

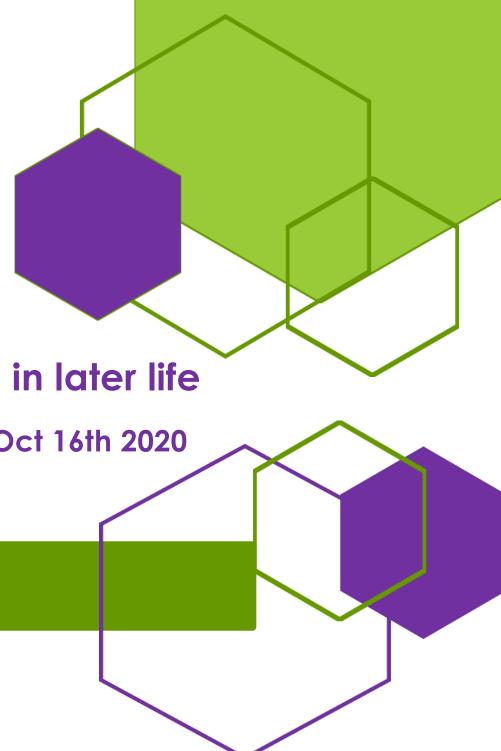
Age UK Doncaster

Circles for independence in later life

Four year evaluation: Oct 17th 2016 - Oct 16th 2020

Evaluation Report

November 2020



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Please note: this evaluation report uses case studies, but we have changed the names of all participants.

Executive Summary

About Age UK Doncaster

Age UK Doncaster is an independent charity (no. 1077339) founded in 1999 which has grown to become the largest charity supporting older people in the Metropolitan Borough of Doncaster. It is part of the Age UK network, which includes 130 local Age UK charities across England.

Overall, the area covered by Doncaster Council has a population of 311,890 (ONS, 2020) with approximately 17% of the population over 65, a slightly higher proportion than England as a whole. Doncaster is the 4th most deprived area of Yorkshire and the 48th most deprived of England's 326 local authorities (DMBC, 2016). Age UK Doncaster supports local older people in need, particularly those who live in poverty, are socially isolated, in poor health and/or have caring responsibilities. In a typical year, they support over 3,000 people, helping to increase their health, wellbeing and independence through the following primary services:

- 1. Home Care helping older people with care needs, including bathing, dressing and shopping.
- 2. Information and Advice helping older people living in poverty claim benefits and other entitlements.
- 3. Home for Hospital help with recovery from a hospital stay.
- 4. Ageing Well empowering and supporting older people in Doncaster to live and age well.
- 5. Circles for Independence in Later Life community volunteers providing co-ordinated support to maintain an older person's independence.

Age UK Doncaster is independently inspected by the Care Quality Commission. In 2020, the charity was rated as 'Good'.

About this external evaluation report

In 2016, Age UK Doncaster received a five-year grant of £499,815 from the National Lottery Community Fund (NLCF) to develop a new project called Circles for Independence in Later Life, or 'Circles'. The project aimed to build the social connections and independence of 374 older people at risk of losing their independence through hospitalisation or care home entry. It would achieve this by creating Circles of Support for beneficiaries, a support model championed by project partners Community Circles. The project had four intended outcomes: i) increased ability to manage health and stay independent; ii) better wellbeing and physical health; iii) reduced isolation and more community participation; iv) benefits for families and volunteers.

In June 2018, Age UK Doncaster asked Capidale to externally evaluate the service, and to structure our report around the '4+1 Questions':

- 1. What has the Circles team tried?
- 2. What has the Circles team learned?
- 3. What can the Circles team feel pleased about?
- 4. What concerns might the Circles team have?

And, finally, what might the Circles team think about doing next?

Methodology

Capidale was commissioned to prepare an external evaluation report. Our evaluation takes a mixed methods approach, drawing on both quantitative and qualitative methods of data collection.

Conclusion & recommendations

What can the Circles team feel pleased about?

1. Older people supported by the Circles team are substantially benefitting

- Almost all (96%) of Circles beneficiaries feel the project is helping them achieve their goal
- A large majority (87%) of people supported by the project feel more confident about staying living independently
- Three quarters (76%) of people supported felt less lonely and 75% have improved mental wellbeing

2. The Circles team has provided effective support during Covid-19

The team has adapted their support model quickly to ensure some of Doncaster's most vulnerable residents have received the help and support they need during Covid-19. This has included using phone support and they may wish to explore using this and digital technology more in future.

3. Volunteers are also substantially benefitting from the project

- Almost all (92%) of Circles volunteers feel the project has increased their mental wellbeing
- Two thirds (67%) say the project has helped them better understand how to maintain their own health and wellbeing in later life
- Over half (58%) say the project has increased their own social connections

4. The Circles team has created a successful, flexible model that is highly valued by internal and external stakeholders

Stakeholders we spoke to were clear about the unique nature of goal orientated, person-centred support the Circles project provides and where the project fits with the range of other support options available to older people. They hold the project in high regard.

What might the Circles team feel concerned about?

1. The project has directly supported fewer people than originally expected

The Circles project has been through a significant learning journey over the last four years as the original model needed to be adapted to work successfully for older people living in a community setting. It is perhaps unsurprising that the project has not directly supported as many people as planned. However, 173 people have benefited, including 133 who received direct support, and 40 helped to find support appropriate to their needs.

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2. An objective of matching one volunteer to one older person is probably unrealistic

The target of recruiting and training 374 volunteers was very ambitious, and no allowance was made for volunteer attrition. This has caused difficulties, but the team has evolved a flexible approach which uses volunteers effectively. Future plans should probably rely on fewer volunteers.

3. There is a lack of clarity over how and when Circles relationships should come to an end

Previously, the Community Circles model has successfully supported people with learning difficulties in supported accommodation where a Circle may be in place for some years. The Circles project supports older people nearing the end of their lives, often on a downward health trajectory, and support is likely to be shorter. Staff wanted a clearer process as to when their support should end and how to help people find alternative provision.

4. Evaluation processes have not kept pace with the project's evolution and, as a result, there is a gap in some evaluation data. The project has moved some way from the original envisaged model and data collection processes have not kept pace, as a result some processes have felt cumbersome and inappropriate to staff and, as a result, have not always been fully applied. This has created a gap in some data.

What might the Circles team do next?

1. Keep what is working: a clear focus on goals, effective tools and a flexible approach

The project has achieved very good outcomes for older people, through a clear focus on supporting people wishing to make positive change and using effective, person-centred tools to define substantive goals. The team should retain their flexible approach to helping people achieve their goals. In future, this could include greater use of telephone support and digital technology as a way of helping people achieve their goals.

2. Develop a clear exit process that is time-flexible according to need

We recommend the team develops a clear exit process so that people who no longer need or will benefit from Circles support are helped to find alternative provision. The length of support should be flexible. This will reduce the risk of dependency and free up capacity for new referrals.

3. Consider evolving the model from a 'Circle of Support' to a 'Family of Support'

During our interviews, people often referred to the project as a 'family'. We were also intrigued by a concept of moving to a more local model which project staff raised. We have expanded on this idea on page 36, we think it has significant merit and would build on the idea of 'family'.

4. Develop a simple, universally applied monitoring and evaluation process

We recommend that evaluation tools are simplified so the Circles team are comfortable using them with all project beneficiaries at multiple points during their support – including at initial assessment, midway through and on completion of formal support.

5. Identify sources of continuation funding from October 2021 onwards

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"It was a very good experience and nice to meet new friends. It has been brilliant to get away from my prison (home). Thank you for your help and your kindness."

Older person attending Circles Sunday Socials





It has really helped me having Sharon to talk to and go out this year. Knowing I can call her, especially when I'm feeling a bit low."

Mary, who is in a Circle with volunteer Sharon

"It's made such a difference having Gill going to see mum. I can't spend much time with her as I'm looking after my children with special needs. Mum having someone she can chat to makes her so happy. Her dementia is advancing – it means a lot."

Gill is in a Circle with Laura's Mum, Doris





"Circles has been a Godsend.... I have really clicked with Ann – it's as if we have known each other for years."

Jane, who is in a Circle with Ann

Introduction

About Age UK Doncaster

Age UK Doncaster is an independent charity (no. 1077339) and part of the Age UK network of charities supporting older people across the UK, including 130 local Age UKs in England.

Age UK Doncaster was founded in 1999 and delivers services across the Doncaster Metropolitan Borough Council area. Based in Doncaster itself, the charity covers a much larger geographic area (219 square miles) including several smaller towns. Out of a total estimated population of 312,000, approximately 60,000 people are over 65, around a third of whom live alone.

One of the larger local Age UKs, the charity had an income of £2.1 million in 2019/20. It employs 134 staff, alongside 70-80 volunteers and has a Trustee Board of six.

Age UK Doncaster aims to increase older people's health, wellbeing and independence by targeting support particularly to those who live in poverty, are socially isolated, have poor health and/or have caring responsibilities.

In 2109/20, the charity supported around 3,000 older people. Its main services include:

- Home Care supports around 340 older people each year, helping with care needs, including bathing, dressing and shopping.
- **Information and Advice** handles approximately 2,000 enquiries a year and directly supports c.850 people in financial difficulties, including helping claim benefit entitlements.
- Home for Hospital helps around 380 people per year recover from a hospital stay, if they don't have adequate support at home.
- **Ageing Well –** provides regular activities during the day to around 150 older people a year who are experiencing extreme social isolation, with additional one off events and short programmes to help people in Doncaster live and age well.
- Admiral delivered in partnership with Making Space, the service supports people living with dementia, and their families
- Circles for Independence in Later Life the focus of this report, the Circles service relies on community volunteers who provide coordinated support to help older people develop social connections and maintain their independence.

Age UK Doncaster's work is independently inspected by the Care Quality Commission. In 2020, the charity was rated as 'Good'.



About Circles and the development of a pioneering new service for older people



In 2015, Age UK Doncaster identified the need for a new type of support for older people who are isolated and struggling to maintain their independence. The idea came from a realisation that older people receiving the charity's short-term Home from Hospital support often had significant, unmet long-term social and support needs that, if unaddressed, could result in their re-hospitalisation or entry into a care home.

Age UK Doncaster worked with Community Circles, now a project partner, to develop a solution. Their idea was to test using the Circles of Support model as a way of helping older people at risk of hospitalisation or care home entry to build their social connections and increase their independence. Circles of Support is a concept which originated in Canada in the 1980s as a way of supporting people with care needs to live more independent lives. One of the earliest uses in the UK was to help people with learning difficulties living in supported accommodation, achieve their life goals with the support of family, friends and care providers.

Age UK Doncaster and Community Circles wanted to see if the Circles model could be adapted to support older people living in the community, but at risk of institutionalisation, and help them maintain their independence for as long as possible. They decided to apply to the National Lottery Community Fund (NLCF) for a five-year trial of the idea which, if successful, could become a new model of working, not only in Doncaster but more widely across the UK, with the learning shared across the Age UK network and with Community Circles' Community of Practice meetings.

The original application to NLCF for funding noted that there were particularly high rates of emergency hospitalisation for older people in Doncaster (17.9% above average) and a 31% higher rate of admission to care homes. The partners consulted 60 people from the target audience to test their enthusiasm for the idea through a series of focus groups and telephone interviews. The funding application notes that older people consulted were unanimous in their desire to stay living independently for as long as possible. One person is quoted as summing up the mood against care home entry by saying: "you'll have to drag me kicking and screaming". The partners said that 98% of those consulted thought circles were a good idea.

The original plan, funded by a NLCF grant of £499,815 over five years, was to:

- Set up Circles of Support for 374 isolated older people at risk of care home entry or hospitalisation.
- Each older person would first meet with a staff member (a 'Circle Connector') to agree clear goals for their support.
- Match the older person with one of 374 trained, volunteer 'Circle Facilitators', who would help them achieve those goals.
- Map the older person's existing relationships and help them identify other people who could join their circle to help.
- Once the match was made and the circle set up, the Facilitators would co-ordinate the newly created circle of support, meeting approximately every other month to help the person achieve their goals/

Spotlight on Circles of Support

Circles of Support were developed in Canada and introduced to the UK in the mid-1990s. They are groups that meet regularly to help people accomplish their personal goals, when they are unable to achieve such goals on their own, or are unable to ask others for help.

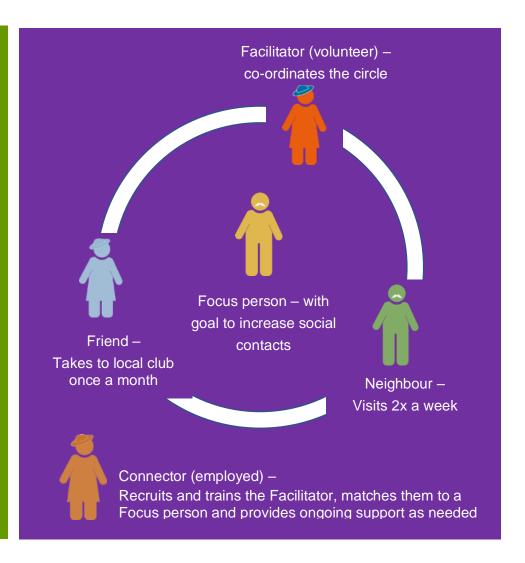
Circles typically consist of 2-8 people important to the person, usually friends, family members, neighbours and support workers, who agree to work together to provide practical support that help the person increase their resilience, social contact and achieve their goals. Each circle is chaired by a volunteer 'Circle Facilitator', trained in personcentred planning and co-ordination, who has responsibility for maintaining focus on those goals.

A Circle aims to create a comprehensive portrait of the person and support them to plan new developments in their lives, ranging from everyday activities, like going shopping, to moving to a new house.

Each Community Circle has a clear purpose and usually meets once a month for an hour or two to talk together and agree what they can do to make a difference.

Taken from Community Circles information pack and discussions with Community Circles

How a Circle for an older person might work



Introduction

Original measures of success – outcomes, indicators and beneficiary numbers

At the outset of the project, the Circles team put forward a series of outcomes and quantified indicators on which to judge their success:

Outcome 1: Older people at risk of institutionalisation have more confidence in managing long term health conditions and staying independent.

70% of beneficiaries feeling better able to manage their health

70% of beneficiaries feeling more confident about staying in their home

90% of beneficiaries with a stronger support network to stay independent

Outcome 2: Older people at risk of institutionalisation have increased mental wellbeing and improved physical health.

80% of beneficiaries have measurably improved wellbeing

40% of beneficiaries report their physical health has improved

50% of beneficiaries report fewer emergency GP or hospital appointments

Outcome 3: older people at risk of institutionalisation are less isolated and more active in their communities.

90% of beneficiaries reporting they feel closer to others

75% of beneficiaries report they leave home more often

70% of beneficiaries participate in more social or healthy living activities

Outcome 4: families and volunteers benefit from the mutual support and contributions of older people.

Family members/volunteers describe how they have benefitted

| Number of people involved | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 | Total |
|----------------------------|--------|--------|--------|--------|--------|-------|
| Focus people/beneficiaries | 54 | 80 | 80 | 80 | 80 | 374 |
| Volunteer facilitators | 54 | 80 | 80 | 80 | 80 | 374 |

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Methodology

Background

Age UK Doncaster commissioned Capidale to undertake an external impact evaluation of Circles at the end of year four of the project. Our brief was to help the team understand what has been successful over the first four years, and what learnings they could apply going forwards. The decision to undertake the evaluation at this point was to enable the project to adapt in year five and, potentially, to support applications for further funding.

The Age UK Doncaster team asked us to use the '4 +1 Questions' as a structure for our report, as this approach is one they successfully use to help Circle participants reflect on progress and move forwards. These questions are normally framed in the first person, and so we have adapted them slightly to better support an external evaluation report. The adapted 4+1 questions we have used are:

- 1. What has the Circles team tried?
- 2. What has the Circles team learned?
- 3. What can the Circles team feel pleased about?
- 4. What concerns might the Circles team have?

And finally, what might the Circles team think about doing next?

Data collection

As will become clear from our evaluation, the project has evolved iteratively over the last four years and the current shape of the project is significantly different to how it was originally conceived. In particular, the original concept of all beneficiaries having a circle of support has been adapted and now only applies to a proportion of beneficiaries. Some of the data collection methodologies agreed at the project's outset were no longer appropriate to the new methods of working and have not always been fully completed. Our first task was therefore to help the team gather a sufficient data set to enable us to comprehensively evaluate the project. Our report draws on the following:

- Information Tracker database including data on number of people referred to the project (n=273), the help they subsequently received and equalities data on age, sex, disability and ethnicity of some beneficiaries (n=113).
- Circles evaluation database (n=141) including baseline assessment data collected at the outset of the relationship (n=118) and to assess the difference the service has made after either 6 months or a year (n=44). The evaluation data collected includes i) the purpose of the circle; ii)

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the Warwick Edinburgh Mental Wellbeing Scale, later the team used the short version (SWEMWBS); iii) the Campaign to End Loneliness Scale (CtEL); and iv) some specific questions developed for the Circles project. The data was collected by Age UK Doncaster and analysed by Capidale.

- A telephone evaluation survey completed by Age UK Doncaster and developed and analysed by Capidale, conducted in November 2020 with older people who had been supported by the Circles project during the Covid-19 pandemic. Due to the circumstances of the pandemic, the Circles team suspended their normal evaluation data collection, as it had previously all been conducted face to face (n=34).
- An online evaluation survey developed and analysed by Capidale, and completed by volunteers, conducted in November 2020 (n=24).
- Case studies of Circles beneficiaries collected by Age UK Doncaster during year 4 (n=8). To protect privacy, we have changed all names in case-studies. Case studies from previous years are also available, but have not been used in this report.
- Case studies of Circles volunteers collected by Age UK Doncaster (n=5). To protect privacy, we have changed all names in case-studies.
- Semi-structured telephone interviews with Age UK Doncaster staff and external stakeholders, designed, undertaken and analysed by Capidale (n=7).

NB: In normal circumstances, our evaluation would include undertaking focus groups of people receiving support, this was not possible due to Covid-19 prevention measures.

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Key Findings

The Key Findings section covers the first two evaluation questions:

- 1. What has the Circles team tried?
- 2. What has the Circles team learned?

1. What has the Circles team tried?

This external evaluation report has been prepared at the end of the fourth year of the project, however, it seeks to capture the learning journey across all four years. The Circles project has evolved iteratively, and we have summarised the evolution of the project year-by-year to illustrate how the process of gradual improvements has resulted in the current shape of the project at the start of year five. We have used three end-of-year reports provided to NLCF, an external evaluation report produced by NDTi in August 2018 and discussions with project team members to inform this section.

Year 1: October 17th 2016 - October 16th 2017: project set-up



The project began more slowly than expected due to some significant staffing challenges. Finding appropriate people to employ as the planned two full-time Circle Connectors proved challenging and the model was adapted first to employ three part-time Circle Connectors and then two Circle Connectors and one Support Worker. By the end of the year, all three posts were filled.

The new team forged strong relationships with Community Circles, their project partners, attending community of practice meetings, development sessions and weekly conference calls. They undertook training and adopted the following personcentred tools provided by Community Circles to help facilitate Circles:

- One-page profiles completed by potential beneficiaries and volunteers to enable matches to take place
- Relationship Circles helps people identify the existing relationships that are important to them and those who may offer support in their Circle
- What's Working/Not Working to help older people identify things that are important in their life and to help them set goals for their support
- Four Plus One (4+1) the first four questions, adopted by this report, help the older person reflect on their experience to date and lead to the '+1' question, which is what they would like to do next, it helps them set a clear goal for the support they will receive

Through the Relationship Circles exercise, it quickly became apparent that the older people referred to the project were significantly more isolated than the Circles of Support model allowed for. Typically, a Circle Facilitator might be expected to co-ordinate 2-8 people in a Circle, which would

consist of neighbours, friends, family members and support workers, who would work together to help the Focus Person (the person at the centre of the Circle) achieve their goal. However, in the case of most older people referred, they had no one.

As a result of staffing challenges, the project supported 16 older people during the year, compared to the planned 54. The team recruited 30 volunteers as Circle Facilitators, compared to the planned 54. One significant positive learning was that the volunteers recruited were willing to donate far more time than the original Circles of Support model expected, with people typically willing to donate 2-3 hours a week instead of the expected 2-3 hours a month. Although no Circles formally reported results during the year, early indications and case studies collected suggested those that had been set up were working well. Pictured on the previous page are Alan and Derrick, amongst the first volunteers and older people to be matched.

Year 2: October 17th 2017 - October 16th 2018: a new model emerges

In the second year, several learning points led to significant changes to the original planned model:



- than other audiences the Community Circles model had been used for; where, typically, the person lives in a Supported Living or care home environment. For Age UK Doncaster, project beneficiaries live in the community and most have no family to support them. Those that do have family, often didn't want them involved, either because the relationship had broken down, or they didn't want to share the fact they were lonely. The concept of a volunteer acting as a Circle Facilitator for a wider group of people supporting the person to achieve their goals had to be abandoned in almost all cases, the volunteer was the only member of the person's circle.
- Volunteers were also less keen on the 'organisational' role of a Facilitator, and more keen to have a practical, supportive 1-2-1 relationship.
- During goal setting, it became clear that some people had relatively limited ambitions that could be achieved with a lower level of support over less time. For example, some people just wanted more company, which could be achieved relatively simply by a volunteer introducing them to activities over 3-6 months. Others, particularly the 'older old', many of whom had dementia or deteriorating health, had changing needs and support needed to be kept under regular review. This led the team to move away from a fixed model of support not everyone needed the formality of a Circle. The team decided to offer **more flexible support**, matching some older people with volunteers to create a Circle, but inviting others to organised events, such as tea parties and coffee mornings, where they could make friends with each other.
- The process of matching volunteers to older people needing support was difficult. Doncaster Borough is a large area and people needed to be matched on the basis of area, shared interests and the ability to 'gel'. Recruiting enough volunteers to always have a few for older people to choose from was extremely challenging. Some older people waited nine months before a suitable match could be found. As a result, the Circle team increasingly organised events to provide opportunities for older people to mix and build their social connections whilst they were waiting

to be matched. These **events proved extremely popular and became an important part of the project**. Volunteers without a match were also invited and sometimes the events allowed relationships to evolve more organically.

The combination of some people benefitting from matched relationships and others coming to events which could help them overcome their social isolation and achieve their goals outside a formal Circle arrangement became a permanent feature of the project.

Year 3: October 17th 2018 - October 16th 2019: the new 'flexible' model consolidated

In year three, the model continued to evolve within the overall project aim of helping severely isolated older people to achieve clear goals:



- The challenge of having sufficient volunteers available in the same places as older people needing support, with matching interests, combined with the success of previous social activities, led the team to organise a series of **Sunday Socials**. These get togethers facilitated some matches which might not have otherwise been made, and also enabled many isolated older people to achieve their goals of 'getting out the house more' and 'feeling less alone', outside the formality of a Circle.
- The team further developed the programme by **partnering with external organisations** to offer activities which could help older people referred to the project achieve their goals, regardless of

whether they had a Circle. New activities included joint sessions run with the Workers Educational Association and Shared Reading groups run with Doncaster Library.

- The new, more flexible approach of having some beneficiaries matched with volunteers and others attending organised events required the team to consider how best to differentiate the Circle project from other local services, such as befriending and local activity groups, and how to define who the project is aimed at. The answer was that Circles is **targeted to isolated older people motivated to make a change in their lives.** The service's uniqueness is that it provides person-centred support to help older people achieve a clear goal they themselves define.
- This has led to relatively high numbers of older people referred to the project being subsequently supported to find more appropriate services. For example, if someone was looking for a befriender, but did not wish to have support to make a change in their lives, they would typically be referred to B:Friend or Age UK Doncaster's paid for befriending service. Out of 88 referrals received in year three, 21 (24%) were helped to find more appropriate services.
- The **staffing and volunteer model underwent further changes** in year 3 with the team now consisting of a Project Co-ordinator and Project Officer, reflecting the broader focus of the project than connecting people through a Circle of Support. Volunteer training was simplified.

Year 4: October 17th 2019 - October 16th 2020: adapting to Covid-19

With the rapid rise of Covid-19 in the UK during February and March 2020, and the introduction of a nationwide lockdown on 23rd March, the year was almost completely dominated by the coronavirus crisis.



- Prior to lockdown, the team continued to expand the range activities they run to help isolated older people achieve their goals, regardless of whether or not they had been formally matched with a volunteer. Sunday Socials continued, over 50 people attended a Christmas 'do', and they introduced bi-weekly drop-ins for volunteers and unmatched older people at the Silver Link Centre in Bennetthorpe, close to central Doncaster. The drop-ins were not always particularly well attended, as Doncaster borough is 219 square miles and volunteers and older people are scattered across the whole area. Transport is often given as a reason why older people cannot attend events, despite wishing to.
- From lockdown onwards the project **completely shifted focus**. Formal volunteer matching stopped and, as almost everyone supported by the project was required to shield, home visits and organised events also stopped. Inevitably, there has been less strong focus on goal setting and supporting people to achieve clearly defined, substantive goals.
- Instead, the two Circles staff members and c.50 active volunteers supported the 101 older people engaged in the project by:
 - Telephoning everyone to check on their wellbeing and provide emotional support, to begin with this was typically two or three times a week, but has gradually reduced to once a week for some
 - o Undertaking shopping, if people were unable to get essential supplies.
 - o Making door-step visits to provide people with activity packs, donated 'goody bags' and jigsaws.
 - o Referring people onwards to other support, such as from Mind, if people have higher level needs.

The shift to telephone support has further adapted the model, as volunteers don't always telephone the people they are matched with. Some volunteers now support three or four older people. In many ways, this illustrates how the model has evolved from creating 'Circles of Support' where individual volunteers are matched with individual older people to help them achieve their goals, to become a 'Family of Support' where two staff members, 50 volunteers and around 100 older people come together to provide mutual support. At times, this is provided 1-2-1 through matches, but at other times it is provided collectively through events and other forms of support.

Covid-19 learning: The Circles team has found that phone support can be effective and may wish to explore how this, combined with more use of digital technology, can be built into the project in future. The formal matching process has stopped and yet some strong relationships have emerged naturally. Finally, whilst the less strong focus on substantive goals is right for Covid-19, it is important to return to it once the pandemic subsides.

2. What has the Circles team learned?

This section draws together the learning over the first four years of the project.

Has Circles achieved its output targets and who has the project supported?

a. Number of older people supported

| | Older people referred to Circles | Older people helped to find support from other services | Older people matched with a 1-2-1 volunteer ('Circle') | Older people helped meet their goals without a Circle | Declines e.g. people declining support, too unwell or died |
|--------------------------|--|---|--|---|--|
| Year 1 | 18 | 0 | 16 | 0 | 2 |
| Year 2 | 113 | 13 | 37 | 9 | 54 |
| Year 3 | 88 | 21 | 18 | 20 | 29 |
| Year 4 | 54 | 6 | 3 | 30 | 15 |
| Total | 273 | 40 | 74 | 59 | 100 |
| Original target @ Year 4 | 294 | 0 | 294 | 0 | 0 |

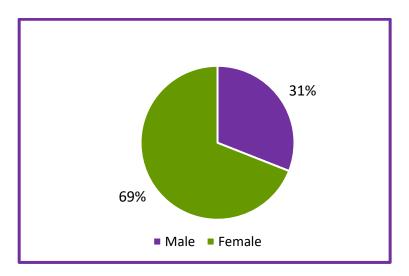
Circles has supported referred older people in three ways:

- The project has a strong focus on helping older people achieve clearly defined goals to help them stay living independently, it does not provide 'passive' support. As such it is not appropriate for everyone. Following referral, staff meet with each older person to identify if Circles is right for them and, if it isn't, they help them find alternative support, e.g. older people simply wanting company may be referred to a befriending service. The older person does normally benefit as they are helped to find support they need, but no evaluation data is collected (n=40).
- Some older people wishing to have support to make a change in their lives are matched with a 1-2-1 volunteer who supports them to make the change they desire. These people are referred to by the project team as "having a Circle" (n=74).
- Other older people who wish to make a change are still supported by the project typically, they receive regular contact from the project staff and are invited to project events that match with their goal. During lockdown they received full support from staff and volunteers (n=59).

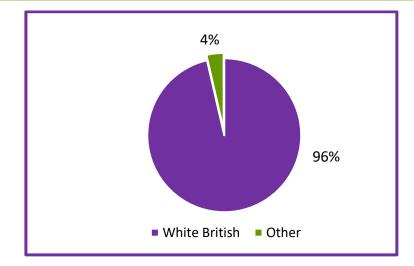
As the above table shows, the Circles project supported a total of 173 out of the 273 people referred. Whilst 74 people have been matched with a volunteer, 59 have been supported within the project 'family' of the project and 40 people have been supported to find help from other services, which may have been more appropriate to their needs. 100 people referred did not receive support, usually because they were inappropriate referrals, or they declined the support offered. Some were too unwell and a small number of referred people died before support could be provided.

b. Demographics of those receiving support

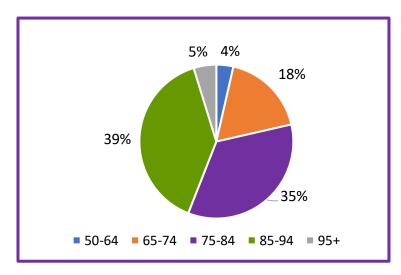
Age UK Doncaster captured equalities and demographic data for 113 individuals supported by the project, although not all questions were answered.



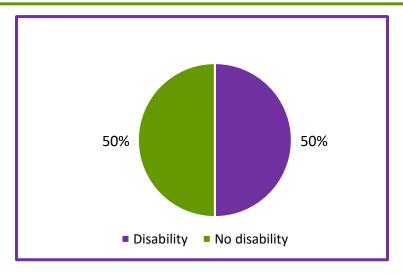
Gender: 69% of participants were female, with 31% male (n=113)



Ethnicity: Mainly White British, in line with local age demographics (n=111)

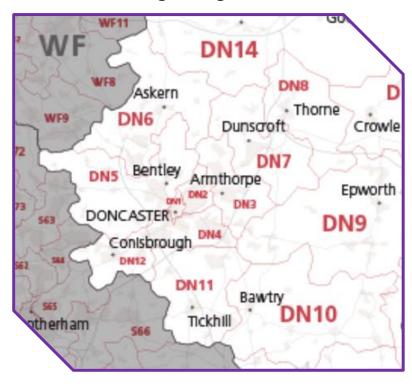


Age: 79% of participants were over 75, with 44% over 85 (n=84)



Disability: exactly half the participants had a disability (n=80)

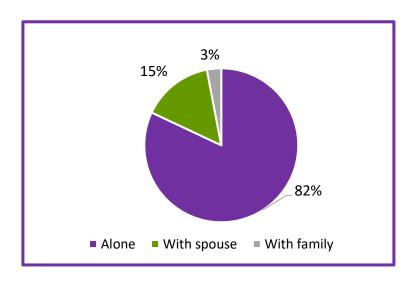
c. Location and living arrangements



| Postcode | Number | Postcode | Number |
|----------|--------|----------|--------|
| DN1 | 4 | DN8 | 4 |
| DN2 | 15 | DN9 | 2 |
| DN3 | 13 | DN10 | 4 |
| DN4 | 20 | DN11 | 10 |
| DN5 | 19 | DN12 | 3 |
| DN6 | 10 | S64 | 2 |
| DN7 | 6 | Total | 112 |

Area: participants are widely geographically spread across Doncaster.

Postcode was not captured for every participant.



Living arrangements: from a small sample, most people live alone (n=34)



Enjoying Silver Sunday, October 2019

Have older people benefitted from the Circles project?

This section considers whether or not people supported by the project have made progress towards achieving their personal goal and also the extent to which the project has achieved the three outcomes for older people expected at the outset (see page 8).

Progress towards achieving individual goals

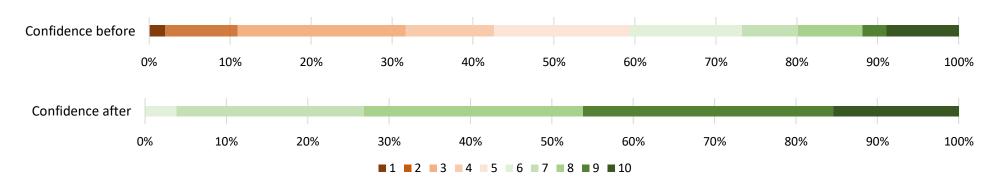
When people are accepted on to the Circle project, they are supported to identify clear goals for their period of support. Goals are personal and very often related to reducing social isolation and increasing independence. Example goals are given below:

"To get out of the house and meet more people."

"To get out of the house, to build up my confidence and to get back to going on holidays."

"I would like to get back into dancing again and make new friends." "Have someone to go on short walks with and to develop into longer distances, so as to start to attend group activities and get to feel better."

Out of 136 older people on the database provided by the Circles team, 115 had an identified goal or purpose for their support. Several of those without a goal were more recent referrals, where goal setting was interrupted by Covid-19. People are asked when they join how confident they are about achieving their goal on a scale of 1-10 (n=101), the question is repeated during a formal review after a year (n=26). Not all clients have a formal review: some Circles end early because the volunteer or older person leaves the project (e.g. due to declining health, entering a care home or dying), in some cases the purpose is achieved early, and sometimes support continues, but the person is too unwell for a review. The data is shown below:



The average confidence score at the outset is 5 out of 10, but this increases to 8 following 6 to 8 months of support. It is notable from the chart on the previous page that 60% of people give a confidence score of 5 or lower before support, but after receiving support everyone's confidence rises to 6 or above. In all but one case, the person increased their confidence, meaning that 96% of those asked reported increased confidence.

NB: the data set after support is low at just 26 people. As part of our external evaluation support, we will help the Circles team to redesign their evaluation processes for the final year of the project, ensuring this question is asked of all beneficiaries at least once during the year.

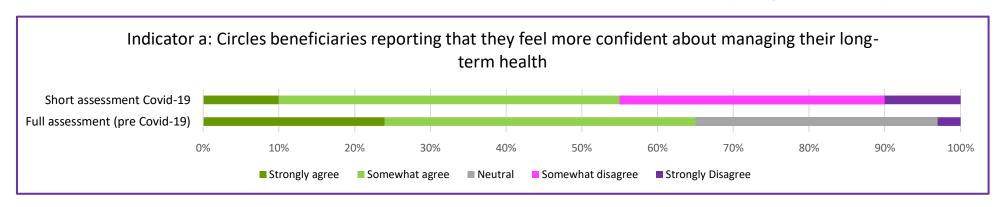
Conclusion: where the question is asked, 96% of people supported have increased confidence about their ability to achieve their goal.

Outcome 1: Older people at risk of institutionalisation have more confidence in managing long term health conditions and staying independent.

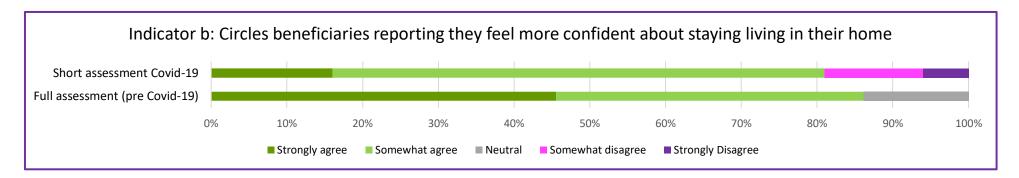
In the original application for funding for the Circles project, Age UK Doncaster stated they expected 70% of people supported by the project to feel more confident about managing their long-term health conditions, 70% to feel more confident about remaining living in their own home and 90% to feel they had a stronger support network to stay living independently.

These measures were to be tracked using before and after assessments. However, formal assessments were put on hold in year 4, due to Covid-19 and Capidale developed a shorter, telephone assessment to replace them. These combined methods gave outcomes data for 78 people:

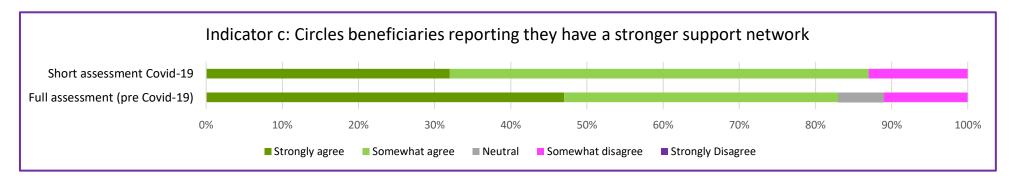
- 44 people who completed initial and follow-up assessments at 6 or 12 months, all received 1-2-1 support from a matched volunteer pre-Covid
- 34 people who completed the shorter, telephone assessment due to Covid-19, all received adapted support by phone/door-step visits



65% of people completing a full assessment pre Covid-19 felt more confident about managing their long-term health, 3% felt less confident. During Covid-19, 55% felt more confident, but 45% felt less confident – most probably a reflection of the pandemic. The expected outcome was 70%.



87% of older people completing a full assessment Covid-19 felt more confident about staying living independently in their home, this fell to 81% for those assessed during Covid19. The expected outcome was 70%.



For the third indicator, slightly different questions were asked in the assessments before and during Covid-19. Those fully assessed before Covid-19 were asked whether they agree/disagree with the statement "I have enough people I feel comfortable asking for help at any time", those assessed during Covid-19 were asked whether they agree/disagree with the statement "I have a stronger network to support me".

Of those receiving a full assessment pre Covid-19, 83% said that, after support, they felt they had enough people they could ask for help, this was up from 47% before support, and 61% of people increased their scores on this measure. Of those assessed during Covid-19, 87% agreed that the project had given them a stronger support network. Given the questions are different, we cannot combine the results into one figure. The expected outcome was 90% reporting that they had a stronger support network.

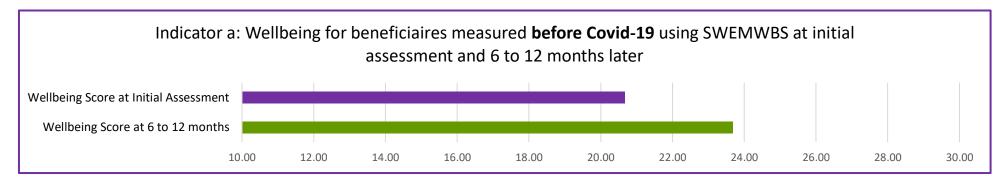
Conclusion: before Covid-19, 87% of project beneficiaries felt more confident about staying living independently, 65% felt more confident about managing their long-term health and 61% were more confident that they had enough people in their support network to ask for help.

Outcome 2: Older people at risk of institutionalisation have increased mental wellbeing and improved physical health.

In the application for funding, Age UK Doncaster said they expected 80% of people supported by the project to have measurably improved wellbeing, 40% to report improved physical health and 50% to report that they needed fewer emergency health appointments with their GP or at hospital.

For the reasons outlines above, different assessment methodologies were used before Covid-19 and during the pandemic.

In particular, prior to the pandemic, the Short Warwick Edinburgh Mental Wellbeing Scale (SWEMWBS) was used to assess overall wellbeing, using a questionnaire at assessment and repeated 6 or 12 months later. During Covid-19, this was replaced by a simpler question asking whether the extent to which people agreed that support received from the Circles team had helped to "increase my wellbeing/feel better in myself".

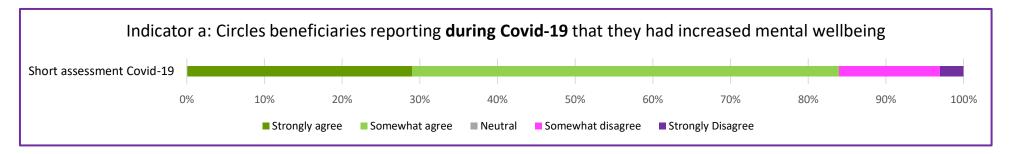


SWEMWBS is a recognised wellbeing assessment scale that scores the answers people give to seven questions and combines these scores to give an overall score for mental wellbeing. Age UK Doncaster has initial SWEMWBS scores for 118 people supported by the Circles team and follow-up scores for 44 people. In the above chart, we compared wellbeing scores before and after support for the 44 people with both sets of scores.

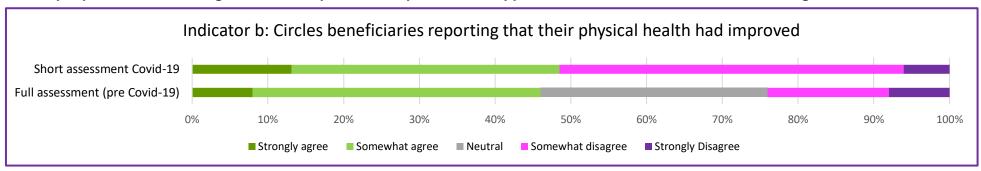
Average wellbeing scores for the cohort increased from 20.67 before support, to 23.67 after support. A score of 21.54 or lower indicates people are in the bottom 25% of the population for mental wellbeing. A score of 23.21 or higher indicates people have above average wellbeing (using the median score). Therefore, to have increased the average score from the bottom quartile to above average represents a significant achievement.

Wellbeing scores calculated using SWEMWBS improved for 75% of the cohort supported prior to Covid-19. This compares to an expected outcome of 80%. Wellbeing stayed the same for 5% of people and decreased for 20%.

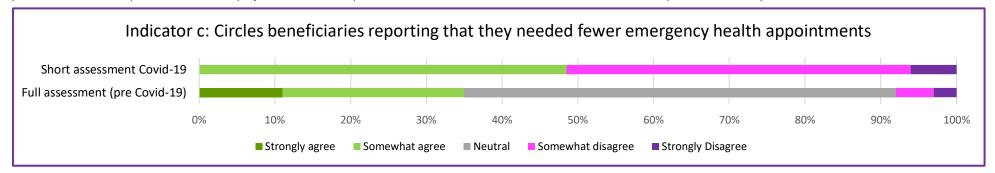
It is important to note that the older people supported by the project often have significant health problems and are approaching the end of their lives and, therefore, declining mental wellbeing may be an indicator of overall declining health. Given people supported are mostly on a declining health trajectory, the expected outcomes seem high and we feel it a significant achievement that the project has come so close to meeting them.



84% of people assessed during the Covid-19 pandemic reported that support from Circles increased their wellbeing.



46% of older people fully assessed before Covid-19 felt their physical health improved due to support from the Circles project. During the pandemic, 48% reported that their physical health improved, but 52% said it had worsened. This compares to an expected outcome of 50%.



35% of older people fully assessed before Covid-19 said they needed fewer emergency health appointments due to support from the **project.** During Covid-19, this increased to 48%, but the pandemic reduced non-Covid-19 health appointments. The expected outcome was 50%.

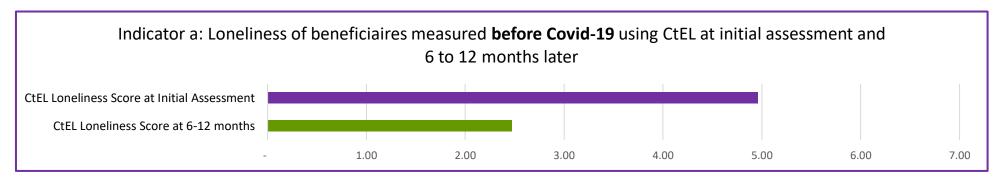
Conclusion: before Covid-19, 75% of project beneficiaries had increased mental wellbeing, 46% had improved physical health and 35% thought they had needed fewer emergency hospital or GP appointments.

Outcome 3: Older people at risk of institutionalisation are less isolated and more active in their communities.

In the application for funding, Age UK Doncaster said they expected 90% of people supported by the project to feel closer to others, 75% to leave home more often and 70% to participate in more social or healthy living activities. As with the previous outcomes, different assessment methodologies were used before and after the Covid-19 pandemic.

Before Covid-19

Prior to Covid-19, changes in levels of loneliness were measured by the Circles team using the Campaign to End Loneliness (CtEL) scale. People were asked three questions at their initial assessment, which were repeated 6 to 12 months later. The CtEL scale runs from 0 to 12, with people scoring 10-12 experiencing "the most intense degree of loneliness" and people scoring 0-3 "unlikely to be experiencing any sense of loneliness." CtEL states the purpose of the tool is to "measure the change that happens as a result of an intervention" and "it is not possible to say each point on the scale represents an equal increase or decrease in the degree of loneliness someone might be feeling." (CtEL, 2015).

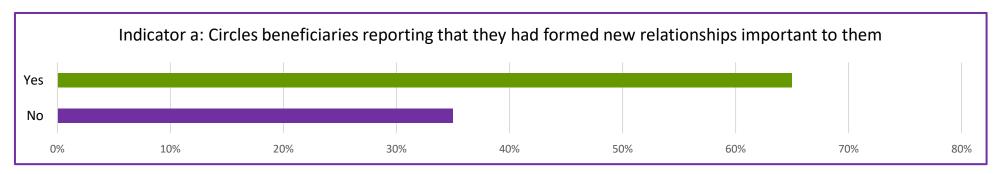


Average loneliness scores dropped from 4.96 before support (n=98) to 2.47 after support (n=43). The scores after support suggest that people were no longer experiencing loneliness. Analysing data for 33 people who had scores at both points, **76% of people supported by the project and receiving a full assessment before Covid-19, felt less lonely**, 15% felt more lonely, and 9% saw no change in their levels of loneliness.

People were not asked if they left home more often or participated in more social or healthy living activities, therefore it is not possible to provide quantitative evaluation on these questions. However, based on qualitative evaluation, including Case Studies and feedback provided as part of surveys, it seems certain that a high proportion of people benefitting from the project were more active in their communities pre-Covid.

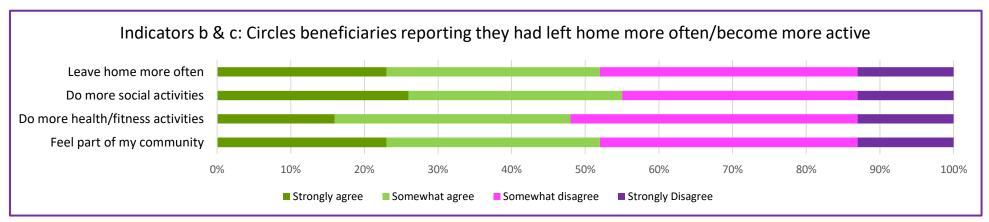
During Covid-19

During the Covid-19 pandemic, the normal programme of assessments was suspended. Capidale developed a shortened assessment questionnaire undertaken by telephone with 34 beneficiaries, which asked people to reflect on the support they had received both before and during the pandemic. These assessments did not cover CtEL but included a different question relevant to outcome 3. Participants were asked whether being part of Circles had helped them to form new relationships important to them and, if so, how many relationships they had formed:



65% of people assessed during the Covid-19 pandemic said they had formed important new relationships due to the project. Of those giving a number, 10 people said they had formed one important relationship, four said they had formed two, and two people said four to five relationships.

People assessed before the pandemic were asked to reflect on whether being part of Circles helped them to leave home more often, do more social or healthy living activities, and feel more part of the community. These questions were not relevant for those only supported during the pandemic, as they were largely unable to leave home.



52% of people assessed during the Covid-19 pandemic, but receiving support beforehand (n=31), said they were able to leave home more often thanks to the project. 55% had been able to do more social activities and 48% have been able to do more activities to help with their health and/or fitness. As a result, 52% felt part of their community.

Conclusion: before Covid-19, 76% of project beneficiaries felt less lonely, 52% left home more often and 52% felt part of their community.

Case studies – case studies help to show the wider impact the project has on people's lives.

Lilian and Tina

Jane and Ann

Lilian was introduced to Circles by a local plumbing company doing work for her, who became concerned about her isolation. Following an assessment, the Circles team invited Lilian to attend the next Sunday Social as they didn't have a volunteer to match her with immediately.

At the Sunday Social, Lilian sat on the same table as Tina, a Circles volunteer who had also not yet been allocated a match. Tina recalls: "Lilian was quite reserved, but we got chatting and I suggested that we were matched, as Lilian was not too far away."

The two have struck up a strong friendship. Tina and Lilian have been a 'Circle' for 18 months, going out for coffee and cake, visiting garden centres and the cinema. Tina says "sometimes, it's just a cuppa and a chat in the conservatory, watching the birds. We chat about anything – what a life Lilian has led, and I always get a giggle out of her!"

During lockdown, Tina supported Lilian with phone calls and garden visits, and she also received calls and help from the Circles team.

Lilian reflects: "Circles has made me see what I have missed... I love spending time with Tina, I love spending time with her, and I wish I had come to [Circles] sooner. I have never had anyone take such good care of me since joining Circles, especially during lockdown."

Jane lives alone and has no children or grandchildren. She recalls: "when I first retired, I never thought that I would be lonely, but I was."

The Circles team matched her to Ann in July 2019, as they shared common interests. They started by going to events organised by the Circles team together, including themed activities and the Christmas party. Jane also attended the Shared Reading group when it was running.

Before Covid-19, Jane and Ann visited coffee shops together. Jane says: "Ann knows where all the good coffee shops are and has taken me to places I never knew existed. Circles has been a godsend... I have really clicked with Ann – we can both talk for England and it's as if we have known each other for years."

Ann continued to support Jane during lockdown, doing her weekly shopping and phoned her regularly. She was able to visit Jane in her garden and would often knock to say hello when she and her husband passed on their bike rides. Jane says: "I don't know how I would have managed during lockdown without Ann and Circles."

Ann says: "Circles brings great joy to both of us, I bring friendship to a lonely old lady, and get a feeling of doing a little bit to help."

Mary, Don and Sharon

Sharon is a very active volunteer with Circles. She previously worked in the NHS in elderly care and decided to volunteer to continue doing something she enjoyed.

Initially, she was matched with Don, who was largely housebound but wishes to get outside again. It took quite a few visits for Sharon to build Don's trust and confidence, so they spent time discussing shared interests and Don's time working in the mines.

After a few weeks, they discussed Don's goal of getting outdoors. They started slowly, with Don taking just a few steps with his walker. The following week, they managed to go further – sitting on a bench, listening to the birds and chatting to neighbours. Don was delighted with what he had achieved.

Sharon also attended the Sunday Socials before lockdown, where she met Mary who had not been matched with a volunteer. Mary and Sharon naturally developed a friendship and, when lockdown was implemented, she decided to support both Don and Mary with phone calls and shopping – even delivering fish and chips!

Mary said: "it has really helped me having Sharon to talk to, knowing I can call her when I'm feeling a bit low, and helping in the garden."

Tom and Michael

Michael has volunteered with Circles for two years. He was initially matched with an older gentleman and the relationship worked well, however, the gentleman's health declined significantly, and the relationship came to a natural end. Michael enjoyed the experience and wanted to support someone else.

Just before lockdown Michael was introduced to Tom, who is 85 and lives alone. The pair got on very well and decided to form a Circle together. However, they were not able to have home visits for a long time due to Michael's need to shield. Their relationship continued by phone and Michael also helped get Tom's shopping.

The two were able to meet face to face in the summer once restrictions eased and have been planning what they will do once the Covid-19 pandemic subsides. Tom loves nature and has asked Michael if he will take him fishing, once it is allowed. Tom says: "I won't be able to fish myself, because I am losing my eyesight, but I will enjoy being sat outside whilst Michael fishes."

They have discussed visiting garden centres and parks and are particularly keen for the Circles social activities to restart, so they can meet other participants. Michael has recently become a Trustee of Age UK Doncaster, due to his involvement in Circles.

What has the Circles team leaned about the involvement of volunteers?

Volunteers have always been pivotal to the Circle project. The original aim was to recruit and train 374 volunteers as 'Circle Facilitators' who would then engage 2 or more volunteers in supporting each older person – potentially engaging 1,500 further community members in the project.

This was a highly ambitious aim. In the event, the Circles team has recruited 99 volunteers over four years, against a target of 294. According to interviews conducted with the Circles team, they have found the average volunteer donates between two and three hours a week, instead of the expected two to three hours a month. It could be argued, therefore, that volunteer time donated is actually <u>higher</u> than originally envisaged.

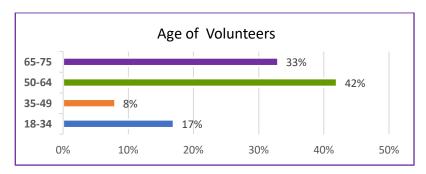
Of the 99 volunteers recruited to the project, 50 are currently active, an attrition rate of 50%. Attrition is inevitable and was not considered as part of the original plans, which seems a significant oversight. During our interviews, the project team identified that around half the people they interview as potential volunteers do not go on to volunteer for the project, due to changes in circumstances, the opportunity not being right or simply 'going quiet'.

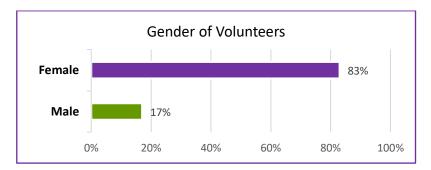
Recruiting, training and supporting the volunteers is an enormous undertaking and several iterations of staffing within Circles have been tried to manage the task effectively. It was clear from our interviews that the difficulty of this task was underappreciated in the original planning and that has had a major influence on the iterative development of the project and also constrained the number of people the project can support. Moving towards a model more reliant on volunteer peer support in future, may be beneficial.

As with supporting older people flexibly, the Circles team adapted to the challenge by being more flexible in their approach to volunteers. Some volunteers have been supporting three or four people during lockdown and, whereas before lockdown staff tried very carefully to match volunteers to older people with shared interests, they have found that relationships have evolved naturally between people they might not have expected to get on.

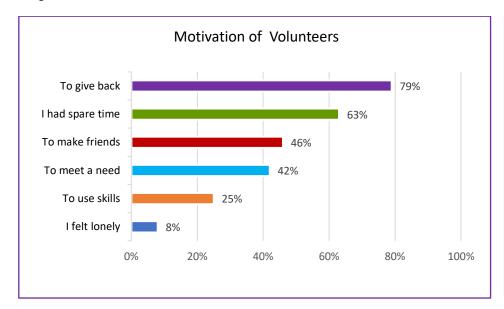
Volunteer motivation and experiences

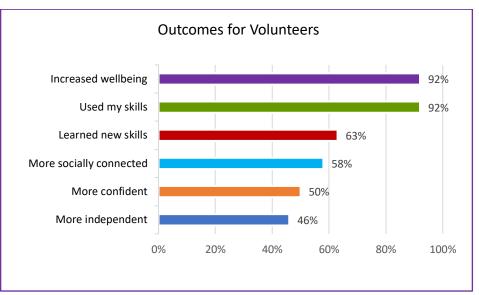
As part of our evaluation, Capidale developed a questionnaire to understand more about the people who volunteer for Circles and what they get from the experience. 24 volunteers completed the questionnaire.





As the data above shows, the majority of people volunteering are themselves older people (defined by Age UK as over 50) and, by a significant margin, most are female.





Our evaluation found that people typically volunteered for the project because they wanted to give back to their community (79%) and had spare time to do so (63%). Around half volunteered because they wanted to meet new people/make new friends (46%), although few (8%) identified as lonely.

Interestingly, a higher proportion of volunteers (92%) said participation in Circles increased their mental wellbeing than beneficiaries. It is possible that this is due to a younger age profile and generally being in better health. Volunteers also benefitted from using their existing skills (92%), learning new skills (63%), feeling more socially connected (58%) and increasing their self-confidence (50%) and feelings of independence (46%).

The project could have a significant long-term benefit as 67% of Circles volunteers said the project helped them to better understand how to maintain their own health and wellbeing in later life.

We asked volunteers to say what they most enjoyed about their role:

"Being a Circles volunteer has been absolutely great for me. I led a very busy life until I was 63, when I had several health issues which forced me to retire early. The greatest thing is talking to intelligent people, who have similar memories and yet different insights. I have felt accepted, valued and liked. I feel useful again, and that is priceless."

"The lady I visit is so funny, she makes me laugh. I am deaf, using hearing aids and so is she – she is also a very caring lady. We care for each other in these strange times. We ring each other regularly/"

And what they found most challenging:

"Covid-19 really changed things. If I could change anything it would be to meet as a group socially on a weekly basis."

"Coping with the pandemic – the isolation of old people is worse than the lockdown rules."

"The only thing that has been hard has been the pandemic and not being able to visit, although I speak to my focus person every few days, it is not the same as a visit."

Imogen

Imogen is 70 and lives alone, she originally contacted Circles seeking support. Retirement had been very difficult for her: "I had traded a very busy life with lots of colleagues and a sense of purpose, to spending hours alone and seeing no one for days. My world became extremely small". At her assessment, it was clear she had a lot to offer and, rather than becoming a Focus Person, the team suggested she became a volunteer.

The Circles team had just started working with Doncaster Library to run Shared Reading sessions for Circles participants. They suggested that Imogen might wish to train as a leader for these sessions, which she readily agreed to as she has a love of reading and has published two of her own books.

Imogen has found a new lease of life as a Circles volunteer, she says: "it is very good indeed to feel useful once more. I didn't think this would happen again as I am now 70 years old. It is not nearly the end of my story, just a new chapter!"

The story above dates from year three, but we have used it here as it illustrates the blurred boundaries between beneficiaries and volunteers. In many ways, volunteers benefit from the project just as much, and in some ways more, than the people they support.

In our interviews with Age UK Doncaster staff, it became clear that, on some occasions, a project which relies so heavily on individual relationships between older people and volunteers can cause difficulties, as beneficiaries can sometimes be too demanding, and volunteers can sometimes lose sight of the need not to create dependency. It is important that the project has a clear process, including an exit strategy for managing such situations.

Conclusion: the objective of recruiting 374 Circle Facilitators seems overly ambitious and has been a challenge. The Circles team has adopted a more flexible approach, with a smaller pool of volunteers who contribute more time than expected and may support more than one person. During lockdown, and through events, the team has learned that matches happen organically. Often, volunteers benefit as much as those they support and, sometimes, more so: 92% of volunteers increased their wellbeing. A clear process is required to end relationships, when needed.

What do stakeholders think about Circles?

During our stakeholder interviews, it became apparent that the Circles project has three significant and linked strengths:

- Clarity that the project supports older people who wish to make changes in their lives and will not be 'passive' recipients
- Effective tools that help older people identify a goal for their support
- Flexibility that older people can be supported in different ways to achieve their goal not everyone needs a 'Circle'

The internal and external referral partners we spoke to felt they were clear about who the project is intended to support, how it differed from other types of support and how older people need to be committed to making a change in their lives:

"I offer Circles to people who are socially not physically housebound, they want to get out more." – external referral partner

"Circles has helped us to understand different types of loneliness better and to improve our assessments to find the right options for people. Circles is different to more passive options, such as a Day Centre or Befriending." – internal referral partner

"Befriending is very much a 'service' it is a 'gift' not a reciprocal relationship. Whereas with Circles the aim is to get a good match and then focus on what those people do together – creating ripples to grow contacts. Circles focuses on what matters to people." – external support partner

Project staff and Age UK Doncaster's management team felt the tools provided by Community Circles, such as One Person Profiles, What's Working/Not Working and '4+1', were very effective at helping older people to clearly define what change they wanted to achieve from their support.

Once a person's goal is defined, the Circles team apply friendly person-centred thinking to help them achieve that goal, but are not prescriptive about how it is achieved. This has led them to move beyond matching individual volunteers to older people needing support and to try a range of other activities, such as Sunday Socials, Christmas Parties, Reading Groups, Drop Ins and sessions run with the Workers Education Association.

"We were too prescriptive to begin with. We tried hard to match people, but older people's needs change and volunteers lives change." – Circles team member

"We started to run events, to bring people together. To bring in people who aren't matched with a volunteer. They have been a real success. They have helped people to make connections - we have tried to create a Circles community." – Circles team member

"We created a Circles family of people achieving things in different ways." - Age UK Doncaster management team member

Partners very much value this flexibility:

"The offer a very flexible, rich programme." – internal referral partner

"They are very individually-focused, people can do what they want – whether it is going to a café, a garden centre or to town. They are not prescriptive about the solution. The individual focus is very well matched to our ethos. It is not one size fits all." – external referral partner

"The service is very tailored to the individual. I have confidence in referring to them." – internal referral partner

"[The Doncaster project] has helped us to reflect on the Community Circles model, because it has flexed so much in Doncaster. But they have stayed really true to the core values of keeping the person at the centre, seeing everyone as someone who can contribute and making positive changes." – external support partner

"People are all different. We have created a family. Some people we thought would be a focus person have started volunteering." – Circles team member

Partners feel that the Circles team approach is working:

"Our model wasn't working for older people, so they thought about what do we do differently? How do we connect people? They adapted the model, keeping the person-centred thinking and the tools. Being really flexible. Is it really a Circle? But it is working and the essence is the same." – external support partner

"I have seen people grow [in Circles group activities]. It was brilliant, absolutely brilliant – people were really looking forward to it." – external delivery partner

The role of the Circles staff team in creating a service that is clear, effective and flexible should not be underestimated:

"I have confidence in them – I know they care." – internal referral partner

"Marie is lovely with the old people, she has a lovely, personable manner. People don't want a service – I sell Marie, not the service." – external referral partner

"Our link with them is really strong. They appreciate what we do. I feel part of the family." – external delivery partner

Conclusion: stakeholders highly value the structured but flexible approach that the Circles team has developed to helping older people achieve their goals. The original model has worked in other situations but was less successful for older people in the community. Iteratively, the Circles team has developed a new model which stakeholders feel is very effective. They have also developed strong and effective working relationships with partners.

Conclusions

This section covers evaluation questions three and four:

- 3. What can the Circles team feel pleased about?
- 4. What might the Circles team feel concerned about?

3. What can the Circles team feel pleased about?

We draw four positive conclusions from our evaluation:

Older people supported by the Circles project are substantially benefitting

From the extensive quantitative analysis we have undertaken in preparing this evaluation report, it is very clear that older people are substantially benefitting from the project. Whilst monitoring data was not available for everyone supported by the project, we were able to analyse data on 78 project beneficiaries which indicates that:

- Almost all (96%) of Circles beneficiaries feel the project is helping them achieve their goal
- A large majority (87%) of people supported by the project feel more confident about staying living independently
- Three quarters of people supported (76%) felt less lonely
- Three quarters of people supported (75%) have improved mental wellbeing

Qualitative data in the form of Case Studies and open-ended survey responses suggest that Circles can significantly enhance later life for isolated older people in Doncaster.

The Circles team has provided effective support during the Covid-19 pandemic

The older people the project supports are particularly at risk from Covid-19 and the team had to adapt their support model quickly to ensure some of Doncaster's most vulnerable residents received the help and support they needed. Volunteers almost unanimously identified the pandemic as the hardest thing they have had to deal with, yet were also committed to continuing providing support to older people. Staff and volunteers contacted c.100 people, 2-3 times a week in the first lockdown and have continued to stay in touch since. Feedback from older people is very appreciative.

The pandemic has provided some positive learnings, including that volunteers perhaps do not need to be quite so carefully matched to older people – through telephone conversations, people have very often found their own connections. The pandemic has also perhaps reinforced the feeling that the Circles staff, volunteers and beneficiaries are part of a 'Circles family' – a term which came up more than once in our interviews.

Volunteers are also substantially benefitting from the project

From previous projects we have evaluated and from other research (e.g., NCVO, 2018), we know that people very often benefit from volunteering. The Circles project is no exception:

- Almost all (92%) of Circles volunteers feel the project has increased their mental wellbeing
- Two thirds (67%) say the project has helped them better understand how to maintain their own health and wellbeing in later life
- Over half (58%) say the project has increased their own social connections

The Circles team has created a successful, flexible model that is highly valued by internal and external stakeholders

The high regard with which the Circles project is held by internal and external stakeholders came across strongly in our interviews. Given the evolution away from the original intended Circles of Support model towards a more flexible approach, we expected there to be a little less clarity amongst stakeholders about how the project differed from other models of support, such as befriending. However, the stakeholders we spoke to were clear about the unique nature of goal-orientated, person-centred support the Circles project provides and where the project fits within the range of other support options available to older people in Doncaster.

The Circles team appears to have developed strong and effective internal and external partner relationships.

4. What might the Circles team feel concerned about?

We have identified four areas for the Circles team to consider as part of their future planning:

The project has directly supported fewer people than originally expected

Given the evolutionary journey the project has been through over the last four years and the fact that the original envisaged model did not prove as effective for older people in a community setting as hoped, it is perhaps not surprising that the project has directly supported fewer people than planned. If older people who have been helped to find alternative, more suitable forms of support are included, then the project has supported 173 people at the end of year four. 133 have been directly supported, with a further 40 helped to find other, more appropriate support. 100 older people referred to the project did not receive support. Some were referred inappropriately (e.g. they were not in the right age group, no longer needed support or had too high support needs), some chose not to receive the support offered, others were too unwell and a small number died.

It is important that the project's funder (NLCF) understands the evolutionary journey and the reasons behind the project supporting fewer people directly than first thought. In our view, the learning that the project has achieved has been very valuable and should compensate for a smaller number of direct project beneficiaries.

Conclusions

An objective of matching one volunteer to one older person is probably unrealistic

The project has undoubtedly struggled with meeting the ambitious target of recruiting and training 374 volunteers and matching them with 374 isolated older people who live close to them and have shared interests. With the benefit of hindsight, this seems over ambitious and unrealistic – particularly so in Doncaster, which covers 219 square miles. The original plans also took no account of volunteer attrition, which was inevitable.

It has often proved difficult to match older people with a volunteer and some older people have had to wait many months to be matched as a result. The Circles team has already evolved a more flexible approach; however, we feel that additional thought needs to be given as to how volunteers and older people are linked to each other going forwards, and also how to help end relationships when goals are achieved, to avoid over dependency. One possible model came up in our discussions with the project team, which is included as part of our recommendations.

There is a lack of clarity over how and when Circles relationships should come to an end

Community Circles informed us that the Circles of Support model had been used effectively in the UK for people with learning difficulties living in supported accommodation. In these situations, a circle of support might be in place for some years. Older people at risk of losing their independence are coming towards the end of their life and, typically, are on a declining health trajectory. Many of the 'older old' people supported by the Circles team have signs of dementia, and the support put in place has a limited shelf life. Equally, some of the 'younger old' people may achieve their goal in much less than the year – and support may no longer be required. Finally, a matched volunteer may have a change of life circumstances and be unable to continue in their 'Circle'.

Circles staff we spoke to seemed concerned that there wasn't a clearly defined 'exit' process for people supported by the project who have achieved their goal, and that there is the potential of creating dependency, which is not the intention.

Evaluation processes have not kept pace with the project's evolution and, as a result, there is a gap in some evaluation data

The monitoring and evaluation process the Circles team is applying was developed for the original envisaged Circle model of one volunteer facilitating a circle for one older person, it has not evolved to capture the benefits of wider project activities, including events. The team also finds the process cumbersome and feels that some of the SWEMWBS questions are not appropriate. As a result, assessments have not been completed for all project beneficiaries. This has created a gap in project data, which we have helped the team to fill with some additional surveys undertaken by telephone.

We are confident that this evaluation is robust, however, we also feel that the processes should be amended and simplified for year five of the project so that the team feel able to capture data for all people benefitting from their support. Ideally, data should be captured at multiple points during their support – including at initial assessment, midway through and on completion of formal support.

Conclusions 36

Recommendations

The final question covers the '+1' evaluation question:

+1 What might the Circles team do next?

We have five recommendations:

Keep what is working: a clear focus on goals, effective tools and a flexible approach wider than 1-2-1 support

The success of the project to date has been built on retaining a very clear focus that people supported by the project need to be committed to making positive change in their lives, this has helped the Circles team to differentiate their support model from other, perhaps more passive forms of support, such as befriending or day opportunities. The Circles team are clear that they find the person-centred tools provided by Community Circles effective and easy to use. The flexible approach, where older people are supported to achieve their goals in different ways, through 1-2-1 volunteer support, to attending events hosted by the Circles team, and to receiving direct support from the Circles team during lockdown, appears to be working well and is appreciated by internal and external partners.

Covid-19 has created new learning, including more use of telephone support. This could be expanded in future to support people to use digital technology. We recommend that, as the pandemic subsides, these opportunities are explored, along with a return to a setting substantive goals.

Develop a clear exit process that is time-flexible according to need

We recommend that the Circles team develops a clear process for moving people on from the project including, where needed, ensuring that people receive alternative, more appropriate support. At the moment, the Circles team find it hard to move people on from the project and there is a risk of creating dependency and having insufficient capacity to support new referrals. Situations such as the following might be included in the process:

- Where an older person achieves their goal
- Where an older person becomes unwell or the support is no longer appropriate for them
- Where a volunteer supporting an older person is no longer able to be part of the project or if the relationship ceases to work effectively

'Move on' solutions might include:

- The volunteer and older person choosing to maintain their relationship, but without support from the Circles team
- An older person being introduced to a new service provided, such as Age UK Doncaster's befriending service or day opportunities
- An older person becoming an 'associate' of the project, receiving occasional invites to join events

Consider evolving the model from a 'Circle of Support' to a local 'Family of Support'

During our interviews with Circle team members about how they thought the project should evolve, we were intrigued by a concept which we are calling a local 'Family of Support' which we think might help to resolve a number of challenges.

Instead of volunteers being matched to individual focus people, volunteers and focus people could be grouped by local area in a family – for example, a 'Bentley Family'. The Family might have three volunteers and five to ten focus people. Supported by project staff, the volunteers would work with the focus people to help them achieve their goals, this could include:

- Some focus people having 1-2-1 relationships with volunteers, as now
- Volunteers and focus people working together to organise local events which focus people can more easily attend
- Volunteers connecting focus people to each other, so they can provide mutual support
- Making more use of digital technology and supporting older people to use it

We think this model could have merit as it relies on fewer volunteers, introduces local events which project staff wish to develop, provides opportunities for volunteers to support each other, and leaves older people less exposed if their volunteer is unable to support them.

A locally-based 'Family of Support'?

Focus people Volunteers

Project staff recruit, train and support volunteers

The concept of the project being a 'family' came up a number of times in our interviews and we suggest this idea is retained and built upon.

Develop a simple, universally applied monitoring and evaluation process

Tracking outcomes of project beneficiaries is vital to measure the effectiveness of the project, support continuous learning, motivate staff and volunteers and to keep stakeholders and funders informed. Monitoring has not kept pace with the evolution of the project, and we recommend that, for year five, a simplified monitoring process is developed that the Circles team are comfortable using with all project beneficiaries. Data should ideally be gathered at multiple points during support, including at the outset, mid-point and on discharge.

Identify sources of continuation funding

The current NLCF grant comes to an end in October 2021, after which, without additional funding, the project may close. Our evaluation has identified that the project has significantly benefitted a large number of older people and is on the verge of developing a new model of supporting isolated older people that could benefit people across the UK. To retain the project's learning, it is important to identify continuation funding in the very near future.

Recommendations