvements. The costing model was based on that which was developed for PB and relied on a fixed sum payment for each client registered. If, therefore, the model's budget is extrapolated over a year the only costs that would increase are those related to the staging of the activities, including venues, transport and materials. Should the model be applied across Powys in the form suggested above, there will inevitably be economies of scale that could be made in respect of strategic oversight, liaison, management and delivery.

It has not been possible in the limited time available to carry out a Social Return on Investment analysis of the project but it is evident that, in addition to the minimum of £1,486 of social value that has been delivered by the volunteers, the funding has secured a significant amount of added social value for the community and if replicated across the county the return on investment for each pound spent would be greater still.

15<sup>th</sup> April 2016



# Introduction

Powys Befrienders (PB) is a five year BIG Lottery funded project delivered by Powys Association of Voluntary Organisations (PAVO) that is due to come to an end on 31<sup>st</sup> October 2016. The project has during the past four years provided both one-on-one and latterly group befriending, through both volunteer befrienders and paid staff, to more than 400 clients over the age of 50, to support them to maintain and improve their independence and wellbeing. The service is quality assured, having met the Quality in Befriending (QiB) quality standards in all 9 areas; the first befriending project for older people in Wales to have achieved this prestigious quality assurance standard. An interim evaluation report concluded that PB interventions produce measurable improvements, evidenced by 'Outcome Star' data, in the following:-

- Optimising independence
- Maximising wellbeing through choice and control
- Focusing on prevention

Funded by the 2015-16 Intermediate Care Fund, PAVO, through PB and the PB delivery partner Crickhowell Volunteer Bureau (CVB), was tasked with delivering a pilot project for current Day Care Centre (DCC) clients from the DCC in Crickhowell and new clients over the age of 60 in the surrounding areas, working alongside the services that they already receive to provide added benefit to their lives.

The project used a three tiered approach in response to the clients' needs, offering low level, focussed or group befriending as required, thus enabling a clear 'step up – step down' approach to client pathways and delivering a range of support and information to find solutions to everyday living at a local level, affording the clients choice and control.

The local outreach workers and volunteers worked in collaboration with Adult Social Services, Powys teaching Health Board (PtHB)and third sector organisations to ensure that all clients received the support that they require for all their needs, including transport, practical help, healthy living, volunteering opportunities and advocacy, forming a virtual community hub to link older and vulnerable people with multi-agency, cross-sectoral health and social care prevention services across the county.

The project offered group befriending services to increase the clients' independence, combat isolation and loneliness and to support them to re-engage with the community, utilising facilities and venues outside the DCC so that the clients experienced a change of environment. It used the community transport (CT) schemes in the town and ensured that clients were made aware of these options, thus supporting the take up of CT and public transport in the area.

This project was conceived to inform the redesign of services as part of the collaborative transformation agenda being pursued by all public service partners in Powys, to ensure the provision of effective and efficient care to individuals that increases their well-being, maintains their independence and combats isolation.



# Scope and methodology

The initial Project Inception Document (PID) was produced in October 2015 following discussions between PAVO and PCC and CVB began to recruit clients and volunteers from the beginning of November. However, further discussions led to the development of the final PID, which was agreed on 19<sup>th</sup> December 2015. It was only then that PAVO was able to enter into a formal SLA with CVB to ensure that all of the project milestones, outputs and reporting requirements would be met within the very challenging timeframe, as the project funding was allocated for the period to 31<sup>st</sup> March 2016.

The agreed project outcomes were:-

Current DCC Clients:

- Increased health and wellbeing
- Increased self-confidence
- Developing further independence
- Improved social integration and involvement
- Develop wider social network

## Non DCC clients:

- Increased health and wellbeing
- Increased self-confidence
- Developing independence and new ways of engagement with groups/local community activities
- Expand social circles
- Increased community resilience by connecting people with similar need to help support each other

## Carers:

- Increased wellbeing of carer
- Access to other third sector support and information for carer
- Increased amount of respite time for carer

## Organisational (PAVO):

- Establish a safe and consistent early intervention, support and befriending service model for adults and older people across Powys
- Develop an evidence-based approach, thereby increasing the potential to identify a range of sources for additional and alternative funding.
- Effective multi-agency collaboration
- More comprehensive use of local service and facilities
- Building local community capacity and awareness of support



Prevention:

- Identify new or escalation care needs
- Provide signposting and where needed, fast track referrals
- Promote health and independence
- Reduce social isolation
- Support clients to reach their goals through person-centred planning
- Increased good mental health and wellbeing, leading to improved physical health.

The exclusions that were identified were:-

- The project is unable to directly provide transport for the current clients to the Day Centre, although clients will be provided specific support to access community transport services, should this be needed.
- The project is unable to provide lunch for the current Day Centre clients. However, clients will be supported to access local facilities.
- The project is unable to provide any personal care at present. Where personal care support is required, the project will link with Adult Social Care to provide this support. However, the pilot will research the possibility of increasing capacity to provide this support.

Given the limited timeframe available to carry out the evaluation of the project, it has not been possible to conduct any face to face interviews with clients or other stakeholders and this report is therefore based on the following sources of evidence and data, supported by telephone interviews with CVB and PB staff:-

- Bi monthly output monitoring reports and case studies
- Client referral forms
- Outcome stars (initial and final)
- Satisfaction surveys
- Surveys of resource providers

A three tiered approach to providing befriending services was postulated in the PID:-

- Low level informal one on one befriending, carried out by volunteers
- > Focussed befriending support for clients with higher needs, carried out by project staff
- Group activity sessions, delivered primarily by volunteers but supported as necessary by project staff

The client referral forms identified group activity as the main need for all of the clients and it is therefore this element that is the main focus of the report.



# Results

The following table details the agreed outputs and associated indicators:-

Outputs	
Maintain a good level of independence and self-confidence for clients	
Extend the level of activities outside the DCC services	
Opportunity to participate in different pursuits	
Access to a wide range of support, services and information	
Indicators	Target
Number of users of the pilot service	
Number of users overall of the service.	35
Number of volunteers delivering the service	
Number of volunteers involved overall in the delivery of the service.	10
Number of clients demonstrating an increase in independence	
Find independent living solutions via whole system approach, utilising person centred planning and the outcome star	20
Number of clients demonstrating an increase in wellbeing	
Increase the quality of life through a range of activities, focused support or low level befriending	35
Number of clients demonstrating a decrease in feelings of loneliness	20
Number of clients demonstrating a decrease in feelings of isolation	
Combat loneliness and isolation, preventing and alleviating the effect it has on the physical and emotional wellbeing of clients.	30

The data submitted by CVB demonstrated high levels of achievement against all of the indicator targets. This achievement is analysed in more detail below, to determine whether or not this equates to attainment of the desired outputs and outcomes.



## **Clients' profile**

35 clients were registered with the project, meeting the agreed target. It should be noted that the 101<sup>1</sup> clients who were already registered with PB in the Crickhowell area were not eligible to participate in the pilot. 23 of the 35 current DCC clients agreed to register and the remaining 12 who registered were new clients who do not attend the DCC. Overall they ranged in age from 61 to 97, with an average age of 85, the average for DCC clients being 83 and for non DDCC clients being 89.

Of the DCC clients registered, 3 are male and the remaining 20 are female. All 12 of the non DCC clients registered are female. The sample was therefore overwhelmingly (93.4%) female, which is not representative of the general population of Powys, where 47.5% of those over the age of 60 are male and 52.5% are female<sup>2</sup>. Even for those over the age of 90, which 11 (31%) of the pilot clients are, the percentages are still 29.5% male and 70.5% female. Should this project be mainstreamed, it would be worthwhile to carry out further study to identify why males in the target group have not embraced these activities and any changes that could be made that might make them more likely to do so<sup>3</sup>.

The registration forms indicated that the clients experienced a range of health and wellbeing issues, including but not confined to mobility problems and dementia, as illustrated below. For example, one client has been diagnosed with Alzheimer's but is very mobile and quite positive. She wants to be part of the community, would enjoy company and could benefit from attending a memory café. She also enjoys films. When asked to assess their mental health at the beginning of the pilot, on a scale from 1 (poor) to 10 (excellent), the average was 5, with scores ranging from 1 (2 DCC clients) to 8 (1 DCC and 1 non DCC client).



<sup>&</sup>lt;sup>1</sup> There are currently potential PB clients on a waiting list

 $<sup>^{2}\</sup> http://pstatic.powys.gov.uk/fileadmin/Docs/Statistics/Themes/Population/Powys2014MYEbroad\_unroundedforpublication\_en.pdf$ 

<sup>&</sup>lt;sup>3</sup> Data was not provided on the male/female ratios for all DCC clients.



Of the 23 DCC clients, 13 (57%) live alone and 9 (39%) received personal care. 16 (81%) consider themselves to be disabled, although only 12 (52%) are registered as such. Of the 12 non DCC clients, 3 (25%) live alone and 8 (75%) receive personal care, 7 of whom live in a nursing home. Only 4 (33%) consider themselves to be disabled (all of whom are over 90!) although only one of these is registered as such.

The overwhelming reason given by 94% of all participants, both DCC and non DCC clients, for wanting to take part in the pilot was to combat loneliness and isolation and all expressed a wish for company and the opportunity to participate in group activities. There did not seem to be any less interest in these benefits from those clients who are currently attending the DCC. Although the three tiered approach provided the opportunity for low level, focussed and group support, as stated above<sup>4</sup> the group sessions were identified as the preferred solution for all 35 clients.

Reasons for registering for DCC clients included:-

'I am new to the area and get quite lonely as my daughter works full time ... and I don't know many people. To get out of my flat more and join in some groups as I'm good at needlework and knitting' *Female aged 90* 

'It would be nice to get involved in a group activity especially exercise and memory games. Don't think I need very much support other than to get to and from venues' *Female aged 84* 

'Feels quite isolated and lonely on occasions. Eyesight very poor. Would just like company really to feel part of the community and be more sociable' *Female aged 90* 

'I don't get out anymore unless it's to go to the doctors so would enjoy joining groups that will enable me to interact with people again. I would need help with transport to get to the groups' *Male aged 78* 

'It would be nice to have more company. Someone to talk to and I enjoy films - just company really' *Female aged 86* 

Reasons for registering for non DCC clients included:-

'I like company and the social events sound like a good idea. Time can be very long when you are on your own. I don't need a lot of support but enjoy company' *Female aged 86* 

'Days can be very long it would be nice to have something different to do, and to get out (weather permitting). Someone to talk to' *Female aged 95* 

'To be in company and try something new, just company.' Female aged 94



# Activities

During November and December only a few activities were scheduled, as CVB focussed on recruiting and assessing the needs of their clients, as well as recruiting volunteers to deliver the activities and support the clients, ensuring also that they were appropriately trained. From January to March a weekly programme of events was scheduled for three or four days each week. The activities were developed in response to demand and included the following:-

- Lunch Club
- Art and Crafts
- Knit and Natter/Memory Books
- Cake and Company
- Nails/Massage
- Singing
- Board games
- ➢ Film Club

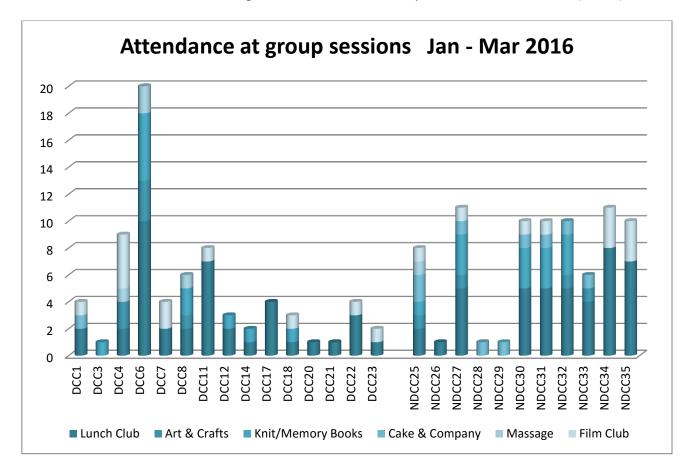
The activities were scheduled to last for approximately two hours and are, apart from the Lunch Club, provided at no cost to the client. If the client was collected and driven to the group by a volunteer driver using their own car, this was also at no cost to the client, although the volunteer would be reimbursed at an agreed mileage rate through the project funding. This practical support to attend the group equates to low level befriending, with the volunteer giving one on one attention to ensure that the individual was able to participate in the activity. Anecdotally it would seem that once the clients gained confidence in the group they were often able to attend independently, using Dial a Ride, taxis or community transport, which again would all be free to the client and paid for through the project. The activities themselves were delivered for the most part by volunteers, although paid CVB staff made all of the arrangements for the sessions and delivered them where required.

Of the 23 current DCC clients who registered, 8 did not take part in any of the group activities on offer, although they had expressed a wish to do so. This was mainly for health related reasons, including hospitalisation. All 8 were made aware, as part of the initial assessment process, of the support and information that is available to them to meet their needs and were regularly contacted to inform them of planned sessions, in case they were well enough to attend. 3 clients attended only once and the remaining 12 attended an average of over 5 times each throughout the period.

Of the non 12 DCC clients, only 1 did not participate in at least one group activity, for health related reasons, 3 attended only once and the remaining 7 attended an average of almost 11 times each. This greater take up of activity may be assumed to derive from the fact that these clients were not committed to attending the DCC. Overall, the 26 client who did participate in group activities attended a total of 151 times, with the 15 participating DCC clients attending a total of 72 sessions and the 11 participating non DCC clients attending a total of 79 sessions.



The chart below illustrates the range of activities attended by both DCC and non DCC (NDCC) clients.



Providing lunch for the DCC clients was one of the exclusions in the PID; however, CVB negotiated discounted rates with local pubs and restaurants and the Lunch Club proved to be the most popular activity, although it is the one for which a charge, of between £6 and £8, is made. The Lunch Club received 81 visits in total from 23 clients; 14 of the DCC clients attending a total of 39 times (10 only attending once or twice), while 9 of the non DCC clients attended a total of 42 times, with 2 attending only once or twice. It is probable that the lower take up from the DCC clients is a reflection of the fact that they are able to buy lunch at the DCC for £4.50.

Comments on the Lunch Club included:-

'I enjoyed going out for lunch in good company' DCC female client aged 90

'Quite lively, lunch groups have been very sociable and have enjoyed the films so far' *DCC male client aged 83* 

'The group I attended was lunch and it was lovely. I saw some people I didn't know and had a good time with them' *DCC female client aged 88* 

'The lunch clubs have been very enjoyable; it is nice to see different people – although I mostly know them all! Something else to look forward to' *Non DCC female client aged 85* 



The next most popular activities were the Knit and Natter/Memory Books sessions and the Film Club, where the following films have been screened:-

Mr Christmas The Best Exotic Marigold Hotel Dream Alliance The Lady in the Van A Walk in the Woods Theory of Everything Kings Speech He Named me Malala

7 of the DCC clients attended a total of 11 screenings and 6 attended 11 Knit and Natter/Memory Book sessions. 6 of the non DCC clients attended a total of 10 screenings and 5 attended a total of 13 Knit and Natter/Memory Book sessions. The Arts and Crafts sessions are growing in popularity, as are the Cake and Company ones, particularly with non DCC clients; of the 9 attending a total of 10 sessions, 8 are non DCC. This may be because these sessions are held from 3.00pm - 4.30 pm, while the majority of others are scheduled for 1.00pm - 3.00pm, as feedback from the clients revealed that most have difficulty in preparing themselves for sessions that begin at 10 am. The massage sessions are also building a loyal, if limited clientele. The one planned activity that did not take off was singing, which was replaced by Board Games, which attracted 8 clients, 3 DCC and 5 non DCC to the first session.

Comments on the activity sessions included:-

'... I enjoyed knitting and chatting with people I don't usually see' DCC female client aged 93

'I have had such fun meeting new people and trying my hand at old and new skills' *DCC female client aged 81* 

'... I have really got into art and knitting again. It is great to talk to other people' *DCC female client aged 78* 

'I have had a good time at the group I've attended, even doing art and knitting!! The people I have met have been lovely and so easy to talk to' *DCC female client aged 85* 

Feedback on the group activity sessions has been overwhelmingly positive, as the illustrative studies below demonstrate<sup>5</sup>. However, while every effort is made by those running the sessions and the supporting volunteers to ensure that all clients are comfortable with the activities, the following comment was received from a DCC female client aged 87, who suffers from Dementia and feels most comfortable in the quieter setting of the DCC:-

'Mostly quite good – not too sure what's going on all the time but have been to a couple of events. Day centre is comfortable and quiet – quite content'

<sup>&</sup>lt;sup>5</sup> All necessary permissions have been obtained for the use of stories and images



## Case study A

A is an 81 year old woman who has lived a very active life and loves horses. She lives with her husband who has failing eyesight and poor health and also her brother-in-law. With the help of carers for her personal needs she manages quite well in. A is well known around the locale and was, in the not too distant past, a visible presence most days shopping in the town with her horse and trap. A has been a visitor to the DCC for a few years and was at one time a member of Dial a Ride Unfortunately neurological damage to her lower body has left A with very poor mobility and the outcome of this is that trips with Dial a Ride have become less convenient, so her only social contact these days has been her visit to the DCC.

We first came across A at the DCC in Maes-y-Ffynnon where she goes once a week. During our initial conversation with her, she told us that she gets extremely frustrated and depressed as her mind wants to do things but her body is letting her down. She struggles with mobility and also suffers from epilepsy. When we introduced to the idea of social groups to A she was very interested, especially in arts and craft, film and the Lunch Club, but was extremely concerned as to how get to these events.

We assured A that we would arrange transport for her and one of our volunteer drivers would pick her up and get her safely to the groups and home again. The first group that A attended was the showing of The Best Exotic Marigold Hotel, which she and the others attending thoroughly enjoyed. After this A attended the arts and craft group where, as well as making a calendar, she read to the group some of her own poetry, which was lovely for the ladies who were there.





Craft work and memory books

A has expressed on a number of occasions how delighted she is to have the groups to look forward to and has phoned the office regularly to make sure she is booked in on the groups that she is interested in.



Sadly, a month to six weeks ago A had an epileptic fit which caused her to fall on the stairs and was followed by a stroke. A was in hospital for a while and her mobility has increasingly deteriorated, resulting in her having to use a wheelchair on a more regular basis.

We kept in touch with A by phone and were delighted when she asked if it would be possible for her to attend our film group. We arranged for two of our volunteers to pick her up and she came to watch The Theory of Everything. Chatting with A before the film started it was clear that her speech had become somewhat slurred and she has real difficulty swallowing, but her amazing spirit had her telling us jokes and enjoying the film. We are hoping that A will be able to join us at the lunch club before too long as her health improves, but in the meantime she has put her name down to attend a couple of other groups, where she can be with other people and enjoy whatever is on offer!

# Case study B

B is an 85 year old lady who lives on her own in Warden controlled flat. She has lived in and around Crickhowell all her life and has had a very active past. Her family are not too far away and she attends day centre three times a week and has meals on wheels in her own home one day a week.

B is very lively and loves company but finds time long when she is on her own. This lady has poor vision; she has only one eye but does not let this stop her from doing anything that she can.

B came to her first session just before Christmas and really enjoyed her time she engaged in conversation with the other clients and also the volunteers.

This year B has attended 2 of the 3 groups and has really enjoyed herself; she said it is lovely to have something new to look forward to, I didn't think I would be able to take part in the craft due to my eyesight but with a little bit of help I was able to make a calendar, which I am really pleased with. I will come again.

B has taken part fully in the activities and has expressed a wish to bring along a friend who she meets at home on a Thursday and who also attends the Day Centre. B's daughter has also sent in a note saying how much her Mum is enjoying her time with other people and has found some wool which may be of use in the knitting group next week.

There is an energy and enthusiasm for the activities among the clientele and it should be noted that CVB are currently<sup>6</sup> continuing to deliver the group sessions under the aegis of the PB project, with 7 DCC and 11 non DCC pilot clients indicating that they would like to sign up as PB clients. However, the funding for that project terminates at the end of October 2016 and these activities will not be sustainable beyond that date unless continuation funding can be identified.

<sup>&</sup>lt;sup>6</sup> From 1<sup>st</sup> April 2016



## Volunteers

11 volunteers were recruited to provide support and deliver the activities exceeding the target of 10. The volunteers would meet up before a session with any clients who felt anxious about joining the groups for a chat in their home setting, to build up a rapport, and would then accompany them to the group. It has not been necessary to repeat this for most clients, as many gained the confidence to take community transport to subsequent activities once they had become familiar with the members of the group. It has been reported that on occasion, and weather permitting, volunteers have pushed wheelchair bound clients from their homes to the activities if the Dial a Ride facility was not available, such is the enthusiasm for the project and their clients.

While volunteer hours were not recorded, each of the 43 group sessions that were arranged was attended by at least 3 volunteers. Most session lasted for two hours, which was the optimum time to ensure that the, mainly very elderly, clients did not become overtired. Allowing an additional hour for supporting clients to and from the sessions, it can be assumed that a total of at least 129 volunteering hours have been contributed to the project for the period from January to March. Based on the average hourly wage in Powys of £11.52 per hour<sup>7</sup>, this can be valued at £1,486.08.

## **Client outcomes**

## a) Increase in Independence

The target was that 20 clients demonstrate an increase in independence. This was measured by assessing the aggregated data across each of the outcome star areas:-

- Staying as well as you can
- Keeping in touch
- Feeling positive
- Being treated with dignity
- Looking after yourself
- Feeling safe
- Managing money

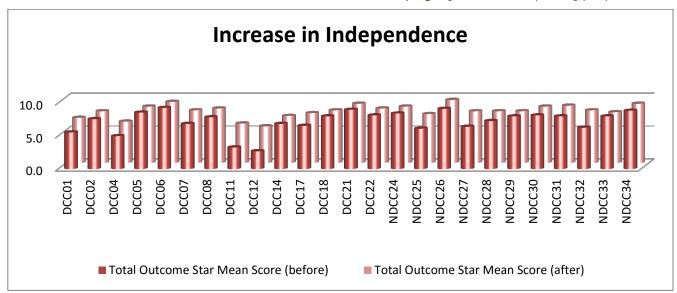
Each area is scored as follows:-

- 9-10 As good as it can be
- 7-8 Choice and control
- 5-6 Meeting basic needs
- 3-4 Talking about it
- 1-2 Cause for concern

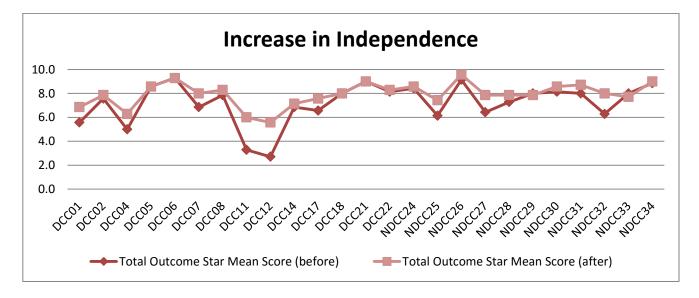
The results for the 25 clients who completed initial and final outcome stars demonstrated improvement in their average of the scores across all of these areas, as illustrated below.

<sup>&</sup>lt;sup>7</sup> <u>http://www.neighbourhood.statistics.gov.uk/HTMLDocs/dvc126/</u> £432 fte/37.5 = **£11.52** 





It can be seen from the line chart below that there was an across the board increase in average scores at the end of the pilot for both DCC and non DCC clients, even among those who scored in the higher range at intial assessment.



Comments that are illustrative of this included:-

'I have enjoyed meeting people, have had a good laugh and joined in when I was there. I need to make myself do more as I do enjoy these occasions' *DCC female client aged 84* 

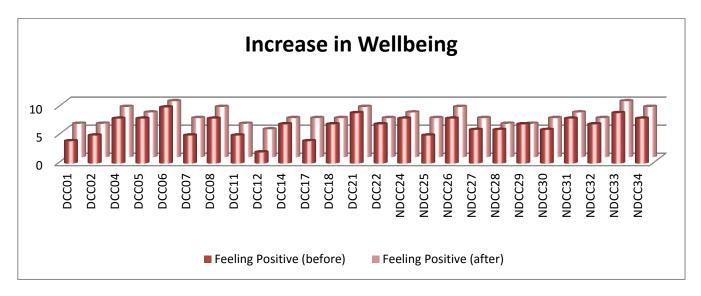
'The groups I have been to have been very good. I have met new people and have been given interesting things to do. The time spent was very pleasant' *DCC female client aged 91* 

'It has been very good to get out and see other people. I have enjoyed myself and have found that I look forward to the phone calls telling me what is going on. It is such a pleasure to do something different' *Non DCC female client aged 87* 

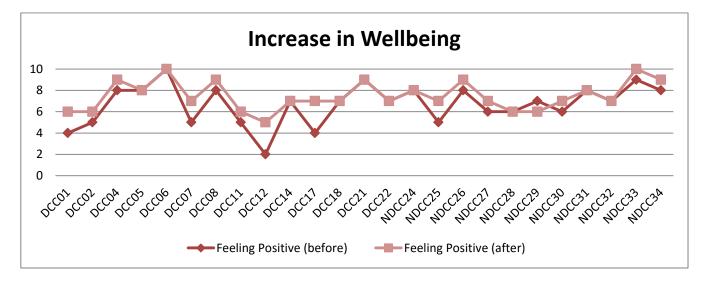


# b) Increase in Wellbeing

The target was that all 35 clients demonstrate an increase in wellbeing, and this was measured by assessing the improvement in the 'feeling positive' element of the outcome star. However, as stated above, for reasons of ill health not all registered clients were able to participate in the activities and could not, therefore, complete the outcome star process.



Of the 25 who did complete the process, all DCC and non DCC clients demonstrated an increase in their scores, with all scoring at least 5 and most scoring over 6 at the end of the pilot.



Comments that are illustrative of this increased positivity included:-

'It was nice to see other people and I enjoyed the company' DCC female client aged 86

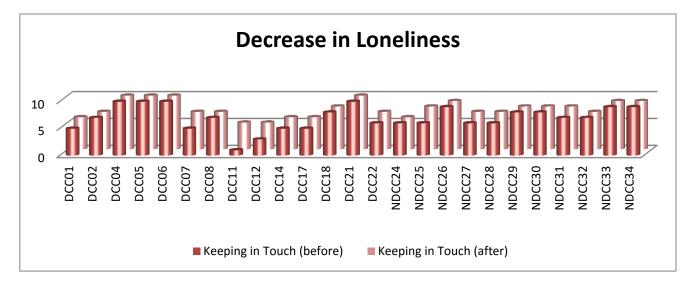
'Helps to keep my mind active taking part in new things and meeting different people' *Non DCC female client aged 95* 

'I like going out and enjoy trying new things' Non DCC female client aged 90

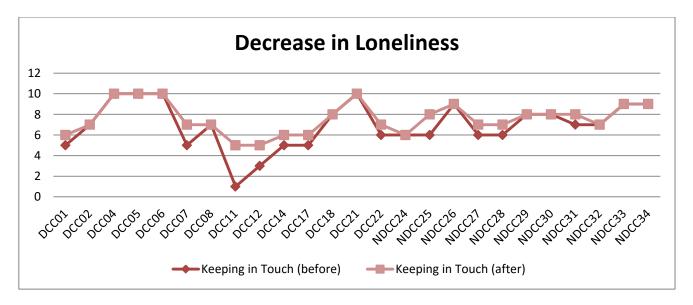


# c) Decrease in Loneliness and Isolation

The targets were that 20 clients demonstrated a decrease in feelings of loneliness and that 35 demonstrated a decrease in feelings of isolation, thus preventing or alleviating the effect that these have on both physical and emotional wellbeing. The former was measured by assessing the improvement in the 'keeping in touch' element of the outcome star. The latter was not assessed directly through the outcome star, although it may also be inferred from the 'keeping in touch' element. It is however clearly illustrated by the very positive feedback and comments received from all participants.



Once again there was an increase shown for both DCC and non DCC clients in this area. 7 DCC clients and 6 non DCC clients did not evidence a change, but these already had a relatively high score, of at least 6, in this area.



Feedback on the group activities demonstrates a very positive effect, with consistent use of terms such as 'company', 'meeting', 'less lonely' and 'less isolated' enabling the inference to be drawn that feelings of isolation have been reduced.



Comments included:-

'It is lovely to meet other people and to do something different. It gives me a break from home and we have got to know quite a few people' *Non DCC female client aged 72* 

'I have enjoyed getting to know people and doing different things. Makes me feel less lonely' *Non DCC female client aged 96* 

'Makes me feel quite lively when I go out seeing new faces and trying new things can be quite good – tiring on occasions' *Non DCC female client aged 93* 

'I like going out and enjoy trying new things' Non DCC female client aged 90

'It helps to meet other people – makes you feel part of the outside world' *Non DCC female client aged 95, living in a nursing home* 

'I enjoy meeting new people and doing something different makes a change to the week and breaks up the monotony' *Non DCC female client aged 75* 

'Helps to keep my mind active taking part in new things and meeting different people' *Non DCC female client aged 95* 

'I enjoy the time with others – it makes me feel less isolated and less lonely' *Non DCC female client aged 94* 

## Added Social Value

## Carers

2 of the DCC clients stated that they were supported by a carer<sup>8</sup>. These carers indicated, through the satisfaction survey, that they were very satisfied with the support and activities that the person that they are caring for had received through the project and that the amount of respite that they experienced had increased by a few hours, from 'not enough' to 'adequate'. This in turn had a positive impact on their health and wellbeing, which they felt had increased.

One of the carers already had access, prior to the pilot, to all of the information and support that they required and was not signposted to additional support. The other did not have such access and expressed their dissatisfaction with being kept on hold for at least 30 minutes when attempting to gain information from Adult Social Services. They were referred to the Community Transport Car Scheme by the pilot project staff, which provided the support that they sought.

<sup>&</sup>lt;sup>8</sup> 7 of the non DCC clients also considered that they have a carer but as they live in nursing homes it was felt that this was outside the scope of the report.



## Volunteers

In addition to the economic contribution of at least £1,486.08<sup>9</sup> that the 11 volunteers brought to the project over a 3 month period, it is well documented that they themselves will derive both mental and physical benefits from their volunteering experience, while also improving their connection to the community and making it a better place. Volunteering can<sup>10</sup>:-

- help to make new friends and contacts
- increase social and relationship skills
- ➢ learn new skills
- increase self confidence
- provide a sense of purpose
- combat depression
- help to maintain physical health
- bring happiness

Research by the London School of Economics<sup>11</sup> examined the relationship between volunteering and measures of happiness in a large group of American adults and found that the more that people volunteered, the happier they were. Compared with people who never volunteered the odds of being 'very happy' rose 7% among those who volunteer monthly and 12% for those who volunteer every two to four weeks. Among weekly volunteers, 16% felt very happy!

Although no information was sought from the volunteers on their experience, it is may well be inferred that a similar benefit was derived by them, given the very positive outcomes reported by the clients. They received all necessary training, including PoVA, MIDAS and First Aid, to ensure that the service was delivered safely and were subject to DBS checks, thus equipping them to continue to provide befriending within their community.

In addition, this positive experience will provide additional evidence for PAVO's Powys Volunteer Centre in the ongoing work to recruit volunteers, including those for organisations that operate in the field of Health and Social Care.

## **Community resources**

The pilot was designed to ensure a more comprehensive use of local services and facilities and build local community capacity and awareness of support. The main community resources involved were:-

- Volunteers
- Transport
- Venues
- Cafes, pubs and restaurants

<sup>&</sup>lt;sup>9</sup> Page 15

<sup>&</sup>lt;sup>10</sup> http://www.helpguide.org/articles/work-career/volunteering-and-its-surprising-benefits.htm

<sup>&</sup>lt;sup>11</sup> Simple Changes, Big Rewards: A Practical, Easy Guide for Healthy, Happy Living (Harvard Health Publications)



The undoubted contribution of the volunteers directly involved in the pilot has been examined previously. However, it must be borne in mind that the transport element of the project was also heavily reliant on Community Transport volunteers. During the pilot CVB booked 39 Community Car journeys and 13 Dial a Ride bus journeys for their clients to attend the group sessions, as well as 12 private taxis, thus making a contribution to the sustainability of the third sector schemes as well as supporting local private enterprise.

Feedback from the Dial a Ride service indicated that, due to other demands on their service, the number of occasions on which they could provide a mini bus were limited, but it appears that the gaps were filled by community cars. There is anecdotal evidence that clients gained confidence to arrange their own transportation, so it is entirely possible that the use of both third sector and private transport may be greater than reported.

Many of the activities were held in either the Parish Hall or the local Resource Centre and survey responses have confirmed that this has been a welcome additional source of revenue for each of the venues.

The Lunch Club has perhaps brought the most surprising additional benefit to the local business community, with local cafes, pubs and restaurants providing group discounts for the meals but still benefitting from the increase in trade. There has also been a raised awareness of the support that is available and it appears that the happiness factor has spread a little further as well!

## Comments included:-

'It made me realise that doing something as commonplace as going out in company for a pub lunch is not an easy option for some for a variety of reasons; lack of transport, social exclusion (which occurs for a multitude of reasons), fragile health, physical or mental disability. The list is endless.' *Local pub owner* 

'We are a perfect stop for groups such as the Powys Befrienders and would welcome them back. We benefit from additional sales of food/drink in our Restaurant and Tea Room or within the Garden Centre and Farm Shop' *Local Market Garden* 

'Lovely that they come in, nice to see them and to see them enjoying themselves. Nice for everyone, nice all round.' *Local pub owner* 

'People have come and eaten with us and we enjoy their company' Local golf course

# Knitting!

One entirely unforeseen way in which the project has provided added social value is a by-product of the Knitting and Natter sessions. Twiddle mitts or memory mitts were originally used for people living with Dementia. They are knitted out of any odd bits of yarn and have buttons, bells, different textures - anything that adds another dimension to the mitt.



It has been found that not only does 'twiddling' with the attachments and textures promote calmness and reduce anxiety, but the mitt can also detract a patient's focus from a cannula in the hand. These were suggested at the knitting group as a project that everyone could dip in and out of and proved a great success, with the mitts being produced by clients and volunteers alike. They will be donated to a local hospice, so that they clients themselves are gaining personal satisfaction in giving something back to the community.





Knitting, natter and twiddle mitts!

# Conclusions

It is clearly evident from the results that the project succeeded in its aim of increasing the quality of life for its clients, as well as providing additional benefits for all those who were involved in some way, including the volunteers, carers, the local community and the agencies that are responsible for ensuring that the clients' needs are met. Although all three tiers of befriending, low level, focussed support and group activities, were available to the clients, all of those who became actively engaged with the project participated in the group activities, occasionally with initial low level support to facilitate their attendance. None were identified as requiring focussed support and it is also worthy of note that, although signposting to other support agencies was available, only one individual, a carer, required this.

All clients, including those who currently attend the DCC and those who are resident in nursing homes, benefited from the increased opportunities for socialisation and stimulation. It is to be hoped that the initial reservations that it is understood were felt by DCC staff were overcome, given the positive outcomes for the clients.

The pilot service was to be compared with day care, but there were three exclusions, the project being unable to provide transport to the DCC, lunch or personal care. However, CVB arranged community and other transport as required and the activity also gave some clients the confidence to make arrangements for themselves, largely resolving this issue. The Lunch Club proved a resounding success and while at £6 - £8 per head the cost was greater than the £4.50 charge by the DCC, the added social interaction and change of scene was obviously, given the take-up, felt by many to merit the additional cost. The possibility of registration with CSSIW and providing training for staff to undertake personal care if required was investigated. After discussion with PCC it was agreed that this was not practicable and that a preferable solutions would be to consider buying this in for specific clients if and when required.



The model has the potential to be applied across Powys, with an infrastructure already in place not only in Brecon, Crickhowell, Llandrindod Wells, Llanidloes, Newtown and Ystradgynlais, the areas that are currently served by DCCs, but also in Builth Wells, Hay on Wye, Knighton, Presteigne Machynlleth, Rhayader and Welshpool, to provide the volunteers and community transport that are key to success of the activities. However, in order to ensure consistency and equality of service across all areas, monitoring the safety and effectiveness of the delivery and liaising with statutory partners to ensure that the needs of the clients and the requirements of the agencies are met, it would be advisable to have in place an overarching third sector body to coordinate the activity.

The total actual costs incurred by CVB in delivering the project were £37,088, against a budget of £37,078. This equates to £1,060 for each of the registered clients, although this increases to £1,483 per head for those who actively participated and reported improvements. The costing model was based on that which was developed for PB and relied on a fixed sum payment for each client registered. If, therefore, the model's budget is extrapolated over a year the only costs that would increase are those related to the staging of the activities, including venues, transport and materials. Should the model be applied across Powys in the form suggested above, there will inevitably be economies of scale that could be made in respect of strategic oversight, liaison, management and delivery.

It has not been possible in the limited time available to carry out a Social Return on Investment analysis of the project but it is evident that, in addition to the minimum of £1,486 of social value that has been delivered by the volunteers, the funding has secured a significant amount of added social value for the community and if replicated across the county the return on investment for each pound spent would be greater still.

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Thanks are due to the staff of Crickhowell Volunteer Bureau for the additional information provided to inform this report and to Sioned Jones Pritchard, PAVO Powys Befrienders Admin Officer, whose support in processing the pilot data has been invaluable.

15<sup>th</sup> April 2016