



HARNESSING THE POWER OF COMMUNITIES
BEFRIENDING IN BRADFORD RESEARCH STUDY
2019

Peter Stone Consulting Limited
www.pstoneconsulting.co.uk
07711 764994

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CONTENTS

Executive Summary	5
1. Introduction	7
2. Research Brief	8
3. Current Provision	9
3.1 Background	
3.2 Providers' survey results	
CASE STUDY ONE	15
4. The Impact of Befriending in Bradford	16
4.1 Background	
4.2 Volume of befriending	
4.3 Calculating the value of befriending	
4.4 Principles of SROI	
4.5 Assumptions	
4.6 Stakeholders	
4.7 Befriendees	
4.8 Befrienders	
4.9 Calculating the SROI of befriending activities in Bradford	
4.10 SROI over time	
4.11 Summary of the social value of befriending services	
4.12 Calculating the overall impact of befriending in Bradford	
4.13 Costs of delivering befriending	
4.14 Comparison of befriending schemes	
4.15 Rural vs urban	
4.16 Large vs small	
CASE STUDY TWO	28
5. Future Demand	29
5.1 Background	
5.2. Trends	
5.3 The effects of loneliness and isolation	
5.4 Supply and demand data	
5.5 Location	
5.6 Gap identification	
5.7 Eligibility criteria	
CASE STUDY THREE	38
6. Good Practice	39
6.1 Background	
6.2 Addressing loneliness	
6.3 Comment	

CASE STUDY FOUR	47
7. Innovative Befriending Projects	48
7.1 CAB&D - Shipley Area Links Befriending - Bingley Section	
7.2 Carelink - Keighley & District Volunteer Centre	
7.3 New Horizons at Royds	
7.4 Bradford and District Live at Home Scheme	
7.5 The HALE Project – Shipley Area Links – Shipley	
7.6 Healthy Lifestyle Solutions CIC	
CASE STUDY FIVE	60
8. Future Infrastructure Requirements	61
9. New Partnerships	62
9.1 Background	
9.2 Community Partnerships	
9.3 Partnerships with GPs	
9.4 Partnerships with care homes	
9.5 Partnerships with domiciliary care providers	
9.6 Partnerships with the Local Authority and CCGs	
9.7 The case for investment in befriending	
CASE STUDY SIX	69
10. Recommendations	70
11. Conclusions	72
APPENDIX ONE – ORIGINAL BRIEF	73
APPENDIX TWO - SURVEY OF PROVIDERS – FULL RESULTS	75
APPENDIX THREE - SURVEY OF BEFRIENDEES	93
APPENDIX FOUR - SURVEY OF BEFRIENDERS	96
APPENDIX FIVE – DETAILED SROI CALCULATIONS	99
APPENDIX SIX – DETAILED INNOVATIVE PROJECTS SUMMARY REPORTS	107

EXECUTIVE SUMMARY

1. Befriending services offer a valuable intervention which can reduce, or prevent, loneliness and/or social isolation, especially in older people.
2. Loneliness and social isolation represent a very significant threat to health and are important risk factors for a wide range of mental and physical health problems including depression, high blood pressure, sleep problems, reduced immunity and cognition in older people.
3. Older people who are lonely and/or isolated have substantially increased chances of developing dementia and Alzheimer's disease. For such older people, loneliness is also associated with high blood pressure, an increased number of GP visits and higher incidences of falls. There is also evidence that loneliness can lead to earlier admission to a care home.
4. Addressing the causes of loneliness and social isolation improves the quality of life for individuals but is also likely to lead to reduced costs by delaying, or reducing, the need to access health and social care services.
5. There are at least 20 organisations delivering befriending in the Bradford and District area supporting over 1,600 people each year. 440 volunteers supply almost 36,000 hours of befriending per year worth, at the current UK Living Wage, around £260,000.
6. The benefits for befriendees of receiving support through these befriending schemes are significant and include: a reduction in isolation (reported by 83% of people); an increased feeling of being part of the community (68%); increased independence (63%); an increased ability to socialise (67%) and; improved physical and mental health (48% and 72% respectively).
7. The benefits for those undertaking the befriending include: increased understanding of the issues facing older and/or isolated people (77%); increased skills and knowledge (66%) and; increased friendships and social networks (56%).
8. In addition, there are a range of benefits for others involved – such as the families and carers of those being befriended and the statutory agencies who would experience increased workload and costs if the schemes were not in operation.
9. Befriending organisations in the Bradford and District area offer extremely good value for money – it costs around £428,000 to deliver befriending services and this delivers over £6,300,000 of social value per annum – a return of almost 15:1 for each pound spent. This equates to an average impact value of around £3,900 per person for a cost of just £260 per year. It is likely that much of this social value would still need to be met if these organisations were not delivering their services.
10. By 2022 it is estimated that there could be as many as 11,000 people aged 65 or older in the Bradford and District area who would identify as being 'often or always lonely'. It is also clear that, whilst befriending organisations are covering as wide a geographic area as possible, there are still areas which have little or no befriending coverage. With around 1,600 people supported

each year, it is apparent that there will be many who would benefit greatly from the intervention of befriending organisations who have yet to be assisted.

11. A wide range of types of befriending have been researched, and others have been trialled (as 'Innovative Projects'), in tandem with the development of this research study. These have generated useful information about ways of delivering and funding befriending into the future.
12. The Bradford & District Befriending Network has already made significant progress in the development of a range of partnerships with the local authority, CCGs, GPs, care homes, domiciliary care agencies and others. It needs to continue to develop relations at the highest levels of these organisations and to press the case for investment in delivery.
13. The Network needs to develop a wider strategic approach to the delivery of its activities; this will include the creation of a vision for the organisation; an even more inclusive membership and a marketable offer to discuss with potential partners.

Peter Stone
March 2019

1. Introduction

Like most areas of the country, the economic situation in Bradford is resulting in significant reductions in many areas of public sector delivery including adult social care services and the provision of day centres for older people. This will, almost inevitably, lead to increased pressure on the voluntary sector to help fill the gap in service provision caused by the reduction in statutory provision. Organisations offering befriending services are increasingly being asked to offer services to an increased number of clients including those with more complex social care needs. It can sometimes be the case that such increases in delivery are expected to be met without a requisite increase in funding to accompany them. Such reductions in funding and service provision may well have a serious impact on, in this case, the older population of Bradford. It could well lead to increased isolation and loneliness, decreased mental and physical wellbeing as well as increased illnesses and accidents. This has a substantial longer term, and 'hidden', cost to the system which, historically, has been very difficult to measure.

Between November 2018 and March 2019 Bradford VCS Alliance worked with the Bradford & District Befriending Network (which describes itself as *'a loose collective of interested professional befriending services in the Bradford area'*) to explore ways that *'befriending services can help to mitigate against the potential impact of these reductions to provision on the elderly of Bradford'*.

West Yorkshire and Harrogate Health and Care Partnership offered funding to the Chief Executives of the local authorities and CCGs in each of its 6 'Places' to tackle local priorities with a requirement that the projects needed to be led by the voluntary sector. One project was proposed in Airedale, Wharfedale and Craven, and one covering the BMDC area (Bradford, and Airedale and Wharfedale) – the latter of which focussed on befriending. The project in this area had four distinct elements and funding was provided to create an investment in support structures that exist to support and build the capacity of befriending services in Bradford. The four elements were as follows:

- Research Study (this report)
- Develop Bradford Befriending Network
- Workforce Development
- Innovative Approaches to Befriending (the evaluations of which are also included in this document)

2. Research Brief

The Alliance sought expressions of interest to carry out this research study into the current and future provision of befriending services in Bradford. The research brief defined one clear outcome for the project as follows:

‘Bradford Befriending Network and its partners have a detailed knowledge of the current state of Befriending in Bradford, and the evidence they need to help to develop a strategic plan for Befriending in Bradford, and for their own organisations.’

A number of six distinct tasks which needed to be undertaken were outlined in the brief:

Task One	Identify the current ‘professional’ and informal Befriending provision in Bradford, along with the current capacity of that provision.
Task Two	Establish the current value of befriending to Bradford, including identifying average unit costs for provision. Consideration should be given to both the financial value, and the real terms value in terms of the costs of loneliness and isolation, and the benefit to the ‘system’ of Befriending as a preventative measure.
Task Three	Carry out a modelling exercise to establish the estimated demand for Befriending Services over the immediate period, and the next 5 years. Part of this work will be to confirm a common set of eligibility criteria, which has a degree of flexibility to differentiate for the different levels of need which existing Services address. An inevitable outcome of this work will be the identification of potential gaps in provision which Services may be able to develop projects to fill. These are likely to be based on identified needs, rather than simply an age-related criterion. This element will require liaising with colleagues from Adult Social Care at the Local Authority. BVCSA can make the necessary introductions to facilitate this task.
Task Four	Identify national examples of Good Practice in Befriending Services, which will highlight different approaches to Befriending which may be more cost- and time-effective. This would include examples of where Personal Budgets have been used to fund Befriending Services, End of Life Befriending, cross-generational Befriending, and specific-condition Befriending (cancer, respiratory, and heart care), to fit in with existing areas of work.
Task Five	Make recommendations around approaches to the future Infrastructure required to support Befriending across Bradford, including volunteer recruitment and retention.
Task Six	Make recommendations around new local partnerships with GPs and Community Partnerships, and future engagement/closer working relationships with Domiciliary Care Providers. These elements will involve working collaboratively with Bradford Care Alliance (GP Consortia) and Bradford Care Association (Care Homes and Domiciliary Care Provider Network). BVCSA can make the necessary introductions to facilitate this task.

A methodology was agreed which sought to ensure that each of the tasks defined in the brief (see Appendix One) were addressed comprehensively.

3. Current Provision

3.1 Background

The initial phase of the research study involved assessing the extent of current befriending provision across Bradford along with the current capacity of that provision. It was understood that the Bradford & District Befriending Network already had a good understanding of the organisations delivering befriending across the area on a formal or more informal basis. Research was undertaken both with current members of the Bradford & District Befriending Network and by a comprehensive desktop review to define as many organisations which could be providing such services. This resulted in a 'long list' of organisations which had been identified as potential providers of befriending services to the older population of Bradford.

In order to define the extent of the provision of befriending services, a link to an online survey was sent to all organisations on the 'long list' seeking information about issues such as: geographic area covered; service users supported; types of befriending offered; capacity information (number of clients, befrienders, hours, wait lists, etc.) and; financial information around the cost of provision.

As well as producing the most comprehensive picture of befriending providers across the area, this element of work also resulted in the creation of a database of information which the Bradford & District Befriending Network will be able to use to expand its reach in future.

3.2 Providers' survey results

The online survey sought to assess the extent to which befriending services were being undertaken with the older population of Bradford. By the deadline, thirteen organisations had completed the survey sufficiently to make their data useful. Full survey results are included at Appendix Two; a summary is provided below based on how the respondents chose to describe their service:

a) Organisational details

A total of 13 organisations completed enough of the survey for their responses to make a meaningful contribution to the survey's results. These were as follows:

ORGANISATION	SCHEME NAME
The Sharakat Project	The Silver Club
Marie Curie	Marie Curie Helper Service
The Silver Line Helpline	Telephone Friend
Alzheimer's Society	Side by Side Airedale, Wharfedale and Craven
BD4 Community Trust	Gems Daycare
Community Action Bradford & District	Shipley Area Links Befriending - Bingley Section
HALE Project	Shipley Area Links Befriending - Shipley Area
Ilkley and District Good Neighbours	Good Neighbours Befriending and Moving On
Bradford and District Live at Home Scheme	Live at Home Connections
Age UK Bradford District	Wellbeing and Engagement
Keighley & District Volunteer Centre	Carelink Befriending Scheme
New Horizons At Royds	New Horizons
St Johns Befriending Scheme	St Johns Befriending Scheme

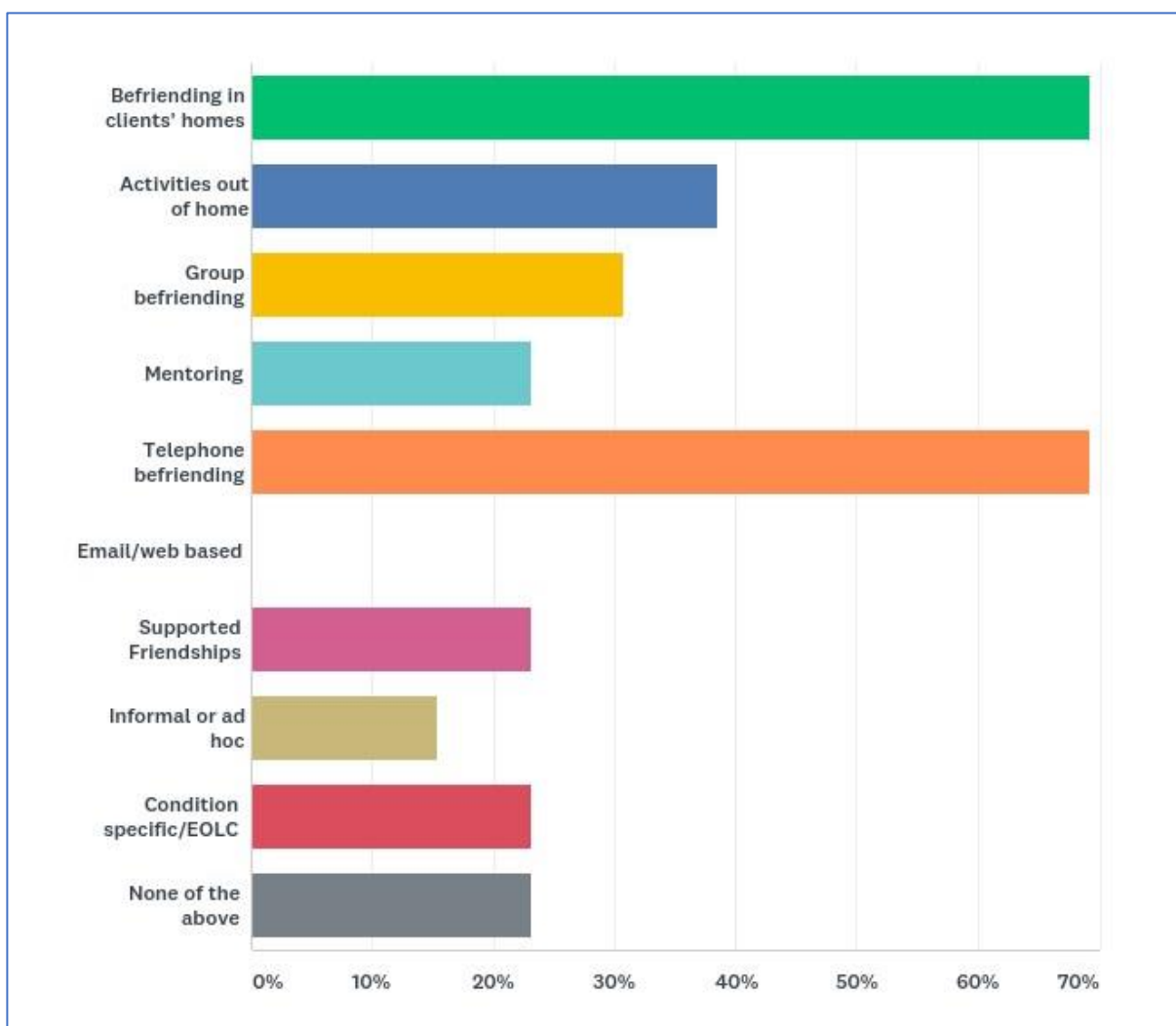
b) Coverage

Providers were asked to indicate the ward areas in which their befriending services operated. The responses were as follows:

Area	Provider numbers
Baildon	1
Bingley	2
Bingley Rural	2
Bolton & Undercliffe	0
Bowling & Barkerend	1
Bradford Moor	0
City	1
Clayton & Fairweather Green	2
Craven	1
Eccleshill	1
Great Horton	1
Heaton	1
Idle & Thackley	1
Ilkley	2
Keighley Central	2
Keighley East	2
Keighley West	2
Little Horton	0
Manningham	1
Queensbury	0
Royds	1
Shipley	1
Thornton & Allerton	1
Toller	1
Tong	0
Wharfedale	1
Wibsey	1
Windhill & Wrose	1
Worth Valley	1
Wyke	1

Three other providers indicated that they covered all of the Bradford area. These were Age UK Bradford, the Marie Curie Helper Service and Silver Line. It is thought possible that other providers may undertake some work in parts of individual wards but they may not have indicated this in their responses.

c) Delivery formats



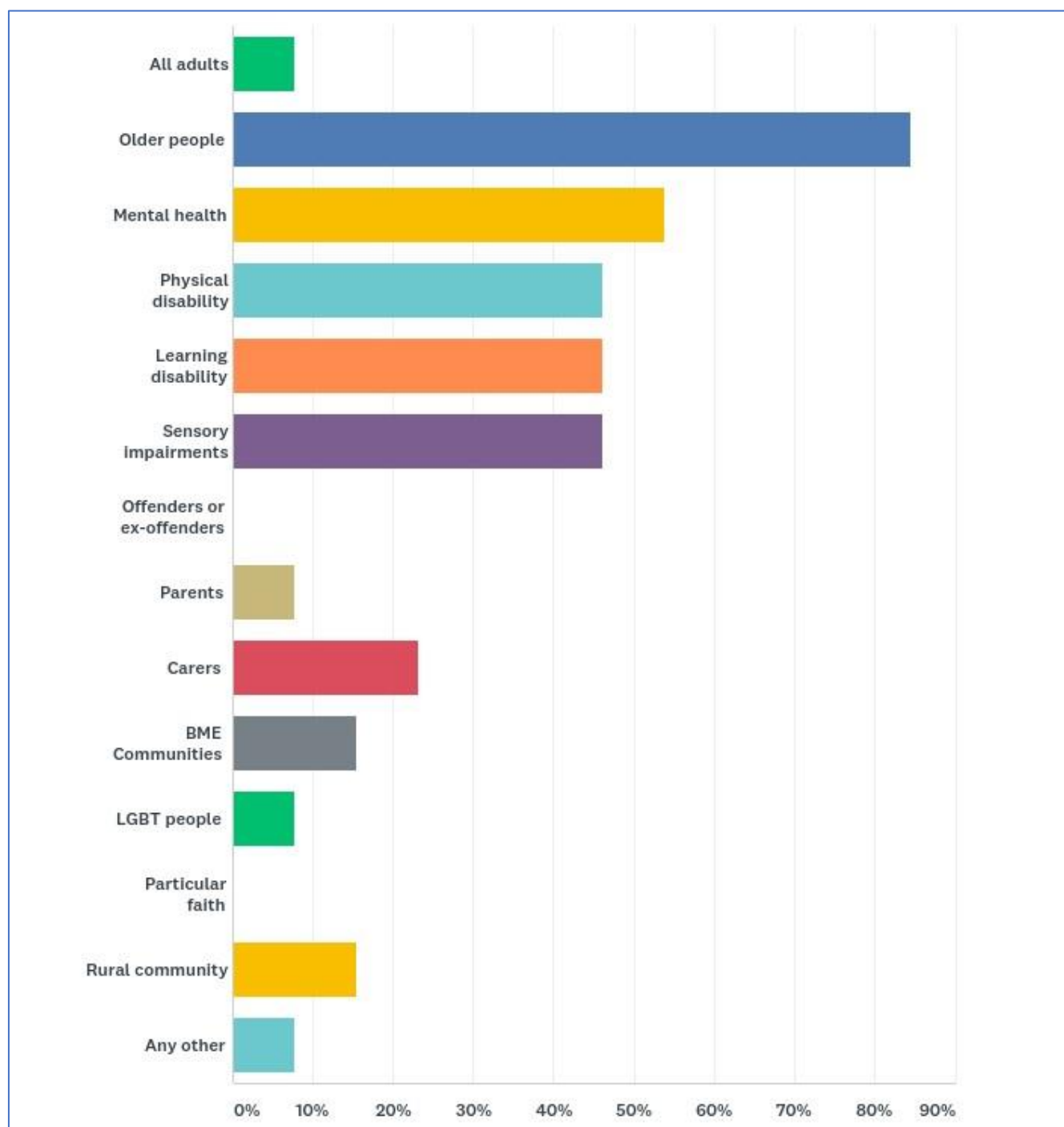
d) New areas of delivery

A number of respondents indicated that they were planning to look at developing new areas of befriending services. The most frequently mentioned service was supported friendships (support for someone to make and sustain peer friendships in a supported environment such as by acting as a chaperone or by helping with practical things like arranging travel/handling money) where several organisations felt there was real demand and potential.

When asked, groups indicated that there were a number of types of befriending which seemed to be increasingly in demand. These included: home support; help with appointments and; support for individuals with substantial mental health issues. This last area – and including those living with dementia – was reported by a number of organisations as being an area where there was considerable demand/need for services.

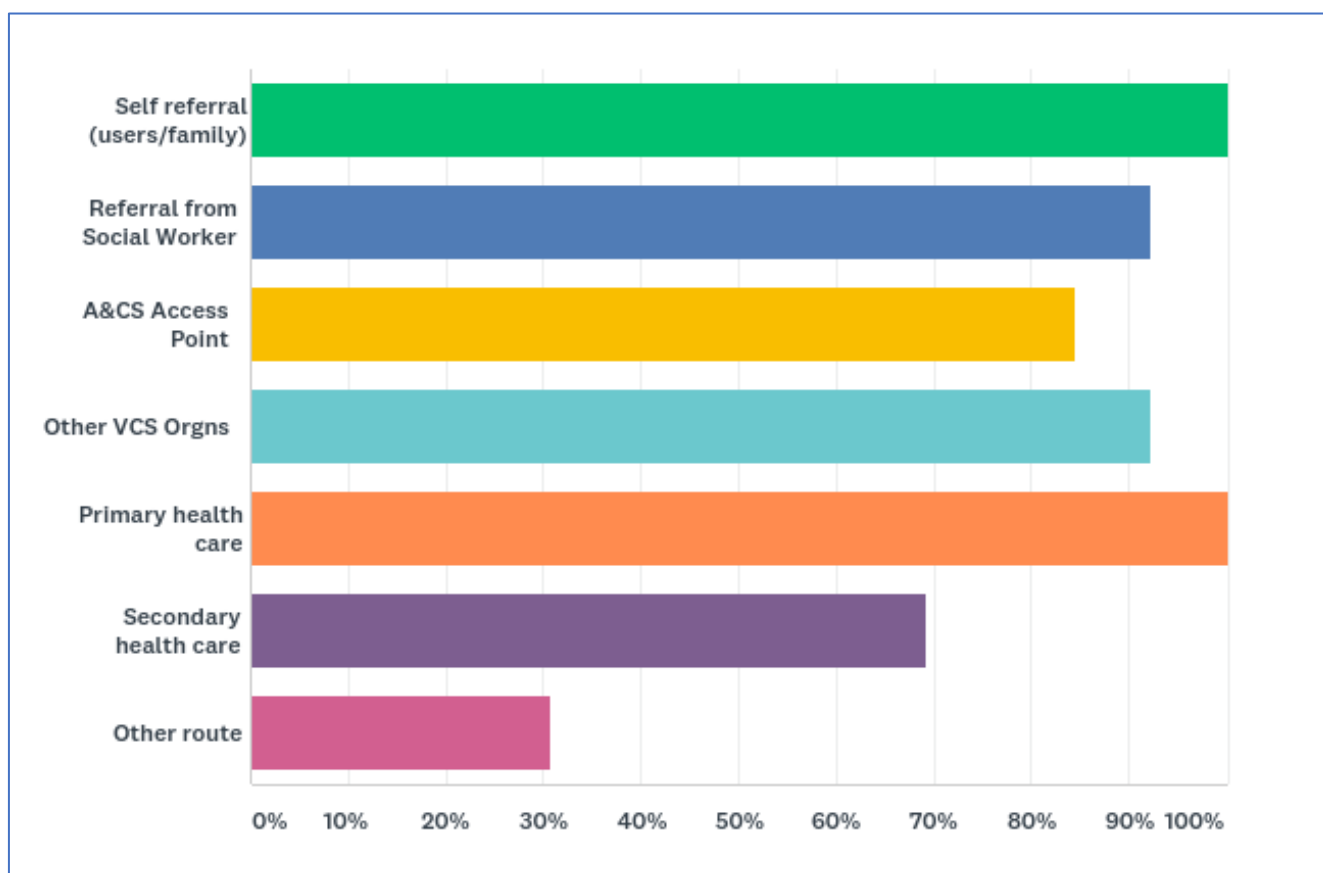
e) Target groups

Respondents indicated that the groups they worked with fell into the following categories:



f) Referral sources

The following pattern of referrals was reported:



g) Referral volumes

Across the responding organisations working directly in the Bradford area there are around 90 referrals a month – equating to around 1,100 per year. During any one month these organisations indicated that they support around 550 people.

62% of organisations have a waiting list for befriending and, at present, there are 154 people waiting to be matched to a befriender. The length of time people are on a waiting list varies significantly but the average period of time was found to be in the region of 1 – 2 months, although some individuals may wait up to 6 months. The main reasons listed for the waiting lists were shortage of suitable skilled volunteers, limits to staff time, and organisations seeking to avoid putting interim arrangements in place rather than longer term befriending arrangements. For the purposes of calculating the number of individuals receiving befriending support in a year it has been calculated as:

Initial Number	550
Number waiting: 150 per two-month period (150 x 6 periods)	900
Subtotal	1,450
Less number dropping out each year (conversation with providers and wider experience suggests this is around 10%)	-145
Grand Total	1,305

h) Staff and volunteers

Of the 13 organisations which responded 11 had paid staff involved in the delivery of befriending services whilst 2 had only volunteers involved in that delivery. In terms of volunteer befrienders actively involved in the delivery of befriending services in a year across all local delivery partners, a total of 352 were reported. The number of volunteer hours given to services each month by befriending volunteers was in the region of **1,917** giving an average of 5.4 hours per month each or approximately **23,000 hours of volunteering each year**. At the UK Living Wage of £9.00 per hour¹ this equates to around **£207,000** of donated time each year.

i) Charging

Only 2 of 13 organisations levy a small charge for befriending services. One charges £1 each week which goes towards the costs of a snack and organised activities. The second organisation asks for a contribution of £3.50 for its lunch group which acts as a group befriending service (although they also have a fee waiving policy).

j) Funding

As would be expected with organisations working in the voluntary sector, the majority of funding for most projects comes from either grant making trusts, local authority funding or the Lottery. A number of projects report that funding is only currently secure until the end of March 2019 but that they are in the process of seeking further funding to allow their project delivery to continue.

The future of some schemes from April 2019 is therefore uncertain – as one respondent indicated: *‘If no suitable funding is found, then a very minimal service will be run by our core charitable funds to cover a wind down period. Referrals will be suspended, and participants informed, with support given for stopping of some befriending, if this is chosen. Other pairs will continue with minimal support - such as safeguarding advice and supervision only.’*

¹Living Wage Foundation, www.livingwage.org.uk, February 2019

CASE STUDY ONE - A

'A is a widower. His daughter lives in Newark and his son lives in France; both very supportive and visiting when they can but limited by living so far away from him. A was referred to CarelinkK by Carers' Resource, who had been supporting him following the sudden death of his wife and carer B, but because their involvement was time limited, it was due to come to an end. Losing his wife affected A's well-being, not only because they'd had a long and happy marriage, but also because she had become his carer in recent years after he had suffered several strokes. A and B had been very close and did everything together, so he felt that he had lost his best friend as well as his means of day-to-day practical support. He became lonely and very low in mood, feeling that he had nothing to live for as he struggled to see how a man of his age could begin to adapt and regain some quality of life.

*A's mobility had been affected by the strokes, so he depended on a wheeled walker to get about but felt unable to go out unaccompanied due to a loss of confidence. Following our initial assessment, we matched A with C, one of our volunteer befrienders. C has been a great support to A, particularly as A's health and mobility have declined further. C works full-time so he calls to see A on Saturdays and when A is feeling up to it, he takes him out for a chat over a pub lunch which A enjoys enormously. A said, **"I have found the friendship that has developed between C and myself to be something beyond measure."** C makes sure that the homecare A receives is working out well and keeps in touch with A's daughter and has often stepped in to help out in emergencies. For example, A was rushed into hospital after a nasty fall earlier this year and C was instantly at his hospital bedside providing advocacy and moral support along with a bag of essential items to make A's stay more comfortable. C stayed with a frail, confused A until his daughter arrived from Newark. She contacted us at CarelinkK to thank us afterwards to tell us how much our volunteer's support had meant to her and her dad. **"C is just amazing. Nothing is too much trouble. "Living so far away I really worry about dad, but he won't move to be near to us, so it is reassuring to know that you at CarelinkK are all there looking out for him."***

*Since he was referred to CarelinkK we introduced A to Silverlinks, our older peoples' social day group. We have arranged for Keighley Volunteer Centre's handyperson scheme to carry out various odd jobs for him including fitting grab rails to his back door and improving access so that he was able to get about more safely. We also referred him to Contact the Elderly and he looked forward to going to their Sunday afternoon tea parties. Over the past year or so A's physical health and mobility have deteriorated further, and he is no longer well enough to attend group activities. A realises that his health will not improve and told us, **"C is a good friend and he never lets me down. He still comes every Saturday and it's nice because if I am up to it, he takes me out for a pub lunch. It does me good."** Befriending is very much a 2-way thing which benefits the befriender and befriended. Volunteer befriender C says, **"Befriending A has been a pleasure; one of the best decisions I ever made was becoming a volunteer with CarelinkK."***

Case Study supplied by Keighley & District Volunteer Centre

4. The Impact of Befriending in Bradford

4.1 Background

As well as defining which organisations were providing befriending services in Bradford, the intention of the initial survey was to utilise the gathered data to estimate the overall cost of providing befriending services in Bradford. In addition, through a number of other pieces of analysis, the aim was to calculate the social impact of befriending in the area. This would also aim to reflect on, and allow for, the differentiation of the complexity of work being carried out by different services.

The intention behind this analysis was to calculate the cost of addressing loneliness and isolation through befriending as well as the social return on investment of befriending in terms of the savings to society made by using befriending as a preventative measure. A number of interim steps were undertaken to define these measures:

- *Calculating the volume of befriending being undertaken across Bradford by all identified organisations*
- *Producing an informed estimate of the amount of befriending being undertaken by organisations which have not been identified as part of the study*
- *Utilising the data available to calculate the value of those befriending services*
- *Seeking to reflect any differences in value and impact between schemes offering differing types of befriending services*
- *Seeking case studies from organisations identified during the research study to help give a series of personal perspectives on the impact of befriending*

4.2 Volume of befriending

The survey undertaken in the first stage of the research study defined that a significant amount of befriending is being undertaken by identified organisations, as follows:

- *13 organisations offering befriending services*
- *550 people accessing befriending services in any one month*
- *150 people waiting to access befriending services at any one time*
- *1,305 accessing befriending services in any one year*
- *352 volunteers giving an average of 5.4 hours' support each per month*
- *23,000 hours volunteering per year*
- *£207,000 value of volunteering (at UK Living Wage of £9.00 per hour)*

It is believed that all the main organisations delivering befriending services in the Bradford area have been identified through conversations with members of the Network and from desk-based research. A number of smaller organisations did not complete the survey, and some may not have yet been identified. An allowance for the delivery of these unknown organisations needs to be included when seeking to define how much befriending is being delivered by voluntary sector organisations in the area. It was also felt important not to overstate their contribution to the numbers described above. The author's experience of working in other areas and across a wide range of projects suggested that, perhaps, 25% more befriending would be being undertaken. This was therefore added to the above calculations to create what is hoped to be a more accurate and reasonable assessment of the total effect of befriending services being delivered across the area. This gives the following figures:

- 20 organisations offering befriending services
- 687 people accessing befriending services in any one month
- 187 people waiting to access befriending services at any one time
- 1,631 accessing befriending services in any one year
- 440 volunteers giving an average of 5.4 hours' support each per month
- 35,796 hours of befriending per year (7,046 paid staff, 28,750 volunteers)
- £258,000 value of volunteering (at UK Living Wage of £9.00 per hour)

4.3 Calculating the value of befriending

A key part of the study was to seek to define the social impact of the work undertaken by befriending organisations. Such work aims to understand and assess the effects on various groups of people which occur as a result of a range of activities. It is clear that such impacts can be positive or negative and can be intended or unintended or a combination of all of these. An activity can have immediate and direct impact on some people but can also have a more far reaching effect on people and organisations which are not directly engaging with it.

One of the leading methodologies for the calculation of social impact is Social Return on Investment (SROI) which is a *'method for measuring and communicating a broad concept of value that incorporates social, environmental and economic impacts'*. This is a way of measuring the value created by the activities being assessed and the contributions which made the activities happen. As Social Impact Scotland put it, it is also *'the story of the change affected by our activities, told from the perspective of our stakeholders'*.² SROI as an approach for measuring social impact was first documented in 2000 by REDF in San Francisco and has been widely adopted. In the UK the process has been standardised by Social Value UK. The process of measuring SROI involves assessing the outcomes which are experienced by stakeholders and the degree to which those outcomes are experienced. These outcomes may include things for which no traditional values exist such as reductions in isolation, improvements in health or greater self-esteem. Such changes are often of great value to stakeholders in particular, as well as to society in general, since they may generate cost savings to public services or may generate a greater contribution to society from the individuals concerned. The process of measuring SROI involves creating monetary values on the identified outcomes so that they can be compared to any cost of investment. This results in a ratio of total benefits (a sum of all the outcomes) to total investments. In order to assess the value of these changes, SROI measurement uses a series of alternative calculations (financial proxies) to assess the implications if the change had not taken place. These might be the costs or, indeed savings, which would have been incurred if the specified intervention had not taken place or the outcome had not been achieved.

Once the financial value has been calculated the assessment process involves considering how much of the change would have happened anyway (called 'deadweight') and adjusting the figures appropriately. It also considers if creating savings in one area may have incurred costs in another (called 'displacement') and the contribution of other factors or services in making the change occur ('attribution'). These calculations seek to ensure that the process does not over-claim the value delivered but presents a realistic picture of the impact of the assessed project.

² What is SROI?, *Social Impact Scotland*, 2017

4.4 Principles of SROI

The measurement of the Social Return on Investment is based on seven principles³ which underpin how SROI should be applied and are often defined as follows:

- *Involve stakeholders*
- *Understand what changes*
- *Value the things that matter*
- *Only include what is material*
- *Do not over-claim*
- *Be transparent*
- *Verify the result*

4.5 Assumptions

The surveys issued to providers, befrienders and befriendees allowed the gathering of average data across all respondents and these averages have then been extrapolated to make a series of informed estimates of the impact of all the organisations providing befriending across Bradford.

4.6 Stakeholders

It is critical to identify the stakeholders involved at the beginning of any SROI process. It is clear the stakeholders who are involved in the measurement of the SROI of the Bradford & District Befriending Network are as follows:

- Befriendees
- Professional and volunteer befrienders
- Families and/or carers of befriendees
- Referral agencies

In order to gather information on the first two groups, surveys were issued to all befriending providers with a view to those organisations issuing them to relevant individuals. Full survey results have been issued to the Programme Lead at BVCSA; summaries are included below. This research study did not intend to include a calculation of the impact on families or carers of individuals befriended by one of the participating organisations, but it is still reasonable to make a cautious calculation of the impacts which organisations might have on such families and carers. Previous work, as well as anecdotal evidence, suggests that these relatives and carers can experience a number of beneficial impacts as a result of their friend or relative being supported by the befriending scheme including:

- Reductions in time taken off work to look after their loved one
- Reduced costs of travel (in some cases, with families living a long way away, this was reported as being quite significant)
- Improved physical and mental health due to having time to 'recharge' and look after their own interests as well
- Less isolation and improved social networks from being able to pursue their own interests

³ A Guide to Social Return on Investment, *SROI Network*, 2012

No data has been generated relating to these impacts, but it is considered important to include some value for these effects and, as with other similar studies conducted by the author previously, a nominal value of the impact has been added. A conservative figure has been included with the express intention of ensuring that readers will accept that the value would be at least at this level, if not more.

The impact of befriending in terms of creating savings for statutory bodies and/or referral agencies is the most difficult to assess. Whilst there is considerable data available about the direct costs, little, if any, data is available about the internal costs of these organisations and, for this reason, such effects have been omitted. Referral agencies, particularly those in the statutory sector, are likely to make significant cost savings through the interventions of effective befriending services. These are likely to include:

- Fewer people presenting to receive services
- Less need for visits by health and social care staff
- Fewer 999 emergency calls

It is illogical to omit *all* impact value from the report so, as with families and carers, a nominal value has been included which, it is hoped, will also be felt to be a reasonable value which would in reality be exceeded.

For each group of stakeholders, it is important to seek to assess the outcomes – or benefits – reported:

4.7 Befriendees

A survey was distributed to organisations which deliver befriending services in the Bradford area (copy at Appendix Three) with a request that they ask individuals receiving befriending support ('befriendees') to complete the same. Individuals were asked to assess the degree to which involvement with a befriending service had helped them to:

- Reduce their sense of loneliness/isolation
- Increase their feeling of being part of the community
- Increase their sense of independence
- Increase their desire/ability to socialise
- Improved their physical health
- Improved their mental health

For each area under investigation respondents were asked to assess the degree to which they had been helped by their involvement under the following scale:

- Not at all
- Slightly
- Neither more nor less
- Quite a lot
- Significantly

A total of 81 surveys were returned before the survey deadline; 78 of these were found to be useable. Full survey results have been supplied to the Programme Lead at BVCSA and a summary is provided below.

The survey tested out the degree to which those receiving befriending support felt that being involved in befriending services had helped them in a number of areas. The responses to these questions were translated into scores which allowed an overall assessment to be made of the average improvement reported for each outcome as follows:

Outcome: Please indicate to what extent being involved with a befriending service has helped you:	Noted by:	Percentage reporting achievement of outcome
Reduce my sense of loneliness/isolation	People feel more supported and less on their own and make fewer calls on health and/or social services seeking support	83.0%
To increase my feeling of part of the community	People feel more connected to their communities, are less likely to move into supported housing as quickly, and have reduced requirements for external support	67.9%
To increase my sense of independence	People feel more able to look after themselves and require fewer support services	62.5%
To increase my desire/ability to socialise	People can access social activities of their own choosing and do not require access to more formal day care activities as a result	67.0%
To improve my physical health	People feel they have better physical health as a result of their engagement in the activities	48.4%
To improve my mental health	People feel better and report fewer problems with mental health	72.4%

4.8 Befrienders

A similar survey was distributed to organisations delivering befriending services in the Bradford area for completion by staff and volunteers who undertake befriending (copy at Appendix Four). Individuals were asked to assess the degree to which involvement with a befriending service had helped them to:

- Increase their understanding of the issues facing older and/or isolated people
- Increase their skills and knowledge
- Increase their friendships and social networks
- Increase your employability as a result of gaining new/additional skills and/or volunteering
- Improve their physical health
- Improve their mental health
- Increase their confidence

For each area under investigation respondents were asked to assess the degree to which they had been helped by their involvement under the following scale:

- Not at all
- Slightly
- Neither more nor less
- Quite a lot
- Significantly

A total of 79 surveys were returned before the survey deadline; of these 66 were found to be useable. Full survey results have been supplied to the Programme Lead at BVCSA and a summary is provided below. The responses to these questions were translated into scores which allowed an overall assessment to be made of the average improvement reported for each outcome as follows:

Outcome: Please indicate to what extent being involved with a befriending service has:	Noted by:	Percentage reporting achievement of outcome
Increased your understanding of the issues facing older and/or isolated people	People feel able to undertake their befriending work better, gain skills and experience which will be of use in future	76.9%
Increased your skills and knowledge	People gain skills and experience which will be of use in future	65.5%
Increased your friendships and social networks	People feel more connected and supported	56.4%
Increased your employability as a result of gaining new/additional skills and/or volunteering	People are more easily moved into employment as a result of the skills they gain if volunteering and/or undertake paid roles to a higher standard	44.7%
Improved your physical health	Fewer appointments with the healthcare system	36.7%
Improved your mental health	Fewer appointments with the healthcare system	50.4%
Increased your confidence	People feel more able to undertake difficult or complex tasks	59.5%

4.9 Calculating the SROI of befriending activities in Bradford

When looking to calculate the value of the social impact of befriending in Bradford it is necessary to make a series of reasoned, and reasonable, assessments of the costs which would be incurred had that work not taken place. The specific process for calculating the costs saved as a result of the achievement of a particular outcome was as follows:

- For any particular outcome, the total number of people who could have been affected is reported - a figure of 1,631 was used since this is the number of people estimated as receiving befriending services in an average year at any one time across all organisations (not just members of the Network).*
- For each outcome, this was then multiplied by the percentage of people reporting the outcome calculated from the responses to the surveys reported above.*

- c) *Assumptions were then developed to indicate the types of savings that would be made as a result of the befriending projects delivering the outcome. For example, in the case of reducing isolation, the assumption is that 2% of people would move into local authority own-provision residential care or residential care funded by the local authority if the befriending schemes were not in operation.*
- d) *Financial values were then calculated to describe the savings that would be delivered under each of these headings, if the outcome was not delivered.*
- e) *Finally, the impact is discounted by factors representing how much of the change would have happened anyway and the contribution of other factors or services in making the change occur.*

4.10 SROI over time

Even when people stop receiving befriending support, it is reasonable to assume that some of the benefits will remain with them after the service has ended. Such benefits could include still having access to better social networks and continuing improved physical and mental health. Calculating the lasting effect in these circumstances can be difficult although anecdotal conversations with service users have previously suggested that such benefits can be quite long lasting.

Conversations with providers suggested that the number of individuals leaving befriending projects each year is relatively low; it was therefore assumed that only 10% of people would leave projects in any year and that, in order not to overstate the residual benefits for individuals leaving projects, it would be assumed that the impact of the project would decline by 25% p.a. and that there would be no residual support value after five years. In reality, it is likely that, for many befriendees, there would be long lasting benefits which would stay with them for a much longer time than this.

4.11 Summary of the social value of befriending services

The decision was taken to cost those outcomes which would involve a significant financial cost if befriending schemes were discontinued and to omit those which would have (relatively) little financial value to give a realistic value of impact. Below is a simplified table of impact calculations; the detail behind this can be found at Appendix Five:

Befriendees	
Outcome/change observed	Calculated impact value
Reduced sense of isolation and loneliness, increased feeling of being part of the community	£1,320,530
Increased sense of independence	£306,059
Increased desire/ability to socialise	£628,852
Improved physical health	£521,034
Improved mental health	£838,558
TOTAL	£3,615,033

Befrienders	
Outcome/change observed	Calculated impact value
Increased their employability as a result of gaining new/additional skills and/or volunteering	£94,914
Increased their understanding of the issues facing older and/or isolated people	Included in the above
Increased their skills and knowledge	Included in the above
Increased their confidence	Included in the above
Increased their friendships and social networks	£12,871
Improved their physical health	£4,133
Improved their mental health	£5,456
Value of volunteer time	£253,800
TOTAL	£371,174

Families and carers	
Outcome/change observed	Calculated impact value
It is assumed that 80% of befriendees have a family member or family carer and that the nominal value of the benefits to that 80% can be valued at one hour per week at £9.00 per hour ⁴ (Real Living Wage).	£610,646
TOTAL	£610,646

Agencies (local authorities, CCGs, Police, etc.)	
Outcome/change observed	Calculated impact value
It is assumed that 50% of befriendees would, without the befriending scheme, cause agencies to incur higher costs estimated at a minimum of the average cost of an unqualified social worker (£44 per hour x 0.5 hours per week) (PSSRU 2018)	£932,932
TOTAL	£932,932

In addition to these impact figures, an adjustment needs to be made for the residual impact ascribed to people leaving the scheme (as befriendees or befrienders) in any year who would be seen to 'take some value with them' as described above. This value has been calculated as follows:

Total year impact value (excluding savings to families/carers and agencies): £3,986,206 - 10% of the year impact value would be £398,621	
Year 1 out of scheme (25% loss of impact):	£298,965
Year 2 out of scheme (25% loss of impact)	£224,224
Year 3 out of scheme (25% loss of impact)	£168,168
Year 4 out of scheme (25% loss of impact)	£126,126
Year 5 out of scheme (assumed no impact remaining)	£0
Total 'carried forward' value	£817,484

⁴ Living Wage Foundation, www.livingwage.org.uk, 2019

4.12 Calculating the overall impact of befriending in Bradford

From the figures described above it can be seen that organisations delivering befriending services in Bradford are delivering the following value:

Impact value for befriendees:	£3,615,033
Impact value for befrienders:	£371,174
Impact value for families and carers	£610,646
Impact value for agencies	£932,932
Lasting impact of SROI:	£817,484
Total impact value:	£6,347,269

4.13 Costs of delivering befriending

In order to assess the social return on investment of befriending projects across the Bradford area, it is necessary to have detailed financial information on all participating organisations. Data was supplied by some organisations participating in this study but by no means every organisation felt able to share such information. In addition, within the Bradford area, there are a wide variety of organisations operating very different projects with a very different range of costings. In some cases, the befriending schemes are projects which operate as part of a larger organisation, whilst in others the organisation is entirely focussed around befriending.

An assessment of the costs of delivering befriending in Bradford needed to be undertaken if the social impact of the services was to be determined. The providers' survey determined that 84.6% of responding organisations employed paid staff in the delivery of befriending. Staff roles mentioned included management of the service, administration and befriending itself. The following data was supplied in answer to this question in the providers' survey:

Orgn.	Salaries, NI, Pensions	Staff and Volunteer expenses	Admin support	Utilities, phones, printing etc	Other costs	TOTAL
1	£2,112	£50	£0	£20	£1,680	£3,862
2	£42,000	£600	£1,200	£1,000	£2,500	£47,300
3	£39,000	£3,000	£1,500	£4,800	£1,700	£50,000
4	£38,776	£2,334	£1,376	£9,029	-	£51,516
5	£12,844	£7,180	£5,756	£218	-	£26,000
6	-	--	-	-	-	£66,986
Average	£26,946	£2,633	£1,966	£3,013	£1,960	£40,944

Looking at the data submitted, and the organisation which supplied that data, it is considered that the above average costs are higher than would be experienced across all providers. A lower figure of average costs for salaries (75% = £20,209) has therefore been calculated to reflect the higher anticipated number of smaller organisations. This gives an estimated average cost per project of £34,207 (£40,944 less £26,946, plus £20,209).

Of the 13 survey responses, 85% indicated that they had paid staff. This equates to 11 organisations with paid befriending personnel. At an average cost per project of £34,207, this would give a total cost

for these organisations of £376,277. Two other responding organisations indicated that they did not have paid staff and it has been assumed that the other 7 organisations which are operating services in the area would also not have paid staff. For these organisations an average cost equating to expenses plus utilities has been assumed to represent running costs. This totals £5,646 per organisation – or £50,814 in total. These calculations would therefore give a total cost of running befriending projects in Bradford in the region of £427,091.

Social Return on Investment

Looking at the estimated costs of the Network and the Impact Value, it has been calculated that over £6.3m worth of value is being delivered for a cost of £427k.

This gives a return on investment in the region of £14.86 for every £1 invested.

This equates to an average impact value of £3,891 per person for an average cost of £262.

4.14 Comparison of befriending schemes

The difficulty in making formal comparisons between different types of befriending schemes is that, across the Bradford area, there are relatively few examples of schemes offering differing approaches upon which to base an analysis. Even where there are a number of schemes using a similar methodology, the organisations usually deliver in ways that are different in reach, resources and style. What is possible is to look at the *general* way in which schemes run, the likely costs that would be associated and the potential benefits to befriendees which might accrue as a result. This can also be compared against more generic schemes such as day centre activities and social groups.

Experience gained through the evaluation of the Derbyshire Trusted Befriending Network would suggest that the benefits reported by recipients of befriending schemes are significant and the level of benefit reported is fairly similar whichever type of befriending is being delivered. During that evaluation it was expected that the authors would find that face to face befriending, in clients' homes, would be seen as more valuable and more personal than telephone befriending but, in fact, little evidence was seen to support this. It was suggested that this might in part be down to the fact that few people experience more than one style of befriending, so they do not necessarily know 'what they are missing'.

It is clear that the personal – and one to one - interventions offered by befriending services are of great value, whichever the method of delivery. Numerous interviews and case studies attest to the fact that befriendees value a significant, direct and personal conversation - and relationship - with another individual.

In terms of cost efficiency within befriending services, it is obvious that the scheme with the lowest unit costs would be likely to be the most cost efficient in terms of cost per hour of befriending. This tends to mean that those with the greatest reliance on volunteers will demonstrate the lowest cost per unit of delivery. Volunteers will almost always require management, support, induction and training and, as projects develop, further staff capacity to undertake a number of functions including rostering, safeguarding support and liaison with funders.

What is notable, however, is just how low the average costs of a scheme are in comparison with the impact of those schemes. Looking at the costs of delivery across the Bradford and District area:

- Total number of hours befriending provided: 35,796
- Costs of befriending activity: £427,091
- Cost per befriender/hour: £11.93

This cost per hour seems to compare favourably with the true cost of providing a range of other services as follows:

- Private sitting services: £18 - £25 per hour
- Private care services: £18 - £25 per hour
- Attendance at day centres: £30 - £70 per day (varies widely depending on the organisation running the centre, number of attendees, length of day etc., and charges have increased significantly in some centres recently). The services at a Day Centre are often more group based rather than one-to-one.

Whilst other types of social activity are also valued, they are not seen to deliver the same sorts of benefits as befriending schemes. For many individuals such group services are inaccessible; they may not be able to travel due to health or age-related reasons, and the costs of transport can be significant especially for those living in more rural areas. Such travel costs cannot be afforded by many people, and local authorities and charities often have insufficient funds to meet such needs. In addition, although such groups are deemed to provide significant benefits, they are not seen as providing the close personal relationship which is delivered by befriending projects. They do provide a social outlet and friendship for those who are able to attend, but this is often considered to be a less personalised relationship to that delivered via befriending.

4.15 Rural vs urban

The more rural the environment in which the befriending scheme operates (such as in parts of Airedale or Wharfedale), the more likely it is that those wanting to access services will be more dispersed. This can lead to longer travel times for befrienders and higher travel costs. In addition, lower population densities mean that there are likely to be fewer people requiring befriending services. In urban areas (such as in Bradford), there are likely to be more people requiring befriending, creating a need for more befrienders, as well as more staff coordination – but the journey costs are likely to be lower. These factors create a situation where comparison of the cost efficiency of delivery is difficult to measure. Previous studies, such as the report into befriending in Derbyshire⁵ would seem to suggest that there is little difference between the operating costs of rural schemes and urban ones.

⁵ DTBN, *Befriending in Derbyshire: An Impact Assessment*, 2017

4.16 Large vs small

It would appear that the most cost-efficient schemes are the smallest since these are the projects which have the lowest requirement for paid staff and the greatest contribution from volunteers. However, the addition of some paid staff time seems to be essential as schemes grow to ensure that the greater volume of demand can be met, provide more continuity of delivery and coordination, provide a central point for stakeholders and ensure adherence to Quality Marks etc.

The largest befriending schemes would usually appear to be those with a maximum of three or four personnel; beyond that limitations of funding, coordination and geographical area seem to mitigate against further growth. This ensures that even these relatively large services offer good value for money.

CASE STUDY TWO – D and E

'D and E were referred by the Community Matron for befriending and advocacy. D had recently been diagnosed with Alzheimer's and his memory was deteriorating. E was struggling to cope as D had previously been her carer and she did not seem to have any support.

The Advocate made a home visit and explained the various services that were offered through the Befriending scheme. The couple were isolated and had no one to talk to. The two did not socialise but had done so in their younger days and had many happy memories.

Having discussed the case with the Befriending Co-ordinator, a joint visit was made. E was keen on the idea of a befriender, but D was wary.

Given D's needs, a specialist Befriender was allocated. As the Befriending continued both E and D looked forward to the visits. E had always been creative. The specialist Befriender was able to work with both on a Life Story Book which captured E and D's life together and would be a good memory prompt for D.

The advocate established that D was worried about his memory but did not seem to be accessing any services. The couple had also been waiting over two years to be rehoused into sheltered accommodation. A benefits claim had been made about two years ago to help with care but was not in payment.

The advocate obtained access to services to help with D's memory. An appointment was made with Citizens Advice where the advocate explained the benefits situation. As a result, E and D, not only received their payments but a considerable backdate. Citizens Advice also identified other benefits that the couple might be entitled to.

Advocacy intervention led to the rehousing process being restarted and the couple were eventually rehoused into sheltered accommodation with amenities close by and regular social activities.

They were very grateful for the help received from Advocacy and Befriending.'

Case Study supplied by Community Action Bradford and District

5. Future Demand

5.1 Background

A requirement of the research study was to define the estimated demand for befriending services both at the current time and over the next five years. To achieve this, the following steps were undertaken:

- Assessment of the trends affecting the voluntary sector in general and groups offering befriending services in particular;
- Liaison with current providers through the providers' survey to formulate a view of the current demand for services from an extrapolation of the current level of provision, the wait lists and through the creation of an estimate of the amount of 'unknown' demand;
- Utilisation of population and forecast data from other sources of information (primarily BMDC, Bradford Observatory and the CCGs) to allow forecasts of the growth of demand for services over the next five years.

In addition, it was important to consider whether it would be possible to create a *'common set of eligibility criteria, which has a degree of flexibility to differentiate for the different levels of need which existing services address'*. It was envisaged that a by-product of this work could be the identification of potential gaps in provision which services may be able to develop projects to fill. At the outset, it was imagined that such gaps were likely to be based on identified needs, rather than simply an age-related criterion.

5.2. Trends

The delivery of services by the voluntary sector is being affected by a wide range of political, social and financial issues which, as many commentators have said, have put it under more strain than ever before. It is against the key issues described below that any delivery and/or expansion of befriending services will need to operate.

a) Local authority and health service budgets

The budgets of local authorities and CCGs have been under pressure for a number of years and the situation in Bradford is similar to that across the rest of the country. Since 2011, CBDMC has made £262 million of budget savings and cuts⁶. The authority also indicates that it has *'invested £56 million into priority areas largely to help cover the impact of demographic growth (growing numbers in certain sections of the district's population, such as people under 16 and older people)'* which is likely to have had the effect of shifting resources from other areas of delivery. Bradford MDC's Proposed Financial Plan for 2019/20 and 2020/21 indicates that further savings will be needed; the plan proposes savings of £13.5 million for 2019/20 and a further £19.9 million identified for 2020/21⁷. The authority also flags up that there *'is a further projected 'funding gap' of £28.8 million for 2020/21'* and that further plans need to be developed to address this gap. The Council indicates that *'[T]he money can only be found by cutting spending or increasing the Council's income or increasing Council tax'* which may well have an effect on any organisation receiving support from, or delivering services to, the authority. Conversely, it may mean that the voluntary sector has an opportunity to tender for work – albeit in a situation where the lowest cost may well win the day. The situation at the three CCGs covering the Bradford area (Airedale, Wharfedale and Craven, Bradford City and Bradford Districts) also remains

⁶Bradford MDC, www.bradford.gov.uk, 2016

⁷ Bradford MDC, *Proposed Financial Plan 2019/20 & 2020/21*, 2018

difficult. The much-discussed demand pressures mean that the organisations are continually looking for best value delivery from all internal and external areas and this, in turn, means great scrutiny of any initiative.

The public sector has another significant impact on the people who might be assisted by organisations offering befriending services. Elsewhere in the country the financial situation has meant that services offered by the public sector itself are also being cut and/or eligibility thresholds are being raised. This means that individuals with less acute needs may no longer be able to access support or may not receive a personal budget to purchase them. These reductions could lead to people having less support, being more isolated and, potentially, could lead to increases in the pressure on befriending and other services from the voluntary and community sector.

b) Systemic integration

Whilst all statutory systems are under pressure, it is also fair to say that the health and social care systems are each working to deliver their respective goals within the very tight financial situations in which they find themselves. What is needed however, is further work to integrate the two systems. There are encouraging signs – the work of the West Yorkshire & Harrogate Health and Care Partnership is seeking to ensure that the health and social care systems work together, and that work must be applauded. A number of people interviewed during the production of this report indicated that the speed at which the systems continued to integrate needed to increase, as did the development and roll-out of the STP's plans overall to help deliver such improvement.

c) Prioritisation of early intervention

An outcome of the pressure on budgets has been the need for statutory services to support interventions which results in either more appropriate – or no – admission to their services. This has led to the creation of strategies across the sector which aim to keep people happy healthy, and in their own homes, for longer. As an example, the West Yorkshire and Harrogate Sustainability Transformation Plan⁸ proposals include a 12-point shared vision for health and care services across their area of delivery:

- *‘Every place will be a healthy place, focusing on prevention, early intervention and inequalities*
- *We will work with local communities to build community assets and resilience for health*
- *People will be supported to self-care, with peer support and technology supporting people in their communities*
- *Care will be person centred, simpler and easier to navigate*
- *There will be joined up community services across mental & physical health and social care including close working with the voluntary and community sector*
- *Acute needs will be met through services that are “safesized” with an acute centre in every major urban area, connected to a smaller number of centres of excellence providing specialist care*
- *In some areas local services will evolve into accountable care systems that collaborate to keep people well*

⁸ WY&H Health & Care Partnership, WY&HSTP, 2018

- *We will move to a single commissioning arrangement between CCGs and local authorities and have a stronger West Yorkshire and Harrogate commissioning function*
- *We will share back office functions and estate where possible, to drive efficiencies to enable investment in services*
- *West Yorkshire & Harrogate will be great places to work*
- *We will always actively engage people in planning, design and delivery of care*
- *West Yorkshire and Harrogate will be an international destination for health innovation'*

The STP's vision includes a number of intentions which will be critical for the Befriending Network. It indicates that its vision, approach and impact include such elements as '*prevention and early intervention*', '*supported self-care*' and '*reduced demand on acute services, reduced costs and improvement in access standards*'. All of these, it can be argued will be assisted by a greater development of, and investment in, interventions such as befriending.

d) Voluntary Sector pressure

Across the country the reduced budgets of local authorities have led to a reduction of service provision by those organisations; this has, in turn, led to an increased demand for the voluntary sector to provide replacement services or to support people who are no longer eligible for such statutory provision. This increased pressure has also happened at a time when the income of organisations working in the voluntary sector is under great pressure. Public sector support for the sector has declined significantly and demand for funds from other sources such as grants from trusts and foundations is greater than ever.

e) Individual finances

The last few years have seen an increased number of people experiencing higher levels of poverty due to the general tightening of the economy. This has increased pressure on projects focussed on helping those in need including food banks, credit unions, community transport schemes and befriending projects.

5.3 The effects of loneliness and isolation

Whilst not everyone engaging in a befriending service can automatically be said to be suffering from loneliness and/or isolation, it is fair to say that such engagement can make a significant difference to those who have experienced these feelings. In addition, it can stop people from becoming lonely and/or isolated.

Older people are particularly vulnerable to social isolation and loneliness owing to loss of friends and family, mobility or income⁹, and it is well documented that individuals' health and wellbeing can be severely affected by loneliness and isolation: '*Loneliness is a threat to health, with evidence that it is a significant risk factor for a wide range of mental and physical health problems, including depression, high blood pressure, sleep problems, reduced immunity and cognition in the elderly.*'¹⁰ In addition,

⁹Windle, Francis and Coomber, *Preventing loneliness and social isolation*, 2011

¹⁰O'Luanaigh and Lawlor, *Loneliness and the health of older people*, 2008.

older people who are lonely or isolated have substantially increased chances of developing dementia and Alzheimer's disease, compared to better connected individuals.¹¹

For older people, loneliness is associated with high blood pressure, an increased number of GP visits, and higher incidences of falls. There is evidence that loneliness can lead to earlier admission to a care home. People with a high degree of loneliness are twice as likely to develop Alzheimer's as people with a low degree of loneliness.¹²

5.4 Supply and demand data

The data generated from the providers' survey provides an assessment of how much befriending is being delivered in the Bradford area at present. By ensuring that as many organisations as possible are represented, and by adding a component for unknown organisations it is expected that a reasonable picture has been created of the supply of delivering services. This may be, however, a different picture to what the demand for such services might be.

The real figure of what the demand for befriending in Bradford might be has been created from an assessment of the number of lonely and/or isolated people in the area. Indeed, a range of data exists to help generate the proportion of older people reporting themselves as lonely. Surveys have consistently shown that around 6% to 13% of older people are 'often or always lonely'¹³. This is corroborated by national Age UK surveys conducted between 2009 and 2015 where the figures ranged from 6% to 10% and through Wave 5 of the English Longitudinal Survey of Ageing (ELSA) where 8% said they often felt lonely.¹⁴ This range of data is also supported by the fact that 12% of people over 65 said they 'never spent time with their family'.¹⁵ An additional survey indicated that 17% of older people have less than weekly contact with family, friends and neighbours.¹⁶ Furthermore 12% of people over 65 say they feel cut off from society.¹⁷

It is considered a reasonable assumption, therefore, to suggest that at least 10% of the population of those over 65 in the Bradford area would be likely to feel lonely and/or isolated 'often or always'. The most recent figures released by the Office for National Statistics indicate that, of the population of the Bradford area of 534,800, 78,319 aged are aged 65 or older¹⁸. Assuming that 10% of the over 65 population are lonely and isolated, as estimated above, this means that around 7,800 would be likely to fit into the lonely and/or isolated categories.

There is not a clear boundary between those who are lonely and isolated and those who are not; a person does not suddenly move from not being lonely and isolated to feeling on their own. As such it is highly likely that some people seeking befriending support may not yet fit the traditional definitions of loneliness and isolation – they may be seeking to avoid becoming so. As such it would be reasonable to increase the number of potential clients for befriending services to include a percentage of these people. For the purposes of this report it has been assumed that up to 25% more people would fit into

¹¹Fratiglioni, Wang, Ericsson et al, *Influence of social network on occurrence of dementia*, 2000

¹²University College London, *The links between social connections and wellbeing in later life*, 2015

¹³Campaign to End Loneliness, *Safeguarding the Convoy*, 2011

¹⁴Age UK, *Evidence Review: Loneliness in Later Life*, 2015

¹⁵DEFRA, *Survey of public attitudes and behaviours towards the environment*, 2011

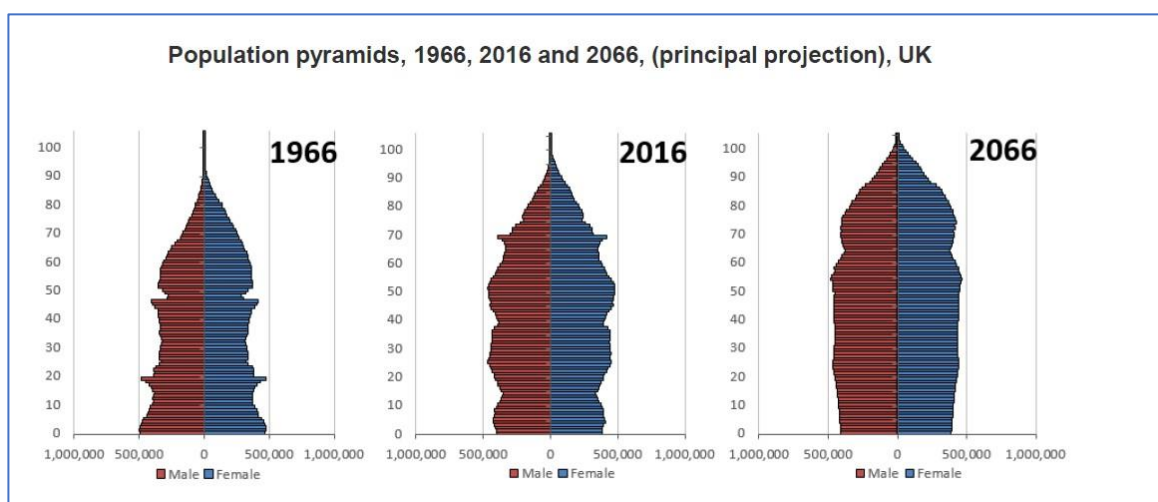
¹⁶C. Victor et al., *Loneliness, Social Isolation and Living Alone in Later Life*, 2003

¹⁷Age UK, *TNS survey for Age UK*, April 2014

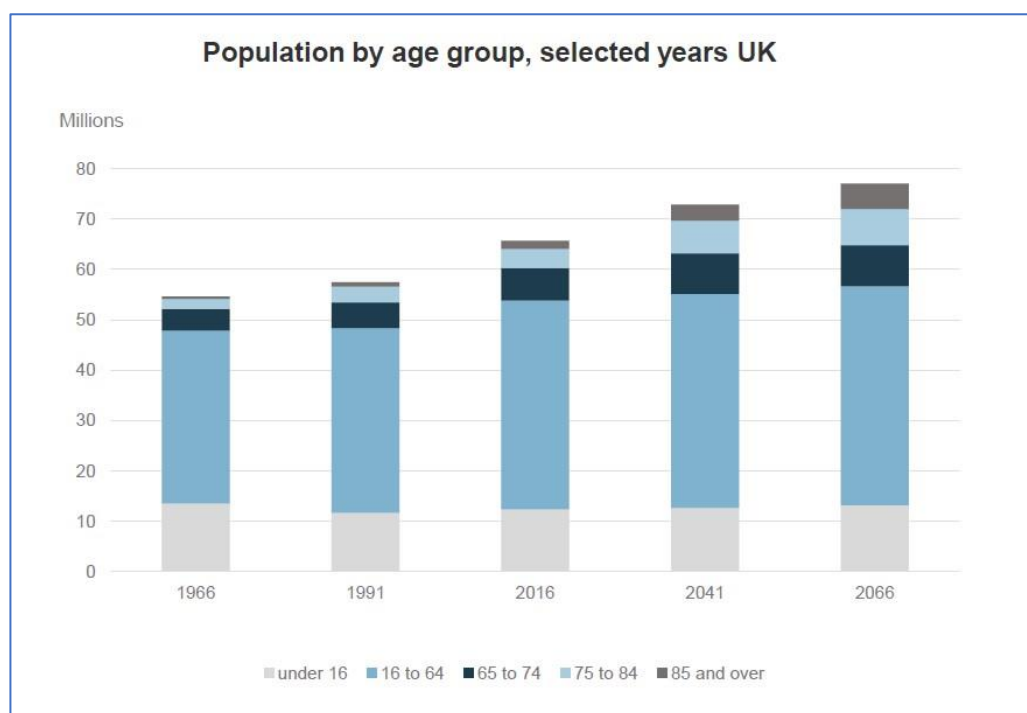
¹⁸ONS, *Estimates of UK population*, 2017

this other category. This gives a total potential base of individuals who would benefit from accessing befriending services of around 10,000 across the area at the current date.

The Office for National Statistics forecasts that the overall population of the Yorkshire and The Humber region will grow by 3.5% between mid-2016 and mid-2026. This would equate to around 1.75% over the next five-year period. Population change is the result of natural change – the difference between births and deaths and net migration (the difference between the number of people moving into and out of an area). It is also important to note that the population as a whole will also be living longer – meaning that the number of people who could, potentially, require befriending services in coming years as a percentage of the total population will also grow. It is notable that the ONS forecast that *‘the population aged 65+ will grow by around 50% in both urban areas and in rural areas between 2016 and 2039’*. This demographic change is happening relatively slowly but the implications for all organisations dealing with older people will be significant. The population pyramids produced by the ONS demonstrate this well:



It is also clear that the older population is growing faster than younger groups:



The ONS also forecasts that the number of people ‘aged 65 and over’ in the Yorkshire and The Humber region will rise by 17.4% between 2016 and 2026¹⁹. Assuming that half this increase would take place during the five years considered by this document, this would equate to an increase of 8.7% - meaning that potential numbers would increase from 10,000 in 2018 to just under 11,000 in 2022.

All of this data means that befriending organisations in Bradford can be certain that there are already many more people who could be assisted at present and that the number of these individuals will only grow as the population of the area grows older.

5.5 Location

Whilst it is true that anyone can become lonely and isolated a number of factors can mean that an area may have a higher relative risk of loneliness. The Age UK loneliness heat maps show the relative risk of loneliness across 32,844 neighbourhoods in England. The relative risk was based on the Census 2011 figures for the factors:

- marital status
- self-reported health status
- age
- household size

These four factors predict around 20% of the loneliness observed amongst older people 65 and over as represented in the English Longitudinal Study of Ageing (ELSA).

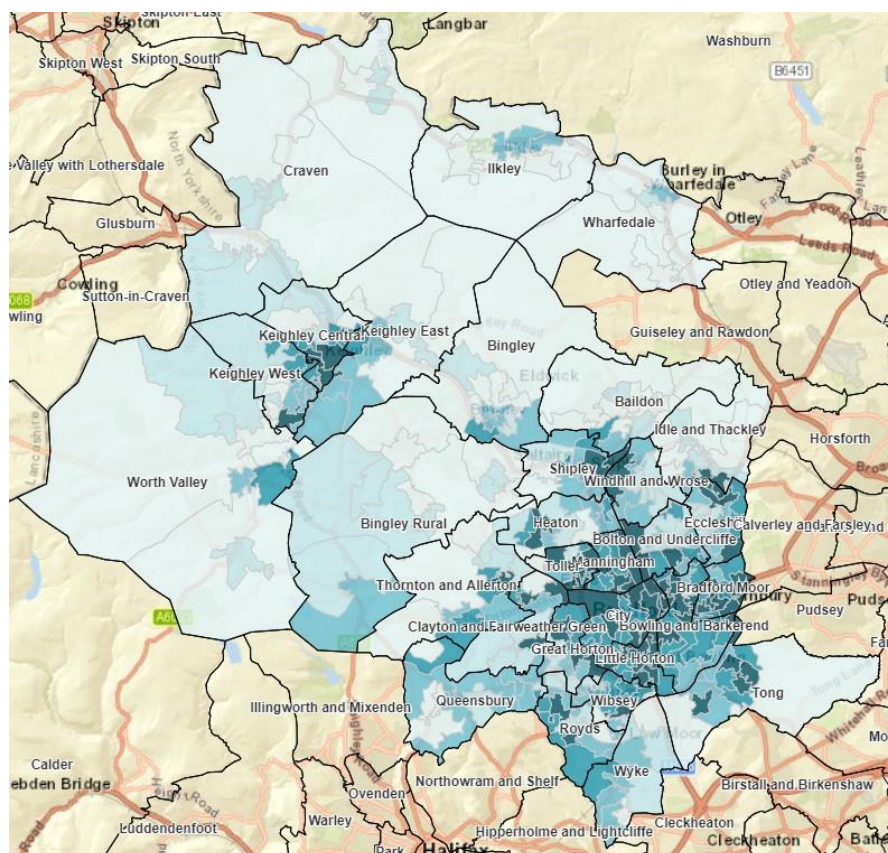


Diagram One: Relative loneliness map of Bradford area²⁰

¹⁹ONS, Population change by region, 2018

²⁰Age UK, *Loneliness Heat Maps*, 2018

The maps themselves are very detailed but clear pockets of loneliness are predicted in the centre of Keighley and in many areas in and around central Bradford.

5.6 Gap identification

An analysis of the data gathered from all sources allows an assessment to be made of the current, and future, gaps in befriending provision. It was envisaged that any such gaps would be expected to be volumetric gaps (i.e. where there was a lack of capacity) but could also be geographic gaps (lack of coverage) or delivery gaps (where particular audiences were not being catered for). It was also envisaged that such analysis would give a more finessed view of where future services would need to be developed and what those services would need to deliver.

a) Volumetric gaps

It has been calculated that there are 10,000 people who could be clients of befriending services at the current time and that this will increase to around 11,000 in 2022. It has also been seen that, in any year, befriending services are working with around 1,631 people. This means that only approximately 16% of the population of potentially lonely and/or isolated individuals are being reached at any time by befriending services. It may be, of course, that some of these individuals are receiving support in other ways or from non-befriending services but clearly there will be many more people needing support than are receiving it.

b) Geographic gaps

An analysis of the wards in which current befriending organisations are delivering services gives a picture of where coverage is greater/less:

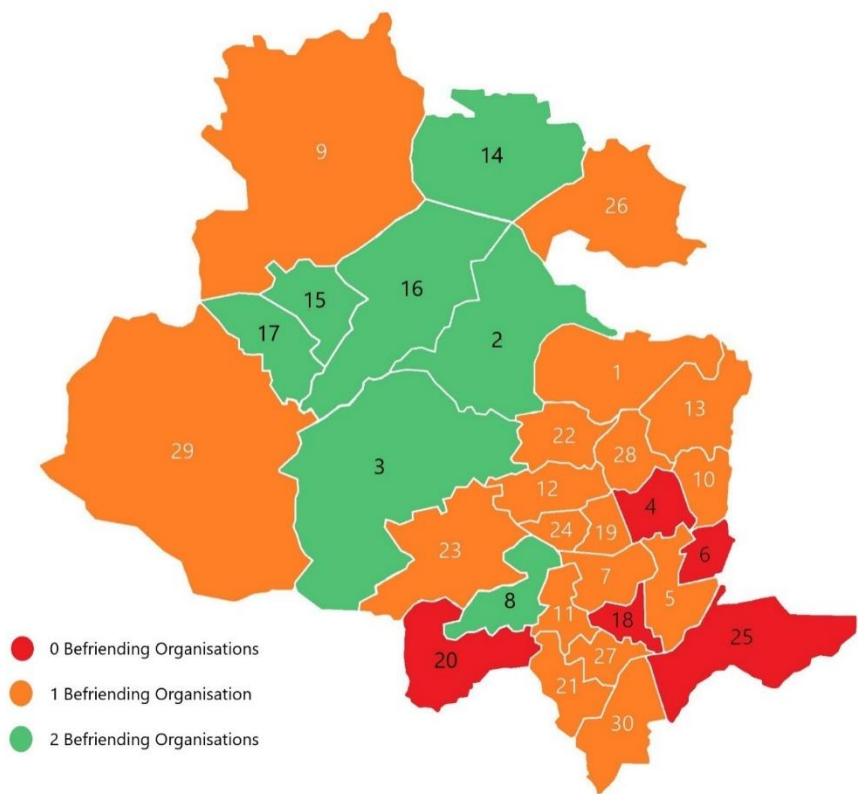


Diagram Two: Bradford coverage of local befriending organisations

It is important to note that this map excludes those organisations which indicated they covered the whole area (Marie Curie, Silver Line, Age UK Bradford District) and those which indicated very specific geographical coverage.

Whilst this provides a useful snapshot, in order for it to be useful, it needs to be combined with data which defines where the greater proportion of potential clients of befriending services might be. It does suggest that at a basic level there is little coverage in the wards of Queensbury (20), Bolton and Undercliffe (4), Bradford Moor (6), Little Horton (18) and Tong (25). The detailed loneliness heat maps²¹ indicate that there are pockets of predicted loneliness in these 'under-covered' wards. In particular, the wards of Little Horton and Bradford Moor appear to have considerable potential loneliness which is not being addressed.

c) Delivery gaps

The providers' survey indicated a number of areas where respondents felt that there was a lack of delivery or where there was an obvious demand. The key areas indicated by respondents were as follows:

- *'Home visits*
- *Support getting out the house*
- *Support with shopping/appointments*
- *Face to face support*
- *More services in general, befriending or similar services are extremely popular but finding volunteers to deliver the service is extremely difficult, the demand cannot currently be met*
- *Intensive mental health*
- *Some people miss family, who are in distant locations, estranged or difficult to communicate with due to medical conditions and would like help contacting each other somehow. We have not explored this. Some people request services such as shopping support, which have a predominantly practical purpose, as well as a social element - we would not take this on as it is provided by home care companies as a chargeable personal service*
- *Befriending for people with significant mental health problems and memory issues. Also, for people with special needs*
- *Befriending for people with mental health problems and other issues less than 60 years old. However, can't really say this is a 'demand'. We occasionally get referrals and there do not seem to be many groups to support these people (or are suitable for) from age 18-60*
- *People Living with Dementia Older People Living with Mental Health*
- *Befriending needed for adults under the age of 65*
- *People who are at the end of life'*

From the responses to this survey and from other anecdotal evidence, it is clear that the provision of befriending services to people with poor mental health seems to be an area of high demand. There is a clear opportunity to address this need through: detailed conversations with health practitioners about both the need and the funding required; development of relevant services and; production of an appropriate referral methodology.

²¹Age UK, *Loneliness Heat Maps*, 2018

5.7 Eligibility criteria

The original intention had been that the research study might produce guidance on the eligibility criteria by which potential befriendees would be assessed. The reality is that discussions have not yet progressed to the point where there is a definite new service (or services) around which there could be a meaningful discussion. Instead the following note forms a framework by which such discussions may be progressed in future.

The length of time which befriendees are allowed, or choose, to continue to access services from their selected organisation vary considerably. The author has heard of at least one befriender who had received over 75 sessions of befriending. Whilst this is, no doubt, a great help to the individual (and, possibly, to the befriender), it also ensures that another individual stays on the waiting list for longer than would otherwise be the case. When befriending services are not being contracted or commissioned but are being funded out of organisational funds, then there can be less imperative to time-limit sessions. The reality is, however, that unless the number of sessions is limited other potential befriendees will remain on the waiting list longer than necessary, and existing befriendees will not be assisted to move on to other activities.

For such organisations, which are funding their befriending sessions themselves, it is suggested that a new strategic approach is developed to ensure that more people can access services. Such an approach would define a pathway by which people would receive one to one befriending and might then move on to less intensive interventions (such as less frequent one to one sessions, telephone calls, group activities or self-support groups). Although the exact number of sessions would vary by organisation, and by individual, it might be expected that people might receive up to 12 one to one sessions before starting to move onto the less intensive support areas. It may be that in specific circumstances, such as where people are unable to move on to less intensive support options, longer periods of one to one befriending might be required.

Should there be an opportunity to develop commissioned or contracted services, then there should be a requirement both to ensure that those receiving the service meet the commissioned service criteria and for the time agreed. Until such a service is (potentially) commissioned it would not be possible to place a definition either on those who could access the service or for how long they could do so.

CASE STUDY THREE –MRS A

'Mrs A is an 87 year old widow living in [area withheld] and she has been using our service for several years since she was referred to CarelinkK by a member of Keighley Volunteer Centre's handyperson team who had gone to her home to fix a leaky tap washer. They were very concerned about her as she was weepy and inconsolable, telling them that she was very lonely and depressed. Mrs W is originally from [area withheld] and was widowed 15 years ago. She has one son who lives abroad and no other relatives in this country and she has suffered from depression since her husband died. She had a stroke about 12 years ago which has affected her mobility and has resulted in a number of falls. She has heart problems and more recently she was diagnosed with blood cancer and needs to frequent blood transfusions. Her memory is also declining, resulting in forgetfulness and difficulty in taking in new information. During this last year she has begun to have home care 3 times a day to prompt medication and meals. When we became involved with Mrs A she had little knowledge of the services and activities for older people, so we aimed to increase her well-being and independence by introducing her to the Access Bus to enable her to travel to the supermarket in Keighley to do her shopping. In order to develop her social networks, she began attending CarelinkK's friendship group and, although Mrs A is not really a 'mixer', with our encouragement, she developed a new friendship with another lady attending the group. As both had reduced mobility a volunteer from CarelinkK would take them to visit at each other's houses until the friendship ended when unfortunately, Mrs A's friend died 2 years ago. Mrs A is very reluctant to join group activities, but we have been successful in persuading her to become involved with Contact the Elderly and she goes to their Sunday afternoon tea parties once a month.

*Mrs A is financially vulnerable and over the years has been targeted by rogue traders and postal scammers and has been persuaded to part with large sums of money. Fortunately, she has grown wiser to this since we arranged for her and some other service users to attend a presentation on scams and frauds by the Safer Project and she signed up to the postal preference service. However, she continues to be vulnerable when approached face-to-face by door step traders. A couple of months ago she was persuaded to purchase a mobility scooter, from an unsolicited trader calling at her home. She was made to pay on the spot and the trader took her existing mobility scooter away in 'part exchange', leaving her with the newly purchased mobility scooter but without any paperwork, receipt for payment or an operating manual and no idea which company she had bought it from. Afterwards, Mrs A realised that she had made a mistake, particularly as she did not feel safe using the new mobility scooter and became housebound because she no longer had the means to get out and about around the village. Through befriending we have been able to keep a watchful eye on Mrs A and recognised that she had been targeted once again, so taking advice from Trading Standards we were able to advocate on her behalf. Through her bank, we found the traders contact details and managed to get her money back and her old, familiar scooter returned, so thankfully Mrs A is mobile once again. She told us, **"Thank you for still bothering to come to see me after all this time. I don't know who I can trust anymore, so I'm glad that you are there when I need you."***

Case Study supplied by Keighley & District Volunteer Centre

6. Good Practice

6.1 Background

The study researched national and local examples of good practice in befriending services, with a view to highlighting different approaches to befriending which could be more cost-and time-effective than those being adopted at present. It also sought examples of where befriending had been delivered well under a Personal Budgets regime. This work was undertaken by seeking such examples from Network members and through desktop research.

6.2 Addressing loneliness

Organisations delivering befriending services use a wide range of approaches to assist their clients. These approaches can vary considerably but the Age UK Loneliness Evidence Review, produced in 2015, provided a useful summary of the most common ‘social interaction’ interventions for older people:²²

‘Group activities

Group interventions target many people at once, so they may be more cost-effective than one-on-one interventions. In addition, with a focus on the activity rather than ‘loneliness’, they can avoid a negative stigma and thus attract more participants.

Specialised groups targeting older people

This is a very broad category, including services such as day centres, lunch clubs, social clubs, creative activities (arts and crafts, etc.), self-help and support groups, and health/exercise groups (including walking clubs).

Evaluations provide mixed results: some show improvement on loneliness measures, some do not. But even groups that do not have ‘addressing loneliness’ as a core function can nevertheless do that; for example, people who took part in health-maintaining and independence-maintaining behaviours were less likely to feel isolated and more likely to feel that their community was a good one to grow old in. A systematic review of groups from art to exercise to writing found that 95 per cent of the participants (mean age of 80) reported that their feelings of loneliness were reduced.

Community engagement

This encourages people to use existing community programmes, such as libraries, civic participation, and volunteering. Again, studies show that these can improve loneliness and change lifestyles.

The Joseph Rowntree Foundation and the Joseph Rowntree Housing Trust has set up a programme looking at how community activities could contribute to the well-being of people at risk of or experiencing loneliness and how they could play a central role in activities, thereby enhancing community well-being. They found that having a key individual to motivate, train, and encourage individuals within a community to interact and get others engaged can be very important. Having ‘insider’ knowledge of the community and especially of the culture and any cultural or religious barriers to engagement and speaking the language of people living there also helps encourage engagement.

An area for further research is whether spirituality can prevent loneliness from turning into depression.

²²Age UK, Evidence review: Loneliness in later life, 2015

One-on-one interventions

For frail or housebound older people, group participation is not an option. In addition, some people prefer individual rather than group interactions. Various studies have shown that one-to-one interventions can be very effective in reducing loneliness and the associated negative health and well-being effects.

Befriending

Befriending has been defined as ‘an intervention that introduces the client to one or more individuals, whose main aim is to provide the client with additional social support through the development of an affirming, emotion-focused relationship over time.’ The intervention differs between programmes, but usually involves volunteers or paid workers visiting an individual in their own home (or place of care) or telephoning on a regular basis. There is good evidence that befriending can have positive outcomes, including reducing depression.

An evaluation of the Age UK telephone befriending service ‘Call in Time’, in which a volunteer makes weekly phone calls to an assigned older person, found that recipients reported many benefits from the service:

The older people said they valued the ability to talk, listen and share information with another human being who they felt they could trust and rely upon. This contact provided them with a sense of belonging, made them feel more confident and less alone and anxious.

However, many felt that the service should not be called ‘befriending.’ People wanted a normal conversation and did not want to be ‘problematised.’

Other key benefits older people said about the service:

- *They feel they are not forgotten*
- *They know they have a friend who cares who is not family*
- *They know they have a friend who is trustworthy and reliable*
- *They have greater peace of mind*
- *They can engage in ordinary conversation*
- *They no longer feel a burden to society*
- *Their emotional and physical health is improved*
- *Their general well-being and quality of life is improved*

Benefits were also reported by the volunteers who made the calls. They had a high level of satisfaction and said that the volunteering increased their self-confidence and interpersonal skills and they had a raised awareness of needs and opportunities within the community.

Gatekeeping (Community Navigator or Wayfinder initiatives)

These ‘are usually volunteers who provide ‘hard-to-reach’ or vulnerable people with emotional, practical and social support, acting as an interface between the community and public services and helping individuals to find appropriate interventions.’ Provision depends on locality and need, and could be, for example, face-to-face visits or telephone calls to discuss what the older person needs, and what is available in the community.

Some studies have shown that the Wayfinder and Community Navigator services are effective at finding socially isolated and lonely people, who became less lonely and socially isolated following contact.

Another example is the Village Agent programme enacted by South Lakeland Age UK. Trained Village Agents know their community and the resources and services available. They visit older people in their homes and provide social interaction, plus help identify and arrange for things the client needs, such as a GP visit, transportation, and so forth. Village Agents can also spot

potential hazards in the home and suggest and arrange handyperson visits to fix or adapt the home as needed.

Internet

Interventions focusing on internet use have had mixed results. For example, one evaluation in Finland and Slovenia that taught older people to use the internet to keep in touch with others, such as through email, was shown to have the potential to reduce loneliness.

Despite the lack of clear cut evidence, the weight of evidence shows that internet use helps older people to combat social isolation and there is some good evidence of its positive effects on loneliness.

Those older people who do possess IT skills could be part of the solution; one study which piloted projects in Denmark, Finland, Italy and Spain has looked at new services and infrastructure that public authorities will be able to develop in collaboration with external businesses using older people themselves as active content providers, viewing them as a resource who can provide their own everyday life support services.

In future, when a greater proportion of this age group is connected online, opportunities will arise for identifying those at risk of loneliness, along the lines of an app 'Emotion Diary' which has already been developed for identifying those using Facebook who are depressed.

Interventions for special groups

Men

Loneliness is reported by around 5-7% of older men. Research has shown that social isolation, loneliness, and stressful social ties are common in men and associated with poor physical and mental health, higher risk of disability, poor recovery from illness and early death.

But finding social activities that are acceptable by older men is a challenge. Older men are less likely to join groups and find making friends more difficult than older women. They are also more likely to prefer to interact with people more similar to themselves, such as other men.

In addition, there can be a strong perception among older men that social organisations specifically for older people are places where one is 'done to', rather than places that facilitate active pursuits.

Participation in work-like activities can give men a sense of achievement and belonging. Studies demonstrate that successful interventions which facilitate learning new skills, using/improving acquired skills, sharing knowledge with peers, promote a sense of accomplishment, and provide opportunities social engagement in a fun and engaging manner.

One example is a programme called 'Men in Sheds,' which began in Australia and now has groups in the US, Canada, Ireland, and the UK:

The core elements of Men's Sheds are that they are voluntary and social organisations providing hands-on activities for men aged 50 years of age and older who are co-participants in a defined space. Sheds provide a space for older men to meet, socialise, learn new skills and take part in activities with other men. Most Sheds are equipped with a range of workshop tools. Shed programmes aim to improve men's physical, emotional, social and spiritual health and well-being. The role of a Shed in encouraging and engaging men in informal adult learning activity is thought to be particularly important. Some Sheds also provide health related information and 'signpost' men to relevant services. In almost all cases, they are tailored to their local context, rather than being standardised.

An evaluation of the UK pilots found:

- *A number of older men noted that prior to coming to the Shed they were predominately sedentary.*
- *Participation helped raised health awareness through formal presentations by external people and informal chats amongst the older men.*
- *Participants indicated that it provided vital support, provision of connections to other men, mental and cognitive stimulation.*
- *Participants indicated that it returned a sense of purpose, achievement and self-worth.*

In looking at projects which could be used for inspiration for future development it was necessary to consider projects which use new approaches to befriending, or which deliver that befriending in different ways:

a) The Befriending Scheme

The Befriending Scheme was originally established in 1989 as the West Suffolk Befriending Scheme. The project provides friendship and learning opportunities for vulnerable people aged 16+ including *'those with learning disabilities, mental health needs, older people, and other isolated groups'*. The project offers a wide range of activities through its regular drop-in centres – known as Hubs. They also run weekend and evening social clubs (*'Out and About Clubs'*) as well as member and volunteer training across the county. All activities aim to create *'meaningful one-to-one friendships between vulnerable people and volunteer befrienders'*. Since its creation the project has grown significantly; in the last financial year the organisation had 21 staff, 200 volunteers, 6 Hubs and provided services to over 700 people. Although befriending is free to those who are eligible, eligibility is as follows:

Individuals must meet at least one of the following criteria:

- Have a learning disability
- Have a mild mental health issue
- Be an older person (65+)

Individuals being referred to the service **MUST** also:

- Live in Suffolk
- Be over 16 years old
- Not be accessing another face-to-face befriending service
- Have limited social contact or regularly experience feelings of loneliness and/or isolation

Hub members can attend as many or as few activities in their area as they wish. The model revolves around the basic idea that the more activities they join each week, the cheaper each session becomes. Some example packages are described as follows:

Silver: One weekly Hub group - £1,500 p.a. (Less than £29 per week)

Silver Plus: One weekly Hub group plus one weekly Out and About activity- either £1,850 and £2,230 p.a. (£36 or £43 per week) depending on location

Gold: Two Hub Groups per week - £2,600 p.a. (£50 per week)

Platinum: Two Hub groups per week plus one weekly Out and About activity - £3,120 p.a. (£60 per week)

The authors reached out to the Chief Executive to have a discussion around how members fund their attendance since the organisation's accounts list their principal funding sources as grants and personal budget income from Suffolk County Council and various other funding bodies. The Befriending Scheme confirmed that the majority of their funding comes from the Council in the form of either spot purchase from social work teams or via personal budgets. Whilst they do have some self-funding clients, these are in a minority.

b) GoodGym

GoodGym was formed in 2009 and *'arose out of a frustration with normal gyms being a waste of energy and human potential'*. The project works around a very simple idea: *'We run to help out older people with one-off practical tasks that they are no longer able to do on their own. Missions give us a reason to run different routes and make a big impact on someone's life too.'* It goes on to say that: *'In gyms all over the country people all over Britain work away furiously; peddling, pushing, lifting, running and achieving no external benefits. GoodGym aims to harness this energy by making it easier for people to channel this energy towards social good.'*

The GoodGym project quotes the fact that the UK volunteering organisation TimeBank has shown the difficulty of recruiting volunteers and has shown the importance of developing volunteer-centric roles for volunteering. The organisation indicates that it *'is a 'fine grain' approach to volunteering, where participation is based on frequent low impact activities that are integrated usefully into our lives.'* Because it does focus on this low-level approach it has found that *'[b]ecause it fits into our lives it's easier for us to commit for the longer term, it makes it easy for us to keep going.'* This may be a valuable lesson for organisations struggling to recruit volunteers or maintain activities.

The GoodGym website indicates that the organisation is now operating in 47 areas with 5 *'coming soon'* and over 100 *'in proposal'* – including Bradford. As at the date of writing the organisation indicates it has completed *'5,744 missions'* (each being a visit to an older person to help with jobs including gardening, moving furniture and other domestic tasks). Clearly it may work better in areas where there are higher populations of older people/runners and the distances between both groups are smaller. Whilst this approach clearly is not necessarily transferable it does show an innovative approach to both the development of a service, the meeting of a need and the retention of volunteers.

c) Casserole Club

The Casserole Club started in 2011 as a new type of project designed to connect *'people who like to cook and are happy to share an extra portion of a delicious home-cooked meal, with older neighbours living close by who could really benefit from a meal and a friendly chat.'* The organisation now works in Brighton, Calderdale and Staffordshire and is looking for new areas in which they can operate. Their website claims that *'[m]ore than 7,000 people have signed up to take part in the service to share thousands of tasty, home-cooked meals with their neighbours who need it most.'* It is interesting to note that their survey shows that:

- 70% of those receiving meals count their volunteer cooks as friends
- 80% of those receiving meals wouldn't have as much social contact without Casserole Club
- 90% of our volunteer cooks would recommend Casserole Club to a friend

It is understood that the Casserole Club is considering starting operations in Leeds, but no plans are currently in place to commence activity in Bradford. It would be possible for a current befriending organisation to stimulate such a project to start – or even to start a project of its own.

d) Shared Lives Plus

The approach taken by Shared Lives Plus²³, a project that matches community carers with vulnerable people in need of assistance, is worthy of review. The project ensures that *'[s]hared Lives carers open up their homes and family lives to include a young person or adult who needs extra support to live well.'* The project believes that their home-sharing model can be up to £26,000 cheaper per year than traditional care delivered by the social care system. Shared Lives Plus currently supports 5,000 Shared Lives carers and 150 local Shared Lives schemes. The organisation's website lists a Bradford scheme which is managed by the local authority²⁴.

The project is, like others reviewed as part of this report, a different approach to the delivery of services. At a time when budgets are still under pressure, but demand is growing, these sorts of approaches are likely to command great interest from (potential) clients as well as funders.

e) SuperCarers

Similar in its approach to Shared Lives Plus, SuperCarers is a newer service which seeks to introduce individuals and organisations with *'trusted, experienced and fully vetted carers in their area'*. The project operates from a website which seeks to match the needs of individuals with carers who meet their needs – whether that is day, night, live-in or respite care. In addition, they indicate that they *'give you the tools and technology you need to coordinate care directly and easily with your carer, from schedules to payments'*.

What is interesting with this project is the technology-based approach to the issue. The platform does allow people to seek care for themselves but seems aimed at relatives or friends seeking care for a loved one. This avoids the issue of (relatively) few elderly people having access to mobile phones (18% - 65+ years²⁵) and the fact that a large number of 65+ people (4.2m²⁶) have never used the internet.

The service indicates that it already has approved and vetted carers available in the Bradford area.

f) Telephone befriending

It is quite usual for some organisations providing befriending services to undertake some, or all, of their services via telephone. Discussions with such organisations have indicated that not all isolated and/or elderly people wish to have people visit them (although the majority do). In addition, not all befrienders have the time or ability to visit people in their own homes but can afford the time to support people via phone calls. It could also potentially make befriending in rural areas more efficient, as it could reduce the need for volunteer travel time.

A good example is the Chatterbox Action Against Loneliness Programme run by Omega – the National Association for End of Life Care²⁷. The organisation provides a free telephone support programme through which an Omega volunteer will keep in touch with the individual being befriended.

g) Web directed befriending

In terms of different approaches to befriending, perhaps b:friend is one worth mentioning. This organisation was established as a CIO in Doncaster in 2017 and *'matches volunteer befrienders with isolated, elderly neighbours in the community. The aim is to reduce social isolation by re-engaging at*

²³Shared Lives Plus, www.sharedlivesplus.org.uk, 2019

²⁴ BMDC, www.bradford.gov.uk/adult-social-care/carers/shared-lives, 2019

²⁵ Statista, www.statista.com, 2015

²⁶ Age UK, *The Internet and Older People in the UK*, 2016

²⁷ Omega, www.omega.uk.net, 2019

*risk individuals with their community through one-to-one befriending partnerships and community group social events.*²⁸ The process of matching a befriender to a befriender can all be undertaken online via an attractive web site. At present the organisation's objects indicate that activity must take place in Doncaster and surrounding areas although the organisation may be looking for ways to expand its reach. In addition, it indicates that it is *'working on a theory of change to determine the next layer of support beyond 1:1 and peer befriending so, as we evolve, additional levels of support will be trialled and introduced.'* There may well be potential in looking at ways of working with the organisation to emulate their approach in the Bradford area.

h) End of Life befriending

There are a number of schemes offering specific befriending services for people approaching the end of life. As an example, St Luke's Cheshire Hospice offers a scheme to those who are living in isolation with a life-shortening condition where a volunteer befriender will visit to provide *'companionship through regular visits, emotional and often practical support, and help to re-establish a link to the wider community.'* The 'match' between befriender and befriender is undertaken carefully to take account of the befriender's needs, likes and any other practical matters²⁹.

In Scotland 'Befriend at the End' befrienders offer *'tangible support and advocacy to those who wish it. Support might come in the form of information on available services, advice on end of life choices or simply offering a listening ear.'* This organisation evolved from 'Friends at the End' which campaigns to change the law on assisted dying in Scotland and although separate still supports its campaigning objectives. It appears to be based in the same building as 'Friends' but does not have appear to have charitable status.

i) Linking Lives

Specific mention was made of 'Linking Lives' as an example of good befriending practice. The organisation was established following the work undertaken by the Wokingham-based Link Visiting Scheme (www.linkvisiting.org). Link Visiting works in partnership with statutory and voluntary agencies and local churches around the Wokingham area and has over 180 volunteers engaging in weekly home visits with over 160 older people. The organisation also runs a series of social activities and events. In 2012 consideration was given to a way of 'extending the reach of the local befriending scheme to other areas of the UK' In 2016, the decision was made to create a new charity to develop the national initiative into the future; at the present date 25 projects are listed as 'operating', 6 as 'working towards launch' and 2 as 'affiliated'. Most projects are run in partnership with local churches or Christian agencies and many of the projects appear to be quite small – listing only contact details for an individual rather than a website.

j) Mentoring and Befriending Foundation

Perhaps the project for which the Foundation is best known is the 'Approved Provider Standard' for befrienders. This was originally created by the Foundation to help organisations increase the effectiveness and quality of their mentoring and befriending programmes. In April 2015 the Foundation transferred the delivery of its core services, APS, resources and the national training programme to NCVO. NCVO is no longer accepting applications for organisations to achieve this quality standard although they *'encourage those organisations which have already achieved it to continue using the badge for as long as their award is valid'*. The Foundation itself is a shadow of its former self, with its website containing multiple broken links and unfound pages.

²⁸ B:friend, www.letsbfriend.org.uk

²⁹ St Luke's Hospice, www.slhospice.co.uk, 2019

k) Tower Hamlets Friends and Neighbours

This organisation (known as 'THFN') is a very long-established organisation and its website indicates that it has *'been providing services to Older People in the borough since 1947. We provide befriending and advocacy services to people in the borough aged 55 and over and experiencing loneliness and social isolation.'*

THFN offers a wide range of services in a very professional manner. At present it offers:

- Home visits and phone support
- Advocacy and enabling of self-advocacy
- Support accessing health and social care services
- Consultation and involvement
- Escorted one-to-one and group outings and events
- Activities in the home
- Information provision and signposting

As early as 2011 it recognised the challenge that personalisation of budgets could cause but still offers its services free of charge to residents of Tower Hamlets over 55. The organisation deals with around 250 – 300 clients each year the majority of which are over 75 and 65% of clients describe themselves as being housebound. 70% of clients live alone with another 15% living in sheltered accommodation. 96% of clients are referred to the organisation with depression. As with most schemes, they describe the base of their support as being directed to addressing lonely and socially isolated individuals. At present the organisation receives all of its funding through grants and donations (including a grant of around 15% of its turnover from the local authority from which it receives the bulk of its referrals). Whilst this would appear to be a grant under 'Income from charitable activities' the accounts indicate *'the charity was in receipt of certain performance related grants ancillary to the delivery of its charitable activities. Income from charitable activities comprises a grant from the London Borough of Tower Hamlets (£35,000).'*

6.3 Comment

In the course of the research undertaken as part of this study it was hoped that projects would be identified where Personal Budgets were already being used to help pay for the costs of befriending services. These were difficult to find, and, in fact, the only project identified was The Befriending Scheme in Suffolk. Attendance at this project is funded through a combination of spot purchase and Personal Budgets although it is clear that the organisation's central costs still need to be supported by substantial grant funding. No project was identified which used Personal Budgets to meet the costs of one to one befriending services although there appears no reason why such services could not be approved as a reasonable use of such funds. Through the wider research undertaken as part of this study it is clear that many organisations need to rely on such a 'mixed economy' approach to delivering befriending services. Once it is clear whether Personal Budgets can be used to meet such costs a tariff for such services will need to be agreed and it is considered unlikely that this will meet the entire costs of running befriending services – indeed, it has been reported anecdotally, that this is the reason a number of projects have remained fairly small and have not, yet, been able to employ staff to assist with expansion. There are ways of reducing the costs of delivering befriending services including group based befriending, telephone befriending and social outings but it is also clear that people feel they get the greatest benefit from one to one based befriending interventions. By their very nature these tend to be more expensive than such group interventions but, with the average cost of befriending being in the region of £12 per hour it is suggested that this still represents very good value for money.

CASE STUDY FOUR - J

'J is a lady in her 90's who was referred into the Befriending Scheme because she was struggling with mobility and felt trapped in her flat in Baidon. There are a lot of steps at the flat's entrance which Jane felt unable to manage.

She had had a large family but only her son with disabilities currently lives close by and whilst he helps with shopping, J feels he still needs a lot of her support. J has had a lot of hardship in her time, losing her husband and other family members to cancer and, in recent years, suffering cancer herself. When we met J she was desperately lonely, suffering low mood and really missed someone to chat to.

K is a young lady who has been befriending for many years on the befriending scheme and needed re-matching, but in the meantime had had a baby. She lived fairly near J and thought she sounded a good match. When I spoke to J about having someone with a baby she was thrilled and couldn't wait to meet them both.

*Since then K has been visiting once a week with her baby and J has spoken to us saying how grateful she is to HALE for bringing K and the baby into her life. She calls K **"a little gem"** and loves to see how the baby is changing and growing. J says she still has her down days, but she looks forward to K's visits and is so happy when they have been. J has also been linked to a telephone befriender who calls once a week and she enjoys a long chat which also helps to alleviate her situation.*

"I am so grateful to you for bringing my befriender and the baby. He is a little gem. I really look forward to seeing them and I always feel better after they've been"

Case Study supplied by HALE Project

7. Innovative Befriending Projects

As part of the development of the work of the Befriending Network funded by West Yorkshire and Harrogate Health and Care Partnership BVCSA asked for expressions of interest from members of the Network to undertake and evaluate different and innovative ways of delivering befriending with a view to sharing the learning with other organisations. A total of six project applications were received and funded. In the following section the original approaches, as outlined in the applications for funding, are described along with the conclusions reached by the projects and the next steps. Copies of the full project summaries are attached at Appendix Six.

7.1 Community Action Bradford & District - Shipley Area Links Befriending - Bingley Section

a) Original proposal:

'Developing activities alongside befriending, to promote greater self-engagement. Compiling information about community activities around the Bingley area suitable for older people, using contacts from Diva Bradford database, minibus and community centre lettings. Preparing printed monthly newsletter and one-off directory, featuring different locations and interests. Surveying preferences and promoting to existing and new befriending participants. Providing support by way of volunteer or staff accompaniment or transport to attend taster sessions. Each month taking people out to at least three activities, including Seasonal Christmas events. To identify older people who cannot get out of their homes but would like to take part in activities and bring activities to them. A volunteer and/or staff member and another befriender would go to the housebound person with an activity e.g. board games/crafts or food. This could be used in the communal lounge of sheltered housing and befrienders could be supported to join in. Evaluating response and achievements.'

b) Evaluation of Innovative Approach Outcomes:

'Identify isolated people who want to meet new people and/or join groups

The activities questionnaire went to 83 befriending list contacts and we got 24 detailed responses. 9 sent back forms. We interviewed another 15 more isolated people needing help to complete forms. We then gave invitations to the specific organised events. Some people who expressed interest were not actually able to attend as arranged. Cancellation rate is high, due to health conditions of these most isolated people. They appreciate the attention, even if they do not join a group as a result.

Improve engagement in community by newsletters promoting different groups

We have done four newsletters so far, listing 39 events at 11 community centres in Bingley, Cottingley, Crossflatts, Cullingworth and Eldwick. We posted them to our mailing list of 83. We also handed out at our events, local library and GPs. We enabled 27 people to attend some of these events for the first time, especially Christmas events. We didn't get sufficient feedback from groups to judge the full wider impact. However, publicity is often not sufficient in itself to get attendance. The Christmas day events received high bookings and low attendance generally. We achieved attendance at these by visiting our people beforehand with specific written instructions, contact numbers,

written instructions also given to identified trusted taxi drivers and organisers. The newsletter is also appreciated by some people who can't go out but like to know what is happening locally and do quizzes and read poems.

Reduce loneliness by connecting old people, volunteers, carers and neighbours

We emailed 47 volunteers to appeal to them to network and support each other. Some suggested groups to promote in the newsletter. Several encouraged their befriending hosts, with 11 volunteers accompanying groups. Feedback confirmed enjoyment of activities and reduced isolation and loneliness as a result. 37 different older people have attended 13 different events so far. 17 attended more than once, which we encouraged, in the hope that some will go after the scheme has ended, for sustainability.

Prioritise outreach to people with chronic health problems, especially housebound

We tailored letters and met with known contacts to offer extra support to priority people. The letters offered support to attend the community group activities listed in the newsletters, but with extra support as needed – e.g. accompanied lifts to the Community Cinema in Bingley. They were also invited on specific trips we organised - to Tropical World in Leeds, to a Wurlitzer Organ Concert and to Cliffe Castle Museum reminiscence events. We risk assessed each trip and used a minibus with tail-lift and experienced staff and volunteers. We also ran a series of events at a sheltered housing complex, private to the residents, so not advertised. Some people known to us require specific support from staff and a few trusted volunteers. It was more labour intensive on staff time than we had planned.'

c) Comment:

It is clear that this project undertook a wide range of activity designed to extend both its delivery and its reach. Publicity of the project was widespread, resulting in new people being attracted into the project – often people who were more isolated and/or who had chronic health problems. The project has recommended that ways should be looked at to continue producing, and distributing, the project newsletter as well as with the development of wider partnerships in the community.

7.2 Carelink - Keighley & District Volunteer Centre

a) Original proposal:

'Our Innovative approach LINK-UP, will involve linking consenting, existing befriending service users together on a 1-1 basis or in small groups. The Link-up service will also be accessible to isolated older people who are not currently involved with our befriending scheme.

In order to meet the diverse health and mobility needs of individuals, service users will be able to choose how they would like to be linked with other service users, either as a phone-buddy, as a pen-pal or as a companion for outings, etc.

A project worker will be responsible for matching people based on individual interests, personality and aspirations. The project worker will maintain contact with participants

and will monitor LINK-UP relationships. Volunteers will assist in establishing links between participants.'

b) Evaluation of Innovative Approach Outcomes:

'This small-scale project has produced some positive outcomes for a number of individuals as well as for CarelinkK.

Adopting a peer-to-peer approach to befriending has been particularly beneficial for a group of four ladies who were linked together for companionship and social support. Each of the ladies were assessed as having the potential to develop and maintain social relationships with their peers with minimal support from a project worker. All four ladies are reasonably mobile, three of them are widows and two ladies in particular have limited support networks due to the loss of family and friends. They have since gone on to become firm friends, meeting up each week for lunch and have developed their own sustainable, mutual support network. Two of the ladies also continue to attend our social day group, whilst the other two have moved on and no longer feel the need to attend our day group as a result of peer-to-peer befriending.

Peer-to-peer befriending was also effective in reducing loneliness for Freda and Mary who live in a sheltered housing scheme. Freda, who feared rejection because of her dementia, kept herself to herself and lacked confidence to join in with activities at the housing scheme. With her permission, Freda's 'formal' CarelinkK befriender matched her up with resident Mary who was experiencing loneliness and low mood. Although Mary and Freda knew of each other, they had had little direct contact until they were matched up. Mary became very supportive towards Freda and was instrumental in increasing Freda's confidence and encouraging her to attend activities along with herself and other residents.

People registering an interest in taking part in the project appreciated being offered a choice over the mode of social contact to suit their individual needs (e.g. one-to-one, small groups, phone calls, emails, etc.) Whilst there was a clear majority of people wishing for one-to-one contact or meeting up in small groups, several people with computer skills also welcomed contact via emails. Interestingly, the majority of those with a preference for meeting in small groups, were not interested in being signposted to other existing, established social groups or activities.

We found that the peer-to-peer approach was inappropriate for some people. In order to ensure the safety and well-being of individuals, 'formal' befriending provided by a trained volunteer or paid worker may be more appropriate for some older people who are emotionally or physically frail. For example, two people who were interested in participating in the project were well known to us as they each had been receiving 'formal' befriending support for several years. Each had been matched with a member of staff rather than a volunteer because of long-term mental health issues and we were concerned that they may place heavy demands on a peer-to-peer relationship. Since registering an interest in being involved in peer-to-peer befriending, sadly one of the men has committed suicide whilst the other continues to receive 'formal' befriending support from a member of staff.

Other issues which affected our ability to match people up individually or in small groups included changes in health, admission to hospital and having access to appropriate transport.'

c) Comment:

This project produced a useful test of peer-to-peer befriending both in terms of how useful this approach can be for some people as well as proving that it will not always be a suitable intervention for everyone. The project recommends that such peer to peer befriending can be a useful addition to more formal befriending services by *'enabling befriending services to provide temporary support to 'move people on' and free up volunteers and staff to meet the needs of frailer older people.'* It is encouraging that the project aims to utilise the approach in future with appropriate clients.

7.3 New Horizons at Royds

a) Original proposal:

'Our Innovative approach will be to offer group befriending in several care settings: Avery Tulip Court, Earlswood, Woodside Court and Beeches Care Home. This will offer an opportunity for the residents to come together weekly at a set time and socialise with each other facilitated by two of our staff. It will include activities to get people moving – a wake up/shake up session, refreshments and social contact.

We want to develop partnerships with local schools to deliver the Precious Postcards project. This is where local school children design and send a postcard or card to isolated and lonely older people. The cards will be sent at significant events such as birthdays and Christmas and will benefit both the older person and the children.

They will learn something about the older person – what job they had, what life was like in Bradford in the past and the card will brighten the older person's day. As the relationship develops between Royds and schools we could look at further intergenerational work between older people and children.'

b) Evaluation of Innovative Approach Outcomes:

'Our outcomes for the group befriending projects were to encourage older people to have increased regular social contact and feel less isolated as well as providing the opportunity to get mutual support. These outcomes were achieved through attendance of the sessions because by meeting as a group they are instantly making social contacts within their Extra Care communities. This then provides them with friendships that can be nurtured after staff members have left, meaning that befriending is providing them with long term permanent solutions. This social contact will also provide the mutual support that is required to limit their need for other services. The use of support circles allows befriendees to educate each other as well as providing a safe space for open discussions about different topics and current affairs. One lady at Beeches Care Home enjoyed sugar craft as a hobby in her younger years and has continued to this day. She led a demonstration for the group to show them how it was done, passing on her knowledge. They were then able to discuss and engage in the activity. Other successful activities have included sensory reminiscence using flowers, leaves and other natural

elements in order to stimulate memories of nature and gardening from their younger years, this activity was also done using a dog as the sensory element. These activities work well as they open up memories and allow the groups to tell stories of their past, whether a tale about a pet or the time they visited a farm or zoo.

The discovery or rediscovery of these certain skills were an additional outcome to our approach and certainly an added bonus in terms of results. Not only had we brought people out of isolation and into a situation where they were able to socially interact, but we had also helped them to re-engage with hobbies and skills that they may have enjoyed in earlier years. This was evident with the lady who taught the sugar work, but genealogy was also an activity that was requested by numerous befriendees who wished to re-engage with it as a former hobby.

One of the main lessons we learnt was to listen to our befriendees' ideas for a session. Their skills and knowledge helped to shape many of the activities and discussions held within our support circles and they were able to educate us as much as the other way around. The ability to educate provides a sense of usefulness for an older person so using their skills to run an activity or discussion is as useful a part of befriending as just talking and listening. We also found that because a group are all a similar age, they do not all share the same interests. This initially sounds like a negative aspect of group befriending but in fact is a positive as it means that each befriender has something different to bring to the sessions. If we were to repeat this project, we would try to deliver it in a more measured manner.

Andrea Dobson, manager of Woodside Court had this to say about the project.

'The Wednesday befriending group provided by New Horizons has been invaluable to the residents of Woodside Court. They enjoy the variety of the sessions from armchair exercises, laughing yoga, giant snakes and ladders games and quizzes to name a few. They look forward to the ladies attending every week and the different sessions boosts their confidence and I know they have such a good time because of the laughter I hear from my office.

The sessions are stimulating, fun and interactive. The sessions are also inclusive to all residents so those with disabilities can also join in which makes a real difference to their wellbeing. It promotes interaction and some residents that don't necessarily know each other can socialise in the group.

The group has attracted a really good number of residents and has grown since October. I would say two thirds are regularly attending now and this is the most successful group we have had at Woodside Court, so this speaks volumes for their enjoyment.

Thank you for what you do, and I appreciate all your involvement.'

Kelly Halpin, the scheme coordinator for Ormond House gave this testimony about the befriending service we provided.

'Royds befriending service holds seated exercise classes here at Ormond house every Tuesday as part of their befriending group. This has had a great impact on our residents.

Residents enjoy the class that is delivered, and I have had nothing but positive feed-back from all who attend. They say that it gets them out of their flat and helps them make new friends. They enjoy the social side which in turn alleviates isolation. It gives them exercise that is tailored to their mobility and this helps them keep fit and mobile. One resident said. It helps gets my arms and legs moving, makes me feel good about myself and I enjoy that other people are doing it with me. I just wish we could have the group daily.'

The Precious Postcard Memories project aimed to build a social bond between younger and older generations. The objective, as well as tackling loneliness was to bring about an improved level of understanding between generations. Offering the opportunity for the older people to educate either about their work lives or perhaps ideals they had to live by in their younger years (make do and mend, share a skill) automatically brings them out of isolation and allows them the opportunity to feel useful. The lives younger people lead in the contemporary world may seem alien to a person over the age of 60 so it was important for us during the project to bring about a level of understanding that way also. Indeed, in one situation, a group of older befriendees were shocked to discover you could take a 'selfie' on your mobile phone. Helping to educate them on contemporary issues begins to break down isolation as it helps them to feel in contact with the world outside of Extra Care Housing.

The receiving of correspondence from younger people within our chosen schools and organisations were integral in helping our befriendees to feel less lonely. Whilst the older befriendees were the main target for the Postcard project, we found that the children were heavily invested in the project. Indeed, we found that the bond also stretched to the families (mums, dads and siblings) either encouraging them to help with the postcard or more simply building contact between generations within the family.'

c) Comment:

This project has tested a couple of innovative and unusual approaches to the issue of befriending. The use of Circles of Support to provide befriending as well as giving people the opportunity to rediscover skills and experiences has proved very popular indeed. The Precious Postcard Memories project has demonstrated the ability to work with both young and old alike and to give both valuable experiences as a result. As has been demonstrated more widely in this report, it is clear that such services help reduce the stress (and cost) on mainstream services and this will be a key factor to demonstrate in seeking to attract funding from local authorities and CCGs. It is heartening that Royds are exploring whether it would be possible to attract funding to maintain, and even expand, the projects.

7.4 Bradford and District Live at Home Scheme

a) Original proposal:

'Following recent consultation work with all our 900 members including older people that benefit from the befriending service, a key issue that came up with was that the befriendees wanted more choice in the support that they received from The Scheme. Our approach is to extend the current pilot in Wibsey, to the areas we are currently delivering our one to one befriending services, which is Clayton, Great Horton and Little Horton to offer more choice to the befriendees, through:

- 1) *Volunteer and User Led Community based activities*
Provide opportunities for befriendees who are more active to lead their own activities or for volunteers to run activities that have been suggested by befriendees or share their skills. This would benefit both befriender and volunteer befrienders.
- 2) *Hub based Outreach Support*
Volunteer Befriender/befriender-led microclubs, this will put together befriendees who share similar interests e.g. swimming, knitting. The project would put older people in touch with each other who wanted to do the same thing to enjoy each other's company and also to share costs and then they would meet in the community and share costs e.g. taxi to swimming baths. The Community Outreach worker would facilitate and support these matches. For new referrals to the Befriending project we would offer the opportunity to take part in volunteer/user led activities straight away. A volunteer befriender would accompany the individual to the activity for a number of weeks until the befriender feels comfortable and then they will withdraw that support and then the volunteer will be available to support another befriender.
- 3) *Telephone Support*
Dedicated support to befriendees available during office hours. This support is offered to members receiving one to one befriending and people who will be supported through our new project. The member calls the office, the office triages the issue or query – either the office-based CPC deals with it there and then or it gets passed to a CPC in the community who will take the lead on any action required.'

b) Evaluation of Innovative Approach Outcomes:

'From the outset this project felt like it was a bit risky and a massive change to the usual approach to one to one befriending in the home. The decision was taken to Pilot a project like this was an outcome of earlier consultation had with older people in the community back in August and September 2018. Where I was getting mixed messages about Befriending in the Home, such as "its only once a week, then I have nobody to talk to until the week after "and "I still feel isolated"

There is no doubt that some older people need befriending and not all older people want to come out, but I felt it important to find out which of these older people did want to come out and what barriers they were facing preventing them from coming out. I also wanted to Pilot this project and evaluate the outcomes to inform me of a more sustainable future for services for older people in the future.

There is no doubt that volunteer led activities and group befriending support is a more cost effective than one to one support in the home, and our project has showed me that the more people older people have to talk to, the less isolated and the more confident they feel.

Since our project started we have delivered group support to 27 new older people in the community which includes 8 people in wheelchairs who would normally think they couldn't ever go out on a day trip to a seated Tai-Chi session. We have 12 volunteers

leading on activities whose feeling of self-worth has increased and now feel like they have purpose in their retirement and spare time.

Whilst managing this project and talking to the people accessing the additional service, they have formed their own peer support, by swapping telephone numbers and forming their own telephone befriending. They are ringing each other on a night and on weekends and going to each other's houses for coffee or sharing taxis and going out for lunch. This was an unexpected outcome for our project! After reviewing the assessments of new people attending our activities 100% of these people are feeling better in themselves, 82% of people feel they have something to look forward to, 100% of people have made new friends both at activities and at home, 81% of people are feeling more confident and 38% of people have not visited the doctor as much cause they have other people to talk to.

One of the main successes of our project was asking the older people to design their own activities, when I attend the activities I feel a sense of belonging both from the members and volunteers they have even got name for their individual groups and had naming ceremonies. After evaluating this project, I wouldn't do anything differently, by supporting the older people and volunteers in the community to design their own services is definitely a model I will be adopting for the future. To support the small micro clubs and swapping skills we have been really over whelmed by businesses in the community offering space in their restaurants or teaching people new skills e.g. woodworking, cook and eat sessions.

The recommendation for my organisation would be to do a larger pilot for two years to extend into other communities in the Bradford District which will complement and develop the existing services we have in Bradford.

Our Scheme has five 'Live at Home Connection Hubs' in the District of Bradford from these hubs we offer a variety of building based activities, support for carers and people with dementia, by offering extended activities into the communities we would be able to develop activities and outreach support that are cost effective and have long term sustainability. The services we have created during our pilot will continue as part of our service delivery, but will have to look for funding opportunities to cover room hire until they are fully developed and become self sufficient

We are currently supporting 935 older people in the communities we work in, with the support of 102 volunteers, if we could continue supporting older people with this new Innovative Model we project that we could be supporting an extra 50% by 2021 and delivering to the wider and hard to reach communities.

In order to continue to develop this model of service delivery and to continue the outreach support that has been a vital part of this model. I would like to suggest that further funding is made available to develop and reach into other areas and communities.

From the Scheme and the Staff, I would to thank you for this opportunity to be able to put our vision into practice.

c) Comment:

It is clear that this project was felt to represent a risk to the 'normal' way in which the organisation delivered befriending services. It is also clear that the service users greatly valued the opportunity to help design and/or deliver their own services. The wider engagement of volunteers was also significant since this helps to reduce the costs of service – as well as ensuring that any available funding can reach as many individuals as possible.

7.5 The HALE Project – Shipley Area Links - Shipley

a) Original proposal:

'Matching more mobile befriendees with each other rather than a volunteer. Encouraging them to meet each other at local community spaces with support, including a Saturday morning group and a lunch club for those neglecting to eat/cook.

Encouraging and supporting those befriendees with early stages memory loss to have more social contact. Establishing a routine by creating a new timetable for them to attend social groups and wellbeing cafes. Be more proactive with our advocacy and look at befriendees who should be able to get out, assessing what the barriers are causing isolation, providing a plan to overcome these issues. Identify events for isolated people on Christmas Day and work on building confidence, linking people for support to enable them to attend such events.'

b) Evaluation of Innovative Approach Outcomes:

'We managed to evaluate 29 of the people who were involved with the new activities. These are people who attended regularly. We did not evaluate people who only attended once.

VCS Innovative Project Evaluations	Yes	No	Not sure
<i>Have you enjoyed the group/groups?</i>	29		
<i>Have you made any new friends?</i>	29		
<i>Have you attended any other new activities?</i>	14	14	1
<i>Has attending the group made you feel less isolated?</i>	26	1	2
<i>Has having other people to talk to made you feel better able to cope with day to day issues?</i>	28	1	
<i>Has attending the group improved your sense of wellbeing (mental health)?</i>	28	1	0
<i>Has attending the group improved your physical health?</i>	16	10	3
<i>Has attending the groups improved your confidence?</i>	23	4	2
<i>Do you feel more linked in with your community after attending the groups?</i>	20	3	6
<i>Would you like to continue with any of the new activities?</i>	25	1	3

Our main aim was to match clients on the waiting list with each other, in a one to one scenario, however, we found even with having extra time for additional support this was very difficult. We made one match through the cinema group, but that was with a volunteer who had recently become available, rather than two befriendees. We learnt that if the opportunity arises it can be well worth matching befriendees, sometimes they have lots in common. However, there are often too many barriers to make this approach work, with a one to one relationship.

Widening social contacts and developing friendships in a group setting was highly successful. 100% felt they enjoyed the groups, 100% felt that they had made new friends and 48% started new activities. In a group setting this makes a relationship much more relaxed and friendships can develop at a slower pace, with less pressure. The expectations on a couple are reduced in the group. If one person can't attend due to mental or physical health, there are still others within a group offering support. Group work, especially in a community setting, such as a church or community centre cafe, are a very cost-effective way of tackling social isolation. It remains to be seen whether people will continue to attend without a facilitator to support the group and organise transport. Taking people with memory problems to the Well Being Cafes worked well and can make a big impact, pain can prove to be a barrier.

Of the people we surveyed, 98% experienced increased wellbeing. Considering the difficulties of getting people out in winter, the additional health problems at this time of year and the holiday period over Christmas and New Year, we were pleased with the progress we made. We would definitely continue to look at promoting groups in community spaces if funding was available. A good mix of people with different levels of social activity is helpful to promote new groups to those that need encouragement to try new activities. Having reliable volunteers involved supporting groups is also really helpful in ensuring their success and enabling sustainability.

c) Comment:

The project has delivered its aim of matching befriendees with other, more mobile, befriendees rather than volunteers. This has had the benefit of widening the potential scope of the project as well as making the available volunteers' time go further. The sharing of activities has strengthened bonds between befriendees and has encouraged them to continue meeting up. The work of encouraging and supporting befriendees with early stage memory loss has also worked well and should be explored more fully.

As with other projects the need for funding – and volunteers – has been identified as critical to ensuring that such projects can continue. It is also encouraging that the project is exploring other befriendees who could benefit from the project and is looking at ways of delivering it on an ongoing basis either by incorporating it into existing projects or through attracting new funding.

7.6 Healthy Lifestyle Solutions CIC

a) Original proposal:

'HLS are going to be working with health professionals such as District Nurses and Community Matrons to develop befriending groups of interest. A high volume of people referred for befriending is done once workload from the referrers has completed.

We want to change this perspective on what is offered by working alongside medical staff to start this process earlier, for example: The District Nurses have a large number of patients, who are socially isolated, housebound and find it difficult to go out and meet others and receive support such as leg ulcer cleaning and wrapping. What we are proposing in discussion with District Nurses and others is that we invite those patients to come together as a group with similar needs and common ailments and start a befriending group amongst them. Alongside this group we could introduce things such as seated exercise to help with circulation, etc. The District Nurses have expressed that venue permitting they may be able to do some of the cleaning, wrapping, etc., which would mean that time would be saved traveling between properties. Added benefits would include the reduction in staff time between patients. This model can be emulated to meet a variety of needs.'

b) Evaluation of Innovative Approach Outcomes:

'One of the groups (BD4 Community Pals) was setup to act as a feeder group. This allowed those taking part to communicate amongst themselves and then organise interest groups. We now have 6 groups running BD4 Community Pals, Breathing Buddies, Lost Friends, Work of Hearts, Book Worms, Garden Grubs. Additionally, some members of the BD4 Community Pals have gone on to improve their physical wellbeing by collectively going along to a local swimming group. This happened after a guest speaker from the swimming group was invited to talk to BD4 Community Pals to promote a local service. We have also had members attend other external groups from promotion at BD4 Community Pals.

Having the groups establish themselves in this more organic way where they befriend one another prior to becoming interest groups allows less dependency on a coordinator or volunteer roles to initiate and sustain the group. Some of those taking part in these groups have shown interest in volunteering and acquiring new skills to support others less confident than themselves whilst expanding on their life skills and recognising their own self-worth and personal development.

The project has also built on the relationship with referrers due to the positive feedback received from those taking part. The groups have also given us the opportunity to gather evidence such as photos to present to practices to show some of the value brought at these groups.

HLS setup an initial group in December for referrals with similar health conditions. Those invited were unable to attend which helped us recognize that some people need more one to one or didn't require current services on offer. Prior to the project starting we had discussions with the District Nurses about the type of groups we could expect to setup

for practice patients. We initially spoke about the possibility of setting up some kind of activity group for those with health issues relating to their legs such as ulcers, etc. We found referrals for these health issues were more appropriate for one to one befriending.

It was later identified that there was a lot of patients with Chronic Obstructive Pulmonary Disease. The GP practice sent out letters on behalf of the befriending (to respect GDPR concerns) to relevant patients to invite them to take part in a group called Breathing Buddies. This group is now running weekly with regular attendees and regular further interest being expressed. HLS has spent a lot of time with people who are isolated and feel that the most empowering thing is when you see a person who is very shy and timid through lack of self-belief and confidence, start making decisions for themselves without thinking about it, leading to them taking responsibility and ownership of their lives. The Coordinator going out to referrals and doing an initial assessment helped identify additional barriers to engagement beyond physical health conditions such as leg ulcers, etc. Groups are now arranging other activities amongst themselves with support and are forming their own friendships who motivate and encourage each other. This has developed into a distraction from contacting the surgery and focussed their attention on something else such as activities/talking/listening to each other.

Identifying physical disabilities on a more extreme level such as leg ulcers, we presented those referred with the opportunity for one to one support with a volunteer in a more traditional befriending capacity with a view to increasing confidence and later introducing them to groups. We have been able to feedback this by showing the practices the value this contact has brought. We are now looking to expand on these types of groups including support groups for Parkinson's and diabetes.'

c) Comment:

This project sought to reduce the number of people requiring one to one befriending through the provision of a range of 'special interest groups'. This seemed to offer a range of choice for a number of individuals and, as with a number of other projects, enabled the organisation to 'stretch' its resourcing further. In addition, the work to create referral pathways with a local medical practice also covers useful ground with its links to potential social prescribing projects.

It is clear that there was considerable benefit in organisations having the time and resource to try alternative approaches to befriending. Many of the organisations reported that they were taking the lessons learnt and were seeking to incorporate them into their mainstream delivery.

CASE STUDY FIVE - E

'E was referred to Carelink by a Social Worker. She has vascular dementia, and this has reduced her confidence and ability to mix with people. Her daughter explained that E used to be a good mixer and regularly attended activities with the other residents living in her sheltered housing complex, but she no longer wanted to join in and had become anxious and isolated.

E began to rely heavily on her daughter J, who would call to see her every day after work and E would beg her to take her back to the family home for the evening. Although J is caring and very supportive of her mum, she was feeling under considerable pressure and it had begun to cause tensions within her own family.

*Initially, E was reluctant to have a befriender. She is self-conscious about her memory difficulties and on many occasions, she has found people to be impatient and unsympathetic with her, so she became very anxious about the idea of being introduced to a complete stranger who might not understand. E agreed to give it a go to please her daughter and over time she began to trust her befriender. She said what a relief it is to be able to talk to someone who accepts her as she is and does not make her feel silly when she can't remember things or when she comes out with something inappropriate. **"I feel I can talk to you without making a fool of myself"**, she said. J told us that generally her mum no longer trusts people but feels very comfortable in the company of her befriender.*

Usually E prefers to sit in her flat and chat with her befriender but on several occasions her befriender has taken her out in her car for a run around some of E's old haunts. E was thrilled when one time they drove past the house that she had grown up in and the school that she had gone to as a small girl. This stirred up many memories for her such as how she played out in the street with friends and how she was a keen gymnast at school. But she also felt a great sense of loss because the times and people that she could remember so vividly, were gone forever.

*Despite many attempts, E could not be persuaded to join activities at her sheltered housing scheme and apart from seeing her befriender, she was spending a lot of time alone, so her daughter and her befriender persuaded her to try going to one of Keighley Volunteer Centre's social day care groups. She reluctantly agreed to give it a try so long as her befriender went with her the first time and much to her surprise and despite much anxiety, E actually enjoyed herself and now attends the group each week. Her daughter said, **"When I talk to mum after she has been to the group it's like talking to a different person. She can never remember what she did while she was there or what she had for lunch but she's much more upbeat."***

Case Study supplied by Keighley & District Volunteer Centre

8. Future Infrastructure Requirements

The development of the Bradford & District Befriending Network marked a significant step in organisations delivering befriending in the area starting to work together. It is suggested that, in order to map out the support which might be required, this closer working needs to be developed further both in terms of the direction of the organisations and the support that they require to deliver more 'joined up' services.

There would appear to be a real opportunity for the Network to widen its remit and its aspirations so that it would represent as many of the organisations delivering befriending across the area as possible. Membership of the Network should therefore be widened to include any organisation working in the field of befriending in the Bradford area. As the membership of the Network expands, so it will be beneficial to devise a clear strategy for the Network. It is likely that such a strategy would have a number of major themes including:

- General advocacy of befriending to address the loneliness and social isolation agenda
- Wider promotion of befriending to potential commissioners and funders
- Integration of befriending organisations into as many appropriate structures as possible
- Development of innovative approaches to the expansion of befriending services
- Development of a potential single route into a range of befriending services
- Development of a membership which includes as many deliverers of befriending services as possible
- The role of individual members in delivering part of the strategy
- Development of more sustainable approaches to delivery including shared approaches to recruitment and retention

With regard to the last of these issues there would appear to be considerable potential for the sharing of resources – whether that is recruitment materials, policies, processes or evaluation materials. Whilst it would appear to be possible that a Bradford-wide recruitment campaign could be mounted, experience suggests that volunteers tend to associate with a particular geographic locality and hence such recruitment is usually best undertaken on an organisation-by-organisation basis even if the materials used are of shared origin. Similarly, the development of a Bradford-wide website is to be applauded and will widen the ability of people to find relevant services to meet their requirements.

As the Network's members start to work more closely together it may find that it will need to invest (time and/or money) in support to coordinate the Network's meetings, manage membership and undertake required central functions on behalf of members. Experience working with other networks has shown that, unless individual members are willing to undertake this work within their own organisations, some sort of coordinating function may be required and that without such a function the pace of development can be severely affected. For a small network such as the Bradford & District Befriending Network it is likely that these duties could, initially, be undertaken by a single individual, perhaps working 3 days a week, reporting to a volunteer Steering Group composed of Network members. Such a post would be likely to cost in the region of £15,000 - £20,000 p.a. If this was to be spread equally amongst 20 organisations this would be in the region of £750 - £1,000 per organisation unless external funding could not be accessed. In practice it is likely that contributions would be expected to be in proportion to the size of the organisation. However, it is suggested that there is a real discussion to be had with both the local authority and the CCGs around the need to support such a central function to ensure that befriending can play a critical role on the reduction of loneliness and social isolation.

9. New Partnerships

9.1 Background

From the discussions held with key existing and potential partners, it is clear that there is real potential in developing new partnerships with GPs, Community Partnerships, care homes and domiciliary care providers. There is no lack of demand for the services provided by befriending organisations and, as has already been demonstrated, there are already significant numbers of people on waiting lists seeking to access the support of a befriender.

The pressures on the providers of befriending services, amongst others, will continue to increase as local authorities and the health system continue to look for ways of diverting people away from inappropriate, and more expensive, health and/or social care interventions. Whilst such diversions are to be welcomed since they will often result in people accessing more appropriate services more quickly and will also create savings in the statutory sector there are, as yet, few ways in which some of those savings can result in direct additional support being redirected back to the voluntary sector. There are, as yet, no immediate solutions to this issue and it would be the work of a more representative and organised Network to ensure that it advocates for such financial redress alongside all other organisations delivering services which reduce the costs of the statutory sector.

There are a number of positive signs which indicate that organisations such as those working in the field of befriending may be more likely to be heard if the Network ensures that it is properly integrated into the relevant fora. Some of these are explored below:

9.2 Community Partnerships

In Bradford and Airedale, Wharfedale & Craven there are 13 Community Partnerships. These Partnerships are the local solution to the creation, nationally, of 'Primary Care Home Communities' which are a model of delivery of primary care focussed on populations of between 30,000 and 60,000 people and delivered through local decision making and partnership working. Within each Partnership's operating area, a range of different agencies, including the voluntary sector, work in partnership to deliver Primary Care Services to their local population. Each Community Partnership has identified their local priorities where they can *'add value, complement existing provision, or provide specialist provision to support City-wide initiatives.'*³⁰

It is important to note that of the 10 Community Partnerships across Bradford 7 have identified care of older people, loneliness and addressing isolation as being one of their priorities for attention:

³⁰ BVCSA, www.bradfordvcsalliance, 2019

Primary Care Home Community (PCHC)	Initial community plan ideas
PCH North Bradford Community (North 1)	Enhanced support for people who are housebound and people living in Care Homes. Support for unpaid carers through series of events. Improving health checks for people with severe mental illness.
PCH Bradford East Community (North 2)	Holistic enhanced support for the frail elderly.
PCH Bingley Bubble(North 3)	Proactive and reactive enhanced care and support to people with complex needs, for example people living in Care Homes, people who are housebound, people with severe frailty, dementia, motor neurone disease and Parkinson's disease. Enhanced offer of support for people with moderate frailty around falls prevention, self-care messages etc.
PCH Community 4 (Central 4)	Children's health and wellbeing. Improved diabetes care. Improved care and support for elderly people.
PCH Community 5 (Central 5)	Respiratory and cardiovascular disease. Children and young people.
PCH Community 6 (Central 6)	Improved diabetes care. End of life care. Working with schools and higher education institutes.
PCH H2PR Community (South 7)	Tackling social isolation. Delivery of a range of self-care and prevention initiatives.
PCH Community 8 (South 8)	Tackling social isolation and loneliness. Case management approach for people with LTCs regardless of residence.
PCH BD4 Community(South 9)	Support for people living in Care Homes. Tackling Social isolation.
PCH Community 10 (South 10)	Support for adults and children with complex needs. Tackling social isolation.

The three Community Partnerships in Airedale, Wharfedale and Craven also report similar priorities as follows:

Community	Priorities
Airedale	<ul style="list-style-type: none"> • Inclusion project (Project 6) – ‘third place’ for street drinkers, homelessness & refugees • Home Visiting Service • Asset Based Community Development in the communities – focussing on neighbourhoods/Community Led Social Care • Staff engagement – working differently – quarterly meetings now held as wider stakeholder meetings to include police, local councillors, education etc.
Wharfedale	<ul style="list-style-type: none"> • Children & Young People’s Mental Health – mental health in schools, MH first aid, support leaflets for children and parents/carers, social prescribers for teenagers • ‘Well Wharfedale’ – in the process of setting up a Charitable Incorporated Organisation • ABCD approach for the community – planning on holding ABCD workshops for community connectors • Planning a staff engagement event to take place February/March 2019
Craven	<ul style="list-style-type: none"> • Isolation & Loneliness – Nurturing Neighbourhoods • Medicine Management • Care Homes • Mental Health • Celebrating Sutton • E-Compass – online signposting for Craven • Input into the Castleberg consultation • Planning staff engagement, development, etc.

In order to manage the coordination across the various PCHCs in Bradford they have been organised across three ‘Locality Hubs’ each serving a total population in the region of 130k – 180k people as follows:

- **North:** 3 PCH Communities, 14 GP practices serving a total population of 130,012
- **Central:** 3 PCH Communities, 30 GP practices serving a total population of 161,493
- **South:** 4 PCH Communities, 18 GP practices serving a total population of 179,122

The intention is that, across the Bradford area, the health and care system will eventually deliver both service provision and commissioning through the ten Partnerships and the three locality hubs. The voluntary sector has organised representation on each of the Community Partnerships in the form of both a Lead Representative and a Deputy. It will be critical that the Befriending Network is linked into these individuals, especially in those areas where frailty and social isolation have been defined as priorities, to ensure that their activities are seen as solutions to the issues. There is an opportunity for Partnerships to utilise some of their recurrent funding to invest in solutions which address their

priorities and it would be sensible to consider a co-ordinated response addressing the areas with fewer or no befriending coverage at present (see map at 5.6). This would make coordinated planning easier and could also lead to economies of scale in delivery. It is also important to note that the West Yorkshire & Harrogate STP also includes the importance of programmes focussed on the frail elderly. In addition, the development of Primary Care Networks alongside Community Partnerships may also represent an opportunity for consideration, when considering the implications on GP waiting lists of loneliness and isolation.

9.3 Partnerships with GPs

It is clear that trying to influence GPs at an individual, or even a practice, level will be very difficult since there are many organisations trying to promote their services, interventions or products to each GP/practice. Whilst it would be possible to publicise the website of the Befriending Network so that GPs with a particular interest could choose to refer to the relevant provider, it is more likely that results will be gained either through contact with the Practice Managers or through District Nurses.

The Bradford Care Alliance is a relatively new social enterprise which represents GP practices as part of the Bradford Provider Alliance to be focussed on Primary Care for the population's health as part of Accountable Care in Bradford City and District CCG areas. The Alliance aims to shape and influence the delivery of 'high quality healthcare'. As such it represents a unique potential partner for organisations from the voluntary sector. The Care Alliance already sits on the Bradford Provider Alliance (BPA) alongside BVCSA, amongst others, which means that channels of communication already exist for better promotion of services from the Befriending Network amongst others. At present the Provider Alliance aims to *'develop and deliver more joined-up, high quality and sustainable health, care and community services that improve the wellbeing of people across Bradford'*. The BPA is initially focusing on developing *'better ways of delivering Diabetes and Out of Hospital care to better meet individual's needs and helping people to stay well, ideally in the community and closer to home.'*

At first glance it may appear that the 'Out of Hospital' workstream may not present a great opportunity for the Befriending Network. The description of that workstream's ambition is as follows:

'The Bradford Out-of-Hospital Programme aims to transform the care and support for people with complex care needs, enabling them to be 'happy, healthy and at home' for as long as possible. The term 'Out of Hospital' simply refers to services that are delivered in community settings to give person-centred care and support that promotes and enables independence. Out-of-Hospital care involves supporting people, understanding and meeting their health and care needs in a joined-up way, covering all areas, so they can live fulfilling lives in their own communities.'

In fact, the Bradford Care Alliance already recognises the important role that groups delivering services such as befriending can play:

By caring for more people in a community setting and reducing duplication across different services, Out-of-Hospital care will lead to better experiences for people and enable us to deliver services more cost effectively and efficiently. Greater use of existing community resources, for example exercise clubs or befriending groups, will also help people to maintain links with their local area, promoting self-care skills and reducing loneliness and isolation. The new ways of working are being developed and delivered by

existing providers of health, care and voluntary services across the Bradford district, working more closely together.

At this stage in the development of the Provider Alliance's plans it is not clear how the Befriending Network will be best placed to take advantage of this desire to involve community resources. It will be essential that the Network remains engaged with the work being undertaken by BVCSA to ensure to influence these discussions as they develop.

The author believes that next step of greatest value would be for the Network to have a clear, evidence based, strategy which maps out what befriending organisations are seeking to achieve and the contribution which they can make to health outcomes. There are many organisations and networks all seeking to influence local authorities, CCGs, GPs and others and it will be essential that a clear strategy seeks to work through existing structures since it is through these that progress is likely to be made.

9.4 Partnerships with care homes

It is certain that there is a role for greater befriending delivery in and around care homes across the country in general – and in Bradford in particular. Some care homes already try to provide services which address loneliness and isolation either by delivering services to their own clients, by welcoming other people into their premises or even by taking services to them in their communities. However, many homes report that the funding they receive does not even cover the costs of delivering the 'normal' care services they provide – before they even consider widening that offering.

The author spoke to the Bradford Care Association to explore the ways in which its members could work more closely with the Network. It was suggested that many care homes would be more than happy to welcome more befriending type activities being delivered by other organisations provided that they did not have to bear any significant additional cost of delivery. In the case of activities being delivered by volunteers (knit and natter groups, volunteer friendship groups, etc.) this would work well and would widen the reach of befriending organisations. If there was a requirement for additional costs to be met it is highly likely that care homes would not be able to contribute to these costs, but it would be worth exploring whether it would be possible to use personal budgets to pay for such services. This may not be possible since the needs of residents in care homes should be fully met by the care home itself.

9.5 Partnerships with domiciliary care providers

In the case of organisations delivering domiciliary care there is also a key role to be undertaken in identifying potential befriendees. In many cases the care assistants will already be fulfilling the role, at least in part, of a befriender (or at least the provider of some respite from loneliness and isolation). In addition, these front-line staff are the ones who could identify individuals who might benefit from some sort of befriending support. The Befriending Network needs to continue discussions with the Bradford Care Association with a view to developing a protocol by which domiciliary staff would be able to either identify potential befriendees and/or could leave a leaflet describing the services which could be accessed through the Network. The issue of consent for referral by the individual receiving care would also need to be addressed before this could be actioned. Providing such a protocol could be developed the Network would need to liaise with the Care Association to identify a short and simple way to make referrals to a central point which would have a minimum impact on the available time that the care assistant has to complete their primary task.

9.6 Partnerships with the Local Authority and CCGs

It is clear that there is keen interest within both the local authority and CCGs around the development of interventions to address loneliness and social isolation, both for the health benefits themselves and for the avoidance of costs to the system further down the line. There is a range of views about the role which befriending might play in this but the conversations around this issue need to be developed further and specific contact details have been passed to the Programme Lead at BVCSA.

A view was expressed that befriending 'fits straight in' to the sort of interventions which will be sought to address loneliness and social isolation. As such it was felt that there was no reason why befriending could not qualify as an 'assessed need' and thereby be an eligible item for expenditure of personal budgets providing that a suitable and sustainable model was established. A range of key individuals have been suggested as being the next points of contact for the Befriending Network.

The range of befriending services were described as being '*preventative, self-care and stopping the degrading of people's health*' and therefore would be the sort of intervention which the local authority/CCGs would wish to consider funding.

As well as contacts within the local authority it was suggested that the Befriending Network should also contact the new Link Workers in GP practices which will be linked to the Primary Care Networks once it is clear how they will report into the system. They could be key links to local befriending organisations particularly with respect to the identification of need. It will be imperative to find systemic ways of addressing loneliness and social isolation rather than as individual organisations.

9.7 The case for investment in befriending

In a difficult financial environment for both local authorities and health service bodies there is still an argument to be made for the role of investment in the areas of prevention such as befriending. Indeed, there is evidence that many areas of the statutory sector in Bradford are already interested in prevention of loneliness and social isolation. The drivers of this desire are the interest and duty of local authorities and the health sector to maintain the health of their populations, but it also makes good financial sense to divert people away from more intensive and costly health/social care interventions.

There are many studies which show a clear detrimental impact on both physical and mental health outcomes of increased levels of loneliness and isolation. A number of other studies also show that befriending services provide a cost-effective contribution to reducing loneliness and isolation. It is reasonable to assume that any service which reduces loneliness and isolation will therefore be likely to provide reductions in expenditure on physical and mental health services. Any reduction in funding for befriending services, without those services being replaced by a viable alternative, will result in an increase in loneliness and isolation and, in time, a decrease in the physical and mental health of participants. This will, therefore, lead to an increase in health and social care costs. This is evidenced by a number of studies outlined in a review by Windle et al; these demonstrate how mitigating loneliness will improve quality of life and may also lead to reduced health and social care costs³¹. In addition, it has been demonstrated that, if befriending is used more to support the emotional needs of people as part of a targeted support package, it can contribute significantly to building resilience. In

³¹Windle, Francis and Coomber, *Preventing loneliness and social isolation*, 2011

this way people are better able to cope independently and their dependence on other, more costly health and social care services is reduced³².

This study has already been shown that the work of befriending organisations has a significant effect in avoiding greater expenditure in due course. The impact of the work of befriending organisations in Bradford has been shown to deliver £6.3m of social value at a cost of just £427k. Much of these social impact costs would need to be met by statutory services if the befriending organisations were unable to continue to deliver those services.

It is also clear that local authorities are being encouraged to take the issue of addressing loneliness and social isolation seriously; indeed, a recent guide for local authorities when discussing why authorities should act indicated:

But why is loneliness an issue of concern for local authorities? Apart from the general imperative for public services to do what they can to alleviate personal suffering and distress, there is also very strong evidence that loneliness can increase the pressure on a wide range of council and health services. It can be a tipping point for referral to adult social care and can be the cause of a significant number of attendances at GP surgeries.³³

It is clear that there are very good social, as well as financial, reasons for intervention by local authorities (and, of course, by inference, CCGs) even if budgets are tight. The case is that early intervention is better for individuals and costs less, and thus avoids higher 'downstream' costs. The same guide defines the steps which local authorities should follow, which were:

'First steps

- *Engage with other partners – loneliness is a multi-faceted issue and effective responses should be delivered in cross authority partnerships including the voluntary and community sectors.*
- *Define the local loneliness issue – understand the nature of the problem and who is at risk in your area. This could be informed by the local JSNA or JHWS.*
- *Agree a plan of action to reduce loneliness, and a way of measuring progress over time.*
- *Involve older people, including those experiencing or at risk of loneliness, in mapping local assets, determining responses, and co-producing solutions.*
- *Consider the significant role of councillors and their understanding of the local area and support that may be available'*

The guide indicates that, amongst many other ways in which authorities can look to reduce loneliness and isolation, befriending can play a key role:

'Buddying: One-to-one friendship provision can support older people who are unable to connect with existing relationships or have practical barriers, such as disabilities, that prevent them from getting out. The most common form of one-to-one approaches are befriending services through which an older person is matched with a worker or volunteer who visits or telephones them on a regular basis, although there is also scope for greater

³²Mentoring and Befriending Foundation, *Befriending works: building resilience in local communities*, 2010

³³ LGA/CTEL/AUK, *Combating loneliness – a guide for local authorities*, 2016

use of technology in this area. Befriending services are expanding to engage recipients in becoming befrienders and creating specialist models for particularly at-risk groups.'

CASE STUDY SIX - I

'I is a very sociable, chatty lady who had been very active in her community and really missed companionship after developing mobility problems. She was introduced to a Muslim befriender and took a keen interest in getting to know more about her culture.

At first, she found her befriender, N, to be very shy and a little timid but being chatty herself they soon developed a great friendship.

N had been quite low in mood before befriending as she had been a carer for her grandparent who had passed away. She had health problems which prevented her working and she had a lot of spare time as her children were growing up.

Over time their friendship has grown, N has grown in confidence and is very much at ease with I now. She has introduced her to family members and taken her out to try new foods and to family celebrations.

N has now found employment working as a carer for older people but still finds time to visit her friend, I.'

Case Study supplied by HALE Project

10. Recommendations

When a report such as this research study is produced against a tight timescale there will always be individuals or organisations with whom the authors are unable to meet. In addition, there are often other issues of timing which preclude the project following the path which was originally mapped out at the outset. With this in mind the following section details the steps which should now be taken to develop the project further:

Network coverage

- Membership of the Network needs to be widened and available to all organisations offering befriending services in the area.
- More work needs to be undertaken to locate new organisations and ensure they have the opportunity of joining the Network.
- The Network needs to develop a strategic approach to all of its activities so that it is seen as the voice of all befriending in Bradford and, in this way, can ensure its voice is heard at all relevant fora and by all potential and existing funders.
- Where there are areas of poorer coverage (whether in geography, volume or delivery) the Network should discuss ways of addressing this through their defined strategy (q.v.).

Strategy

- The Network needs to develop an overall strategy for the development of befriending services across the area. It is likely that such a strategy would have a number of major themes including information, advocacy, funding, membership, partnerships and (potential) budgets.
- Network members need to consider what infrastructure requirements they will need, bearing in mind the suggested staffing in this report.
- The Network needs to start discussions with members, the local authority and the CCGs about the way in which the infrastructure requirements could be funded.
- The Network needs to discuss ways of using the data in this report to advance the case for the value of befriending services in terms of the value to society of the interventions, the savings further 'downstream' which such investment could give and the best way to advance befriending as a solution to delivering the frailty, loneliness and social isolation agenda.
- The good practice section of the report needs to be discussed in the preparation of the new strategy to determine ways in which befriending in the Bradford area can be developed further.
- The innovative projects undertaken as part of the work overseen by BVCSA need to be carefully reviewed to determine if: any project is delivering results worthy of wider replication and; which projects are more likely than other, existing befriending activities, to attract statutory funding.

Partnerships

- The Bradford & District Befriending Network needs to ensure that it liaises with BVCSA to ensure that the case for befriending as a valuable intervention in cases of loneliness and social isolation is made.
- In particular the Network needs to ensure that it is comprehensively represented by BVCSA through the development of Community Partnerships and their strategies.
- Community Partnerships should be encouraged to consider using some of their recurrent funding to support the delivery of befriending in areas where there is less/no coverage at present.

- Discussions should be held with Community Partnerships about whether a joint approach across multiple areas could be delivered both to coordinate effective delivery and take advantage of economies of scale.
- The Network needs to hold a series of further meetings with key strategic individuals in the local authority/CCGs to seek to cement the role which befriending can play in the delivery of services and the avoidance of 'downstream' costs.
- The Network needs to discuss with the local authority and CCGs the case for investment in early interventions such as befriending and the fact that this should be an appropriate use of personal budgets and/or spot purchasing. In addition, discuss the need for members to receive financial support to help meet core costs.
- The Network also needs to establish a marketable offer and financial model, based on good practice from elsewhere, which will work for one to one befriending as well as groups. It should continue to explore ways in which spot purchasing and Personal Budgets might be used to support the costs of delivering befriending in all areas.
- There should be continued maintenance of relationships with the Bradford Care Alliance, the Bradford Provider Alliance and the Bradford Care Association to influence the discussions of both priorities and delivery.
- There should be further liaison with the West Yorkshire & Harrogate STP and the Primary Care Networks as they develop to profile the work of the Network.
- There are real opportunities for the development of more informal relationships with care homes building on the Innovative Practices project by New Horizons at Royds; these need to be explored at both a partnership level (through BVCSA discussions with the Bradford Care Association) and at an individual level through local care homes.
- In addition, there are further opportunities for the development of greater relationships again at a strategic level through the Care Association and at a local level via individual domiciliary care agencies.
- Further exploration should be undertaken around the potential for delivery of befriending via care homes and potential funding methods for such delivery.
- The potential for referral of possible befriendees from domiciliary care personnel as well as a possible simple referral process should be explored further.

Eligibility criteria

- This area cannot be addressed until discussions with the local authority/CCG about funding for services are developed further.
- It is highly likely that the Network will seek to introduce a time-limited criterion to ensure that the finite resource can be more focussed on areas or individuals with the most need.

Data

- The Network needs to continue to work with the Bradford Observatory to seek to ensure that befriending services are available to as many people as need it.

Publicity

- The Network needs to find ways of publicising both its work and its SROI with a view to attracting funding.

11. Conclusions

The Bradford & District Befriending Network already consists of a number of organisations delivering high quality befriending services. It now has an opportunity to develop in a strategic manner and influence the lives of a much greater number of individuals. By widening the membership of the Network and by bringing a cohesive voice to befriending across the area it may well be possible to attract both statutory and personal funding to the delivery of services. It will also be able to offer services through a much wider range of outlets and to a much greater number of people than is currently the case.

The author would like to thank everyone who contributed to the production of this study, but in particular Ben Cross, Programme Lead at BVCSA, and Susan Moreland, the Project Worker for the Bradford & District Befriending Network.

Peter Stone
March 2019



Harnessing the Power of Communities

Befriending in Bradford Research Study

Specification - November 2018

Background

The financial challenges facing Bradford are leading to significant reductions in Adult Social Care provision across services, in particular in the reduction of funding available for Day Centre provision for the elderly, and seeing Befriending Services being asked to support people with more complex Social Care needs. It is anticipated that additional reductions in funding may also have to be made in the future.

The reduction of Day Centre provision and increases in the number of older people in need of support will impact on the older population of Bradford, potentially decrease their wellbeing, and increase the risk of social isolation and loneliness. This often hidden social problem has recently been highlighted as a local priority for 7 out of the 10 Primary Care Home/Community Partnerships across the Bradford City and Districts areas. Mental Wellbeing has also been highlighted as a common local priority for each of the Airedale, Wharfedale and Craven Community Partnerships areas.

A number of bids have been made from organisations in the Bradford area to the Big Lottery under their Building Connections Fund, which was set up in response to the work of the Jo Cox Commission on Loneliness. However, this fund was significantly oversubscribed, with only a comparatively small number being funded. This demonstrates both the level of need and the lack of any other suitable funding.

West Yorkshire and Harrogate Health and Care Partnership offered the VCS Sector in each of the 6 'places' some funding to tackle local priorities.

Bradford VCS Alliance has worked directly with the Bradford Befriending Network (BBN), to explore ways that Befriending services can help to mitigate against the potential impact of these reductions to provision on the elderly of Bradford. BBN is currently a loose collective of interested 'professional' Befriending services, who are also aware of a number of other VCS organisations who offer Befriending on an informal basis within local communities. These informal services are often offered by faith-based organisations and smaller community organisations.

A set of 4 projects have been proposed and accepted to provide an investment in the support structures that exist to support and build the capacity of Befriending services in Bradford. These are:

- Research Study
- Develop Bradford Befriending Network
- Workforce Development

- Innovative Approaches to Befriending

This document sets out the specification for the Research Study and invites opportunities for an Independent Consultant to submit a proposal to deliver against this specification.

Outcome

Bradford Befriending Network and its partners have a detailed knowledge of the current state of Befriending in Bradford, and the evidence they need to help to develop a strategic plan for Befriending in Bradford, and for their own organisations.

Tasks (with approximate % of time):

1. Identify the current 'professional' and informal Befriending provision in Bradford, along with the current capacity of that provision. **15%**
2. Establish the current value of Befriending to Bradford, including identifying average unit costs for provision. Consideration should be given to both the financial value, and the real terms value in terms of the costs of loneliness and isolation, and the benefit to the 'system' of Befriending as a preventative measure. **20%**
3. Carry out a modelling exercise to establish the estimated demand for Befriending Services over the immediate period, and the next 5 years. Part of this work will be to confirm a common set of eligibility criteria, which has a degree of flexibility to differentiate for the different levels of need which existing Services address. An inevitable outcome of this work will be the identification of potential gaps in provision which Services may be able to develop projects to fill. These are likely to be based on identified needs, rather than simply an age-related criteria. This element will require liaising with colleagues from Adult Social Care at the Local Authority. BVCSA can make the necessary introductions to facilitate this task. **25%**
4. Identify national examples of Good Practice in Befriending Services, which will highlight different approaches to Befriending which may be more cost-and time-effective. This would include examples of where Personal Budgets have been used to fund Befriending Services, End of Life Befriending, cross-generational Befriending, and specific-condition Befriending (cancer, respiratory, and heart care), to fit in with existing areas of work. **10%**
5. Make recommendations around approaches to the future Infrastructure required to support Befriending across Bradford, including volunteer recruitment and retention. **10%**
6. Make recommendations around new local partnerships with GPs and Community Partnerships, and future engagement/closer working relationships with Domiciliary Care Providers. These elements will involve working collaboratively with Bradford Care Alliance (GP Consortia) and Bradford Care Association (Care Homes and Domiciliary Care Provider Network). BVCSA can make the necessary introductions to facilitate this task. **20%**

Monitoring:

Progress reports in January 2019 and February 2019, with the final report due on Friday 1st March 2019.

Timescales:

Starting in December 2018 and concluding by 1st March 2019. A final presentation of the Study is also to be given after submission of the final report, at an event in Bradford to be arranged in due course.

APPENDIX TWO - SURVEY OF PROVIDERS – FULL RESULTS

Q1: Organisational details (Answered: 13 Skipped: 0)

A total of 13 organisations completed enough of the survey for their responses to make a meaningful contribution to the survey's results. These were as follows:

ORGANISATION
The Sharakat Project
Marie Curie
The Silver Line Helpline
Alzheimer's Society
BD4 Community Trust
Community Action Bradford & District (Shipley Area Links - Bingley Section)
HALE Project
Ilkley and District Good Neighbours
Bradford and District Live at Home Scheme
Age UK Bradford District
Keighley & District Volunteer Centre
New Horizons At Royds
St Johns Befriending Scheme

Q2: Contact details

Individuals from the 13 organisations supplied their contact details – these have been supplied to the Programme Lead from BVCSA

Q3: What is the name of your befriending service(s)? (Answered: 13 Skipped: 0)

SCHEME NAME	ORGANISATION
The Silver Club	The Sharakat Project
Marie Curie Helper Service	Marie Curie
Telephone Friend	The Silver Line Helpline
Side by Side Airedale, Wharfedale and Craven	Alzheimer's Society
Gems Daycare	BD4 Community Trust
Shipley Area Links Befriending - Bingley Section	Community Action Bradford & District (Shipley Area Links - Bingley Section)
Shipley Area Links Shipley Area	HALE Project
Good Neighbours Befriending and Moving On	Ilkley and District Good Neighbours
Live at Home Connections	Bradford and District Live at Home Scheme
Wellbeing and Engagement	Age UK Bradford District
Carelink Befriending Scheme	Keighley & District Volunteer Centre
New Horizons	New Horizons At Royds
St Johns Befriending Scheme	St Johns Befriending Scheme

A number of other responses were either duplicate entries from some of the above organisations or were so partially completed as to be of no real use.

Q4: Please briefly describe what your befriending services do and how they work. (Answered: 13 Skipped: 0)

Schemes were asked to outline the work which they undertook, and their entries are included below. These have been included verbatim with the exception only of the correction of typos etc.

The Sharakat Project

A weekly group for older people with organised activities including crafts, games, chair based exercise and trips out. People are referred to us through befriending services and we help organise transport on the access bus when required.

Marie Curie

The Helper Service is a great local service providing support to people living with a terminal illness and their families and carers. We know that the little things can make a difference – like having someone to chat to over a cup of tea, help you get to an appointment or run an errand, or just be there to listen when you need a friendly ear, and that’s where our Marie Curie Helper Services comes in. While health care professionals focus on their essential work, Helper volunteers can offer a social aspect that can be so important at such a difficult time.

We’ll match our clients with a trained, dedicated Helper volunteer who will visit them at home, go out with them somewhere or talk to them over the phone. And that means, for a few hours each week they can rely on someone to be there when they need them. Feedback tells us that Helper volunteers play a vital role by enabling people with a terminal illness to have an element of normality in a world that can feel very abnormal. In addition, Helper volunteers enable carers to have a short break which can be invaluable; and continue to support carers for up to three months during bereavement.

Everyone is different but the types of support our Helper volunteers often give include:

- Companionship and emotional support. Our volunteers provide a friendly ear.
- Practical help. Helper volunteers can come with you to appointments at social events or help with small everyday tasks.
- A break for families and carers. The person looking after you may be able to take a break for a few hours while our volunteers with you.
- Information on further support.

The Silver Line Helpline

We match volunteers up to an older person who has requested a regular phone call each week. Calls are scheduled for 30 minutes per week at the same time each week. Volunteers and older people are matched based on similar interests and suitability.

Alzheimer’s Society

Our services match people with dementia with a volunteer based on similar interests and goals. So, it might be that somebody with dementia has always had a love of walking or swimming but since receiving their diagnosis may not feel as confident in doing these activities. We would look

for a volunteer who also enjoys these activities, this enables the person with dementia to continue to do things that they love and enjoy and build relationships at the same time. The service is client lead, the person with dementia chooses the volunteer.

BD4 Community Trust

We provide various sessions through the week for those aged 50+ to meet together and share stories, support and engage in activities around fitness, well-being, health and nutrition and reminiscing. We offer access to local supermarkets via mini-bus services. Access to local park cafe for coffee mornings. Craft and indoor-bowls.

Community Action Bradford & District (Shipley Area Links - Bingley Section)

We accept referrals of isolated older people (over 50 with chronic health conditions, mostly over 65 and living alone). We aim to reduce isolation and improve confidence by social visits. We recruit and train local volunteers and match them to visit suitable referred hosts on a weekly basis, subject to availability. We also use trained staff as specialist befrienders to provide monthly visits or supported outings, prioritising those with dementias or other long term mental or physical health conditions. Telephone befriending supplements contact for some on our waiting list. In addition, we have a trained advocate to provide support and sometimes representation for people involved with us with urgent needs beyond social company. Our minimum involvement (if accepted) is 6 months, with many matches lasting for years. The project is run in partnership with HALE Project Shipley, with each group responsible for our region, but sharing joint training get-togethers and group social events and with planning, monitoring, standards and procedures in common.

HALE Project

We take referrals for people over 50 years of age who live alone, feel socially isolated and struggle to get out. This may be for a variety of reasons, ill health, and bereavement, mental health issues such as anxiety or dementia, and disability. We recruit volunteers from our local community and match them to do weekly visits for a minimum of 6 months. We arrange mandatory and additional training as well as coffee mornings for volunteers and two social events a year for all our beneficiaries. We have a paid specialist befriender who visits people with advanced dementia or additional issues such as depression or communication problems. We also offer advocacy for befriendees, providing them with a voice to tackle any issues they may be having or support to access services and maintain independence. We also offer telephone befriending for people waiting to be matched or who are especially isolated.

Ilkley and District Good Neighbours

Befriending Project:

- 1 to 1 visiting of isolated older people (often with health issues) in their own home for friendship.
- Visiting undertaken by volunteers.
- Some volunteers take older person out for local trip.
- Visits usually once a week or once every 2 weeks.

Moving On Project:

- Weekly meeting for coffee and cake and chat with the aim to help people meet others and find new activities within the Ilkley area. Aimed at more mobile older people, perhaps newly moved to the area or recently bereaved etc.

Bradford and District Live at Home Scheme

Our scheme supports Older People in the Community, usually aged 60 plus, however the age range is flexible dependant on disability. The main aim of our service is to support Older People to remain living independently in their own homes. Referrals to our service come from many sources, Self-referrals, social care teams, doctors, nurses, families and friends. Every person referred to our scheme receives a Home visit, this helps us to shape our service to the individual needs of each person, during this visit we can also identify which Volunteer will be a suitable match for the individual person, e.g. If an Older Person would like to go shopping, we will match them with a Volunteer who drives. By the end of the first visit which normally takes on average two hours we will have completed a Member Assessment form and completed a Risk Assessment, the Member Assessment form is then used at regular review visits to inform us of any changes to the members needs and how our service in making a difference to the individual. The Risk Assessment ensures that we are keeping the Member and Volunteer safe at all times, and any adaptations are put in place prior to us matching the Member and Volunteer. Our service offers short term and long term support dependant on the need of the Older Person, if a Member needs support to attend a community service by means of a 'Buddy' to help raise confidence and support to attend, by means of transport this support will usually last approx. 6 weeks, however we will still continue to support the Older Person in one of our community based activities.

Age UK Bradford District

We do not offer a befriending service as such but 1:1 and group support to enable people over 50 to identify their own solutions based on their gifts and skills so that we can support them to reduce their own social isolation and loneliness. We often do this through peer support or pairing with a volunteer. We do regularly refer to the Age UK National call in time telephone befriending service for those who may benefit from or request this service.

<https://www.ageuk.org.uk/services/befriending-services/sign-up-for-telephone-befriending/>

Keighley & District Volunteer Centre

The aim of CarelinK is to reduce loneliness and social isolation and help older people to retain their independence and resilience. We visit socially isolated older people in their own homes and provide one-to-one face-to-face companionship and befriending support. Service users are matched with a trained and vetted volunteer befriender or paid worker who visits them for an hour or two each week.

Whilst CarelinK provides a face-to-face service, many service users receive additional phone support from their volunteer befrienders or staff.

We also provide service users with information and signposting/referral to other services and activities aimed at further reducing loneliness and connecting them with the community.

New Horizons At Royds

Who we are:

New Horizons provides care in the community, running services all year round.

What do we do?

Our Befriending Team provides much-needed companionship and support, through regular visits, to isolated and vulnerable people in the secure familiarity of their own home. We work closely with other service providers to ensure the highest level of care for the individual.

How can we help?

Research suggests loneliness can be as harmful to your health as smoking 15 cigarettes a day. Befriending provides a person with a valuable link to the outside world and often acts as a gateway to further support and social activities. Regular visits can improve mood, build confidence and make independent living far more sustainable.

St Johns Befriending Scheme

Volunteers visit isolated people in their own homes to offer friendship and companionship and to promote wellbeing. Clients are also signposted to other services that may benefit them.

Q5: Which ward area(s) does this service cover? Please tick all those that apply. (Answered: 13 Skipped: 0)

Providers were asked to indicate the ward areas in which their befriending services operated. The responses were as follows:

Area	Number
Baildon	1
Bingley	2
Bingley Rural	2
Bolton & Undercliffe	0
Bowling & Barkerend	1
Bradford Moor	0
City	1
Clayton & Fairweather Green	2
Craven	1
Eccleshill	1
Great Horton	1
Heaton	1
Idle & Thackley	1
Ilkley	2
Keighley Central	2
Keighley East	2
Keighley West	2

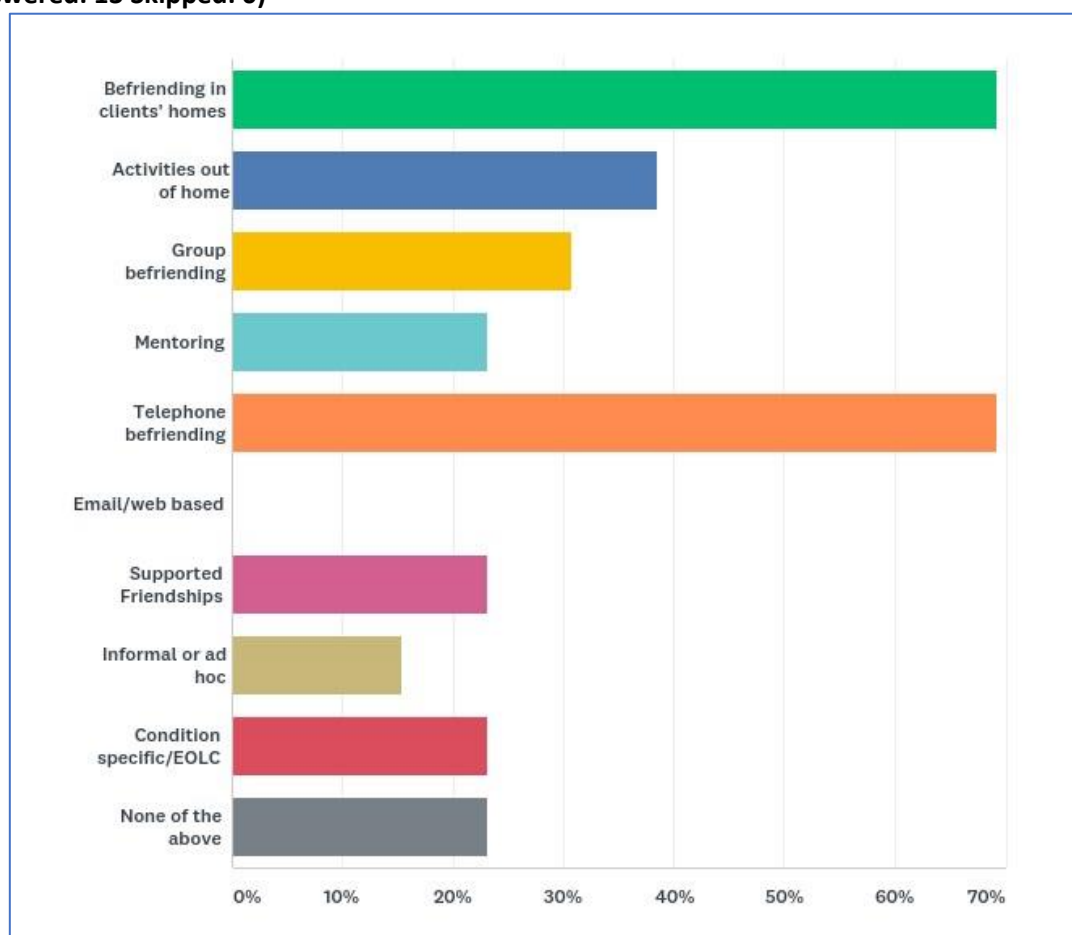
Little Horton	0
Manningham	1
Queensbury	0
Royds	1
Shipley	1
Thornton & Allerton	1
Toller	1
Tong	0
Wharfedale	1
Wibsey	1
Windhill & Wrose	1
Worth Valley	1
Wyke	1

Within the above chart the figures from Table One have been supplemented by two of the three providers which indicated that they covered all of the Bradford area. These were Age UK Bradford, the Marie Curie Helper Service and Silver Line.

Respondents were also asked if they worked in other areas such as specific villages or communities. The responses were as follows:

Response	Organisation/Service
All of West Yorkshire and parts of North Yorkshire	Marie Curie – West Yorkshire Helper Service
We are a national charity	The Silver Line Helpline
Airedale, Wharfedale and Craven areas	Alzheimer's Society
We are not ward specific, so happy to work with other areas.	BD4 Community Trust
Saltaire & Nabwood	HALE Project
Ilkley, Burley in Wharfedale, Menston and Addingham	Ilkley and District Good Neighbours
Wellbeing officers are constituency based in Bradford East, Bradford West, Bradford South, Keighley and Shipley.	Age UK Bradford District
Low moor. Odsal. Oakenshaw. Lower Wyke. Woodside.	New Horizons At Royds
We operate in BD2 and BD10	St Johns Befriending Scheme

Q6: Which delivery formats best describe your befriending service? Please tick all that apply?
(Answered: 13 Skipped: 0)



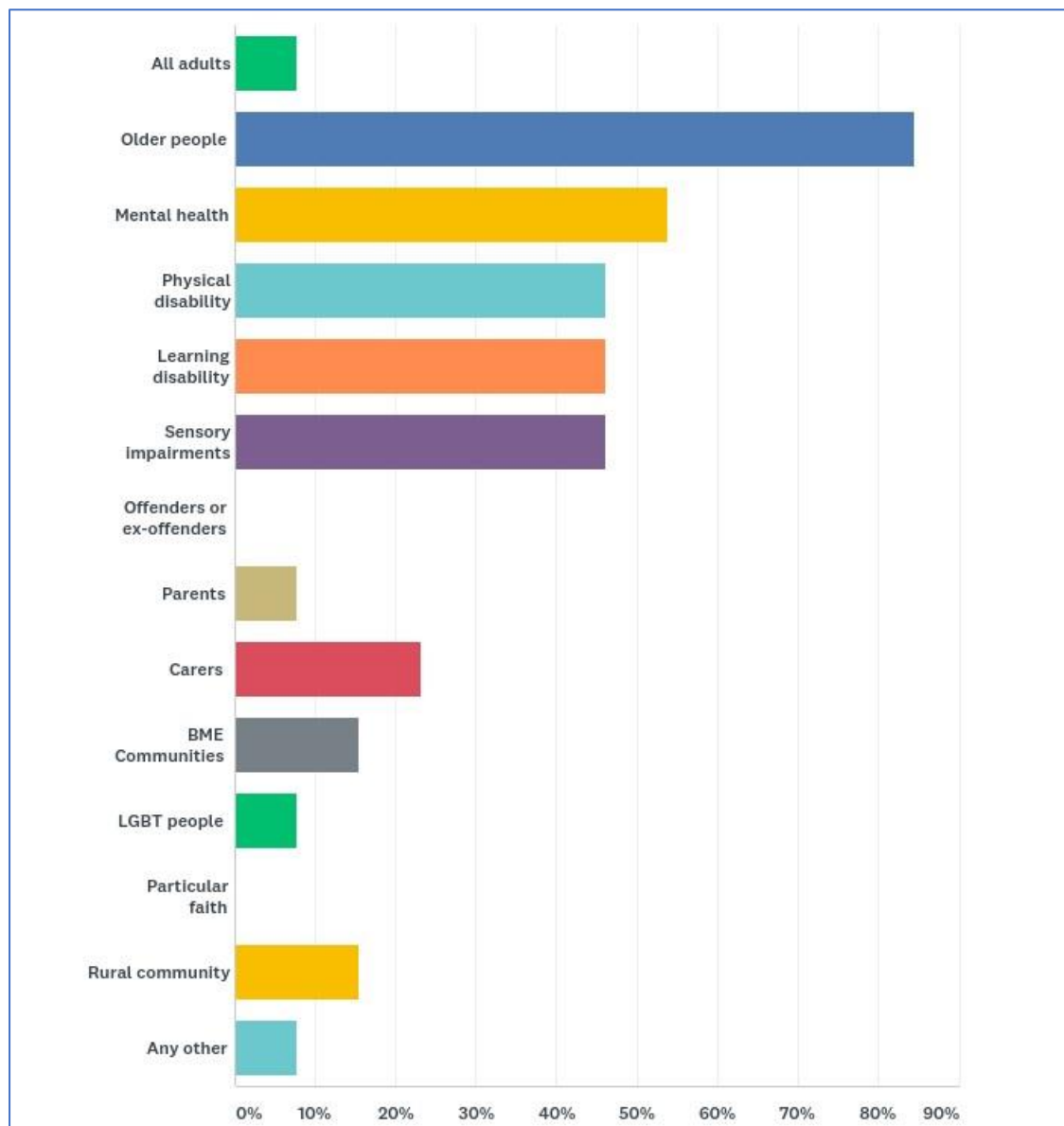
Of the respondents which indicated none of the above the responses were as follows:

- People make their own way to the group or sometimes come with support from other organisations. We befriend people once they are at the group and can signpost them to any other services which may be helpful. Occasionally home visits are carried out.
- Our service is not described as befriending. The activities that the pairings undertake can be at the client's home, out and about in the community or over the phone.
- Around 90% is visiting in clients' homes. Telephone befriending is mostly interim. We encourage some supported outings. 30% of referrals have specialist dementia conditions and staff use reminiscence tools, including personal story books.
- See (Page 1) (We do not offer a befriending service as such but 1:1 and group support to enable people over 50 to identify their own solutions based on their gifts and skills so that we can support them to reduce their own social isolation and loneliness. We often do this through peer support or pairing with a volunteer. We do regularly refer to the Age UK National call in time telephone befriending service for those who may benefit from or request this service.)

Q7: Are you planning to explore offering any of the other types of befriending described above - and if so which? (Answered: 8 Skipped: 5)

- Mentoring
- We are currently expanding support to attend groups, mainly using staff for selected clients, but also offering encouragement to clients by newsletter and support to volunteers by extra training.
- Supported friendships between more mobile befriendees. Supporting people to take part in activities outside the home, especially those with memory issues.
- No, we are not planning to explore other types of befriending at the moment although within our 1to1 visiting some of the volunteers informally have set up Skype for their client.
- supported friendships
- We are currently piloting LINK-UP which is a supported friendship project.

Q8: Who is your befriending service aimed at? (I.e. who is eligible to use it). Please tick all that apply.(Answered: 13 Skipped: 0)



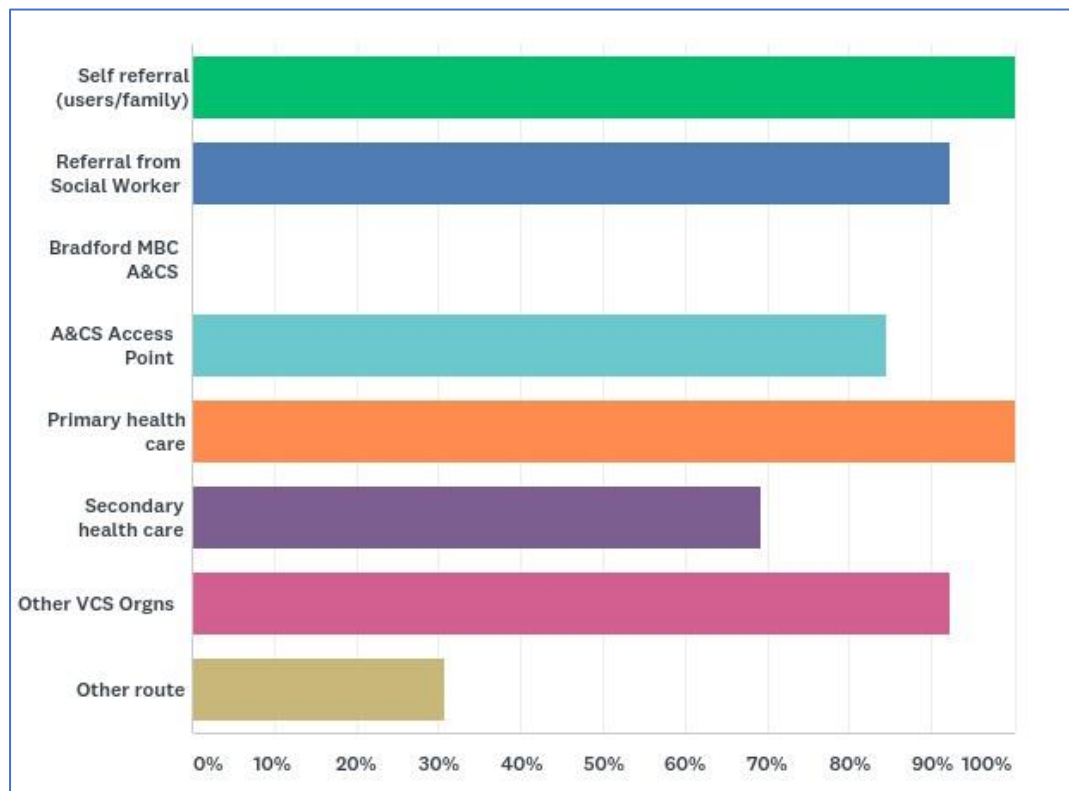
In terms of those responding 'Any Other' the details were as follows:

- Adults over the age of 18 with a terminal diagnosis
- Anybody with a diagnosis of dementia. This includes some of the groups above but is not limited to.
- 30% of referrals have specialist dementia conditions. Most are over 70 years of age, and have serious chronic health needs, including complex conditions and at the end of life.
- We don't specifically support people with mental health or learning disabilities but if they are at a level appropriate for a volunteer to befriend we do include them.
- Mental health conditions are usually Alzheimer's or other forms of dementia and sometimes depression. We do not deal with other severe mental health problems.
- Our main target group is older people. This may also include people with mental health conditions, physical disability, learning disability or sensory impairment, providing people are over the age of 65.

Q9: If a specific sector/group of the population makes up the majority of your befriendees, please tell us here (e.g. 'most of our users are aged over 60')(Answered: 12 Skipped: 1)

- Most of our users are women over 60 of Pakistani heritage.
- Over 18s
- anyone over the age of 55
- A large number are over 60, but we support younger people with dementia as well.
- For our Gems project the majority of users are over 55. For Bd4 Family users the majority of users are between 0-35
- Most are over 70 years of age and have serious chronic health needs.
- We support over 50s but most of our clients are over 70 years.
- Most of our users are aged over 60
- Most of our users are 60 plus
- All service users are aged 65+
- Over 55
- Most users are aged over 60

Q10: How do people come to your service? Please tick all that apply (Answered: 13 Skipped: 0)



Q11: Which of the above referral routes is the one most frequently used by people using your service?(Answered: 13 Skipped: 0)

- Word of mouth, friends bringing friends
- GPs and Community nurses
- Self-referral and referrals from health services.
- Referrals from other voluntary organisations
- Self-referral.
- primary healthcare (GPs and nurses)
- Primary health care.
- Probably half are referred by families and the other half by statutory services as listed above.
- Access Point
- Varied across all
- 30% referrals from Mental Health services (including Dementia outreach etc), 22% referrals from Social Prescribers or Care Navigators, 22% referrals from Social Services
- Word of mouth
- Self-referral and families

Q12: Approximately how many referrals do you get per month (on average)? (Answered: 13 Skipped: 0)

- Less than 1
- 15

- TBC
- The waiting list is currently close but whilst it was open we received 12-15 referrals per month
- 5.5 per month
- 6/7
- Statistics not available
- We do not need to work out this statistic
- 12-15
- 20
- An average of 7 referrals each month but this varies
- 6
- 1

Q13: Do you sometimes find it difficult to accommodate the needs of people being referred to your service? (Answered: 13 Skipped: 0)

Yes - often	4
Yes - occasionally	7
No	2

The comments from organisations indicating 'Yes' were as follows:

Sometimes people who are referred to us can be anxious and need more support than we are able to provide

- The referrals outnumber the interest in volunteering. This is why the waiting list has been closed until we can recruit sufficient numbers of volunteers to deliver the service.
- We are not able to offer immediate weekly visits to all, by volunteers (our first choice aim). We use staff-based services for challenging referrals, including urgent safeguarding, mental health, Alzheimer's, family conflict households, smokers, chronic and complex conditions, environmental and communication issues, unreliability of appointments due to frail health with frequent hospital admissions or similar.
- We are getting more people with significant memory problems who can be difficult to converse or engage with but who are very isolated. There are more referrals with mental health issues such as depression which are difficult for volunteers to cope with. It is difficult to match people who smoke and often people have complex health conditions which mean they are busy with appointments or don't feel well enough to meet a new person.
- People who have an alcoholic problem- can be very unpredictable and cancel appointments
Smokers - very few of our volunteers want to visit smokers
People who are 50 or less in age - we are not set up to befriend younger people. Our charity tends towards helping older people in this community. People who have mental health problems, learning disabilities, - We do not provide training other than for dementia and depression so these people can be difficult to individually match so we try to incorporate in our Moving On scheme. Our Befriending scheme is small and the training it provides is managed accordingly.
- The capacity - we do not have the resources (e.g. volunteers) to match all referrals with support. In the New Year we may consider revising our criteria to ensure we prioritise those most in need (at present it is anyone over 50). For those we can't match with a volunteer swiftly we try to signpost to other support or refer to call in time.
- On occasions people who are referred to the service (or their referrers) have unrealistic expectations about what the befriending service is able to provide. For example, people are sometimes looking for us to provide frequent/daily social contact with a befriende, such as

that provided by a paid personal assistant. We find it more difficult to match people who self-neglect or people with some mental health conditions with a volunteer although the majority of volunteers are willing to visit people with mild to moderate Dementia.

- It is hard trying to recruit volunteers and clients are often visited or telephoned by myself.

Q14: Approximately how many people do you support through your befriending service each month (on average)? (Answered: 13 Skipped: 0)

- 25-30
- 25
- 2000
- Currently 10
- 50
- 68 are in receipt of support during a month - 46 are matched to volunteers and 20 supported by staff.
- 53
- This statistic is not available. However, we can say we support 40-50 people every 6 months however some of these are the same people. The Moving -on scheme supports a different set of people, figures not available.
- 85
- 40
- 65
- 65
- 14

Q15: Does your befriending service have a waiting list? (Answered: 13 Skipped: 0)

Yes 8

No 5

Q16: How many people are currently on your waiting list?(Answered: 8 Skipped: 5)

- 12
- 30
- 2 people have been referred, with assessment pending, 10 more have been assessed and are not yet receiving much support.
- 24
- 6
- 60
- 15
- 5

Q17: On average, how long do they wait for a service? (Answered: 8 Skipped: 5)

- 1 month
- 2-6 months

- 1-2 months.
- 2 months
- There is no on average, very variable. Some go in hospital before matching and could be on the waiting list for a year others might be on for 4 weeks or less.
- Depends on the area and volunteer availability. For those waiting we try to offer signposting or referrals to telephone befriending during the wait period.
- 4 to 6 weeks but can be sooner if a suitable volunteer is available or if a staff member has capacity.
- Up to one month.

Q18: What is the main reason for operating a waiting list? E.g. shortage of volunteers (Answered: 8 Skipped: 5)

- Shortage of volunteers to match their requirements
- Shortage of volunteers
- Shortage of suitable skilled volunteers for a match, limits to staff time, and aims to avoid short term arrangements unless these are in best interests and choices.
- Shortage of volunteers, difficulty in matching where people have additional needs which need a volunteer with particular skills or aptitude.
- Shortage of funding, which restricts hrs co-ordinator works which restricts size of scheme. Sometimes shortage of volunteers can restrict but not always.
- Shortage of volunteers and availability of volunteers e.g. in a certain area etc
- The main reason that we have a waiting list is that we never have enough volunteers due to increasing competition in the voluntary and statutory sector for potential volunteers.
- Another factor is that the health of a large proportion of our service users is declining and unlikely to improve due to advancing age, therefore providing individuals with a befriending service can often be a long-term commitment for us rather than a short-term intervention. This reduces the capacity for us increase our turnover unless we are able to recruit more volunteers.

Q19: Do you have any paid staff involved in the delivery of your befriending services? (Answered: 13 Skipped: 0)

Yes	11
No	2

Q20: Please advise the hours per week of paid staff working in each of the areas below (Answered: 11 Skipped: 2)

Befrienders	Managers	Administration/Others
4	1	
0	35	0
0	17.5	35
16hrs x2 6.5hrs sessional	30hrs	4
12	26	21
12	26	21 hours advocacy
less than 25	trustees who are volunteers	volunteers
3	0	
21 includes some admin	28 includes some admin	Admin included in 'manager' above
20	6	0
	10	

Q21: In total, how many volunteer befrienders are actively involved in the delivery of your befriending services in a year?(Answered: 13 Skipped: 0)

- 2
- 35
- 2000
- Currently 10
- 20
- 50 over a year. New trained volunteers 25 per year plus fluctuating long term befriending of 39 to 47
- 40
- The Befriending scheme 22-30 volunteers
- 91
- 45
- 40
- 14
- 7

Q22: How many volunteer hours are given to your service each month by befriending volunteers? Please give an estimate if you don't have exact figures. (Answered: 13 Skipped: 0)

- 12
- Varies
- 2 hours per month per volunteer
- 4,000 hours in total
- 20
- 100
- 170 hours per month, (mostly as 1 hour weekly visits)

- 40
- We do not work out this statistic and cannot estimate.
- 721- figures from November 2018
- Approx 200
- 250 hours minimum but can be more.
- 70
- Between 4-5 per person

Q23: Do you make a charge for your services? (Answered: 13 Skipped: 0)

Yes 2

No 11

Q24: Please give as much detail as you can around the issue of the details of your charging rates. It would also be useful to understand how much of this work is paid for by Personal Budgets and how much by clients' own funds. (Answered: 2 Skipped: 11)

- We charge £1 each week. This goes towards snack and organised activities
- We ask for a contribution of £3.50 for luncheon group on Thursdays. We do have a fee waiving policy. Our BD4 Family sessions are £1 per person.

Q25: How is your service funded? Please give details about who funds it, any time limits on funding (E.g. Big Lottery funding until March 2019, BMDC contract with 1 year remaining) and, if applicable, what will happen when this funding ends (Answered: 11 Skipped: 2)

- We currently have a big lottery grant until end of 2020. We are working on an application to cover a number of our projects. We apply to small local funders for money towards trips and fun days
- The Silver Line is entirely self-funded
- Alzheimer's Society voluntary income
- Gems is currently funded by Bradford Council. This is due to end in March 2019- we are currently trying to secure further funding through Bradford Council new funding stream but haven't heard back yet. BD4 Family relies on various grant dependant schemes.
- Big Lottery Reaching Communities funding is due to finish the current three year term in September 2019. Applications are pending or planned to Big Lottery Partnership Fund and Masonic Charitable Foundation. Other sources are sought. If no suitable funding is found, then a very minimal service will be run by our core charitable funds to cover a wind down period. Referrals will be suspended, and participants informed, with support given for stopping of some befriending, if this is chosen. Other pairs will continue with minimal support - such as safeguarding advice and supervision only. We have planned for and handled this in the past, for 2-4 month periods at a time.
- Funded by the Big Lottery until end of August 2019.
- BMDC until March 2019, then BMDC til March 2021. BMDC does not meet full cost so extra funding is found from various trusts and charities
- Currently our Befriending service is funded by Bradford Council, the funding ends in March 2019 and we will be looking for more funding to cover this

- We were previously funded by the lottery to April 2018 for a traditional befriending service, we restructured following the end of this funding as the wellbeing team with the offer outlined in section 1. We currently fund core salaries and on-costs from core (generated from retail income and fundraising) however we are sourcing alternative funders as this is not a long term viable option.
- Lottery Reaching Communities fund (3yrs) until March 2020. BMDC funding until March 2021 Hopefully Bradford Council will continue (and increase) funding beyond 2021 as this will provide core funding to enable us to identify further sources of funding. In the future we may have to consider charging for befriending, but we feel that this would impact on the benefits of the befriending service by changing the mutually reciprocal nature of befriending.
- BMDC

Q26: We need to establish a cost of provision for befriending across the area. With this in mind please could you provide us with an estimate of the annual costs involved in the running of your befriending services using the headings below. (Answered: 6 Skipped: 7)

Organisation	Salaries, NI, Pensions	Staff and Volunteer expenses	Admin support	Utilities, phones, printing etc	Other costs	TOTAL
1	£2112	£50	£0	£20	£1680	£3,862
2	£42,000	£600	£1,200	£1,000	£2,500	£47,300
3	£39,000	£3,000	£1,500	£4,800	£1,700	£50,000
4	£38,776	£2,334	£1,376	£9,029		£51,516
5	£12,844	£7,180	£5,756	£218		£26000
6						£66,986

Q27: Are there any sectors of the community that you wish to reach but find it difficult to do so, or who are under-represented as users of your befriending service? (Answered: 11 Skipped: 2)

Yes 6
No 5

Q28: Have you noticed a demand or need for any type of befriending other than the one(s) you currently offer - and if so which? (Answered: 11 Skipped: 2)

Yes 10
No 1

Comments were as follows:

- Home visits Support getting out the house Support with shopping/appointments
- Face to face support
- More services in general, befriending or similar services are extremely popular but finding volunteers to deliver the service is extremely difficult, the demand cannot currently be met.
- Intensive mental Health

- Some people miss family, who are in distant locations, estranged or difficult to communicate with due to medical conditions and would like help contacting each other somehow. We have not explored this. Some people request services such as shopping support, which have a predominantly practical purpose, as well as a social element - we would not take this on as it is provided by home care companies as a chargeable personal service.
- Befriending for people with significant mental health problems and memory issues. Also, for people with special needs.
- Befriending for people with mental health problems and other issues less than 60 years old. However, can't really say this is a 'demand'. We occasionally get referrals and there does not seem many groups to support these people (or are suitable for) from age 18-60
- People Living with Dementia Older People Living with Mental Health
- Befriending needed for adults under the age of 65.
- Yes. People who at the End of life.

Q29: Could you share a short, anonymised, case study related to your befriending work, that demonstrates the difference it has made to the person being befriended? We are keen to find and highlight real life examples of the difference that befriending services like yours have on individuals. These will be used in the final report and presentation. You can email case studies to peter@pstoneconsulting.co.uk (Answered: 11 Skipped: 2)

Yes	7
No	4

- We are currently in the process of putting together service user case studies. We will be happy to share these ones they are complete.
- We are keen to pair individuals with shared interests and although lots of older people come into service because they are lonely so many have skills and interest that we feel need to recognise. Although we use volunteers, where possible (based on health, willingness and consent) we try to encourage those referred to us to be active and constructive in their own solutions. For example: A & B were both involved in our project Mission Possible aimed at veterans. A struggles with mobility and therefore leaving the house because of his confidence, he was referred from this project to wellbeing support as he was experiencing loneliness. A was an engineering the armed forces during WW2. B had also been involved in the Mission Possible project and has a background in engineering, B is in good health. Rather than following a traditional volunteer pair up model we gained consent and introduced the individuals who were both previous 'service users', who now meet up weekly and do activities together e.g. go to pubs, cafes etc. Both contribute and bring something to the relationship. Neither individual is labelled as a 'volunteer' or a 'service user' and they do meaningful activities that they enjoy. We feel that this is a far more sustainable model of facilitating long term organic relationships.
- Case study to follow by email

Q30: Are there any other befriending services/organisations in your area that you think we should

Yes	5
No	6

- Milan Centre, Victor St, Manningham
- Primetime Bradford

- We have occasionally come across similar services, including home visits or telephone calls, from different charities such as Carers Resource, Age UK, Marie Curie Hospice. We worked in co-operation with the small Wilsden Link Befrienders, run by the Wilsden Life Church, for some years, but our contact there is no longer involved now, so we are not aware if it is still in operation.
- Contact the Bradford Befriending Network the Alzheimer's has a fantastic model 'Side By Side' - although it doesn't operate in Bradford it would be worth replicating
- Bradford and District Senior Power. 7 John Street Bradford 1.
- The Dominican Association Bradford.

Q31: Is there anything else you'd like to tell us?

- Our befriending service benefits from our organisation also offering voluntary supported activities for older people with health needs. Many clients move between the two services as their needs change. Providing social company within a group is also a very effective way to meet social needs, there is a real need for an advocacy service as many services have disappeared. Boost confidence and preserve independence and safety.
- Carelink has been running successfully for 13 years.

APPENDIX THREE - SURVEY OF BEFRIENDEES



Befriending in Bradford - befriendees' survey

Introduction

Bradford and District Befriending Network is currently researching the impact of befriending for older people and wants to hear from you. As someone who has a befriender we are contacting you to see if you would tell us something about your experience and how much you have benefited from your involvement.

Please would you complete the survey below - it will only take around 5 or 10 minutes to complete and your responses will be saved at the end of each page (once you click 'Next') if you wish to complete it in stages.

Please can you complete the survey by no later than 23rd January 2019.

Thank you

About you

* 1. Your Contact Details

Your Name:

Email Address:

Phone Number:

About befriending

2. Which organisation or befriending project are you involved with?

* 3. Please indicate to what extent being involved with a befriending service has helped you:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
Reduce your sense of loneliness/isolation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 4. Please indicate to what extent being involved with a befriending service has helped you:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
To increase my feeling of being part of the community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 5. Please indicate to what extent being involved with a befriending service has helped you:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
To increase my sense of independence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 6. Please indicate to what extent being involved with a befriending service has helped you:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
To increase my desire/ability to socialise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 7. Please indicate to what extent being involved with a befriending service has helped you:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
Improved my physical health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 8. Please indicate to what extent being involved with a befriending service has helped you:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
Improved my mental health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. If you think befriending has helped you in other ways - or if you wish to provide additional detail please use the text box below.

The Future

* 10. Other than befriending for older people, that you are benefiting from, do you think there are any other groups of people who could benefit from having a befriender (for example, single parents)?

☐ Yes

☐ No

If yes please give details here

* 11. We are keen to speak to some people individually to allow us to create some examples of how befriending has helped them. Would you be willing to help in this way?

☐ Yes

☐ No

Please add any comments here

12. Is there anything else you'd like to tell us?

Thank you for completing this survey!

APPENDIX FOUR - SURVEY OF BEFRIENDERS



Befriending in Bradford - befrienders' survey

Introduction

As someone involved in delivering befriending in Bradford you may already know that the Bradford Befriending Network is looking at ways befriending can help to offset the potential impact of reductions to provision of services to older people in Bradford. As part of this work we are keen to assess the value that people participating in befriending projects (either as volunteers or members of staff) place on that involvement and the benefits they gain from it.

Please would you complete the survey below - it will only take around 5 or 10 minutes to complete and your responses will be saved at the end of each page (once you click 'Next') if you wish to complete it in stages.

Please can you complete the survey by no later than 23rd January 2019.

Thank you

About you

* 1. Your Contact Details

Your Name:

Your Email Address:

Your Phone Number

* 2. Are you a paid member of staff or a volunteer?

☐ Paid member of staff

☐ Volunteer

About befriending

3. Which organisation or befriending project are you involved with?

* 4. Please indicate to what extent being involved with a befriending service has:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
Increased your understanding of the issues facing elderly and/or isolated people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 5. Please indicate to what extent being involved with a befriending service has:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
Increased your skills and knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 6. Please indicate to what extent being involved with a befriending service has:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
Increased your friendships and social networks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 7. Please indicate to what extent being involved with a befriending service has:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
Increased your employability as a result of gaining new/additional skills and/or volunteering	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 8. Please indicate to what extent being involved with a befriending service has:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
Increased your physical health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 9. Please indicate to what extent being involved with a befriending service has:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
Increased your mental health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 10. Please indicate to what extent being involved with a befriending service has:

	Not at all	Slightly	Neither more nor less	Quite a lot	Significantly
Increased your confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. If being involved in befriending has helped you in other ways, or if you need to tell us more please use the text box below.

The Future

* 12. Are there any sectors of the community that feel would benefit from befriending services?

☐ Yes

☐ No

If yes please give details

* 13. We keen to include some examples of how being a befriender has helped. Would you be willing for us to contact you with a view to including some details of your experience of being a befriender?

☐ Yes

☐ No

Please add any comments here

14. Is there anything else you'd like to tell us?

Thank you for completing this survey!

APPENDIX FIVE – DETAILED SROI CALCULATIONS

Outcome	Measured	Indicators	Overall	Percentage	Reporting	Assumptions	Nett	Proxies	Ref	Value	Deadweight	Attribution	Impact
Changes observed		Evidence source	Number		Number			Equivalent financial value		Quantity x Eq. Value	What might have happened without the activity?	Who else would contribute to the change?	Quantity x financial proxy, less deadweight and attribution
Befriendees													
Reduced sense of isolation and loneliness, increased feeling of being part of the community	People feel more connected to their communities, less likely to move into supported housing as quickly, fewer visits to doctor seeking support	Surveys	1,631	83.01%	1,354	2% of people would move into local authority own-provision residential care	27	£1,105 x 52 = £57,460 p.p.y. (PSSRU: Costs of Social Care 2018)	PSSRU; 36; 1.3	£1,555,890	10%	10% might have accessed other solutions	£1,244,712
		Surveys	1,631	83.01%	1,354	25% of people would make 4 fewer visits to the doctor p.a.	338	£37.40 per visit x 4 = £149.6 p.p.y. (PSSRU: Costs of Social Care 2018)	PSSRU: 127: 10.3b	£50,635	0%	0%	£50,635

Outcome	Measured	Indicators	Overall	Percentage	Reporting	Assumptions	Nett	Proxies	Ref	Value	Deadweight	Attribution	Impact
Changes observed		Evidence source	Number		Number			Equivalent financial value		Quantity x Eq. Value	What might have happened without the activity?	Who else would contribute to the change?	Quantity x financial proxy, less deadweight and attribution
		Surveys	1,631	83.01%	1,354	5% of people would require 12 fewer prescriptions p.a.	68	£31 x 12 = £372 p.p.y.	PSSRU: 127: 10.3b	£25,182	0%	0%	£25,182
Increased sense of independence	People feel able to look after themselves more and require fewer support services	Surveys	1,631	62.50%	1,019	20% of people would require 2 hours per week care at average standard hourly rate for external providers of £16.04 p.h.	204	£16.04 x 2 x 52 = £1,668 p.p.y. (PSSRU: Costs of Social Care 2018)	PSSRU: 143: 11.5	£340,065	0%	10% might funds their own activities	£306,059
Increased desire/ability to socialise	People can access social activities of their own choosing and do not require access to more formal day care activities as a result	Surveys	1,631	66.99%	1,093	25% of people would attend local authority day care	273	£49 per session x 52 weeks = £2548 p.p.y. (PSSRU: Costs of Social Care 2018)		£698,724	0%	10% might funds their own activities	£628,852

Outcome	Measured	Indicators	Overall	Percentage	Reporting	Assumptions	Nett	Proxies	Ref	Value	Deadweight	Attribution	Impact
Changes observed		Evidence source	Number		Number			Equivalent financial value		Quantity x Eq. Value	What might have happened without the activity?	Who else would contribute to the change?	Quantity x financial proxy, less deadweight and attribution
Improved physical health	People feel they have better physical health as a result of their engagement in the activities	Surveys	1,631	48.40%	789	10% of people would make 4 fewer visits to the doctor p.a.	79	£37.40 per visit x 4 = £149.6 p.p.y. (PSSRU: Costs of Social Care 2018)	PSSRU: 127: 10.3b	£11,809	0%	0%	£11,809
			1,631	48.40%	789	5% of people would require 2 hours per week care at average standard hourly rate for external providers of £16.04 p.h.	39	£1,852 p.p.y. (PSSRU: Costs of Social Care 2016)		£73,098	0%	0%	£73,098
			1,631	48.40%	789	1% of people would move into local authority own-provision residential care	8	£1,105 x 52 = £57,460 p.p.y. (PSSRU: Costs of Social Care 2018)	PSSRU; 36; 1.3	£453,589	10%	10% might have accessed other solutions	£408,230

Outcome	Measured	Indicators	Overall	Percentage	Reporting	Assumptions	Nett	Proxies	Ref	Value	Deadweight	Attribution	Impact
Changes observed		Evidence source	Number		Number			Equivalent financial value		Quantity x Eq. Value	What might have happened without the activity?	Who else would contribute to the change?	Quantity x financial proxy, less deadweight and attribution
			1,631	48.40%	789	1% of people access PIP earlier	8	£57.30 pw daily living plus £22.65pw mobility standard allowances	CAB; average PIP claims	£32,819	0%	0%	£27,896
Improved mental health	People feel better and report fewer problems with mental health	Surveys	1,631	72.44%	1,182	10% of people would attend local authority day care	118	£32 x 3 x 10 weeks p.p = £960 (PSSRU: Costs of Social Care 2018)	PSSRU: 37: 2.3	£113,424	0%	15%	£96,410
			1,631	72.44%	1,182	10% to behavioural activation by a non-specialist	118	£186 p.p. for 12 sessions (PSSRU: Costs of Social Care 2018)	PSSRU: 39: 2.5	£21,976	0%	10%	£19,778
			1,631	72.44%	1,182	2% to LA care homes for long term support	24	£570 x 52 = £29,640 p.p.p.y. (PSSRU: Costs of Social Care 2016)	PSSRU: 36: 2.2	£700,393	0%	0%	£700,393
			1,631	72.44%	1,182	5% require 12 fewer prescriptions p.a.	59	£31 x 12 = £372 p.p.p.y.	PSSRU: 127: 10.3b	£21,976	0%	0%	£21,976
TOTAL													£3,615,032

Outcome	Measured	Indicators	Overall	Percentage	Reporting	Assumptions	Nett	Proxies	Ref	Value	Deadweight	Attribution	Impact
Changes observed		Evidence source	Number		Number			Equivalent financial value		Quantity x Eq. Value	What might have happened without the activity?	Who else would contribute to the change?	Quantity x financial proxy, less deadweight and attribution
Befrienders													
Increased your understanding of the issues facing elderly and/or isolated people	People are more easily moved into employment, increase self-esteem and confidence	Surveys	470	76.89%	361	Employment prospects improved; covered below							£0
Increased skills and knowledge	People are more easily moved into employment, increase self-esteem and confidence	Surveys	470	65.53%	308	Employment prospects improved; covered below							£0
Increased friendships and social networks	People feel more connected to their communities, fewer visits to doctor seeking support	Surveys	470	56.44%	265	20% of people would make 4 fewer visits to the doctor p.a.	53	£37.40 per visit x 4 = £149.6 p.p.p.y. (PSSRU: Costs of Social Care 2018)	PSSRU: 127: 10.3b	£7,937	0%	0%	£7,937
		Surveys	470	56.44%	265	5% of people would require 12 fewer prescriptions p.a.	13	£31 x 12 = £372 p.p.p.y.	PSSRU: 127: 10.3b	£4,934	0%	0%	£4,934

Outcome	Measured	Indicators	Overall	Percentage	Reporting	Assumptions	Nett	Proxies	Ref	Value	Deadweight	Attribution	Impact
Changes observed		Evidence source	Number		Number			Equivalent financial value		Quantity x Eq. Value	What might have happened without the activity?	Who else would contribute to the change?	Quantity x financial proxy, less deadweight and attribution
Increased your employability as a result of gaining new/additional skills and/or volunteering	People are more easily moved into employment as a result of the skills they gain	Anecdotal	470	44.70%	210	20% of volunteers move into employment	42	£72.40 p.w. JSA x 52 weeks; no assumption made of extra tax yield through employment	www.gov.uk	£158,189	2%	2%	£94,914
Improved sense of health and wellbeing (physical health components)	Fewer appointments with the healthcare system	Surveys	470	36.74%	173	20% of all befrienders make 4 fewer visits to the doctor p.a.	35	£37.4 per visit x 4 = £149.6 p.p.p.y. (PSSRU: Costs of Social Care 2018)	PSSRU: 127: 10.3b	£5,167	10%	10%	£4,133
Improved sense of health and wellbeing (mental health components)	Fewer appointments with the healthcare system	Surveys	470	50.38%	237	20% of all befrienders make 4 fewer visits to the doctor p.a.	47	£37.4 per visit x 4 = £149.6 p.p.p.y. (PSSRU: Costs of Social Care 2018)	PSSRU: 127: 10.3b	£6,820	10%	10%	£5,456
Increased confidence	People feel able to look after themselves/ require fewer support services		470	59.47%	280	Employment prospects improved; covered above	166						£0

Outcome	Measured	Indicators	Overall	Percentage	Reporting	Assumptions	Nett	Proxies	Ref	Value	Deadweight	Attribution	Impact
Changes observed		Evidence source	Number		Number			Equivalent financial value		Quantity x Eq. Value	What might have happened without the activity?	Who else would contribute to the change?	Quantity x financial proxy, less deadweight and attribution
Contribution of volunteer time	The value of volunteering to wider society	Surveys	440	100.00%	440	Volunteers supply an average of 5 hours' time p.p.p.m. @real living wage of £9 p.h.	470	£45 = 5 h.p.w. @ £9 p.h.	Real Living Wage Foundation	£253,800	0%	0%	£253,800
TOTAL													£371,173

Outcome	Measured	Indicators	Overall	Percentage	Reporting	Assumptions	Nett	Proxies	Ref	Value	Deadweight	Attribution	Impact
Changes observed		Evidence source	Number		Number			Equivalent financial value		Quantity x Eq. Value	What might have happened without the activity?	Who else would contribute to the change?	Quantity x financial proxy, less deadweight and attribution
Families and carers													
Nominal value for the family and carer of each befriender			1631	Assumed that 80% have a family member or carer	1,305			Value of 1 hour per week at £9 p.h.	Real Living Wage Foundation	£610,646			£610,646
TOTAL													£610,646

Outcome	Measured	Indicators	Overall	Percentage	Reporting	Assumptions	Nett	Proxies	Ref	Value	Deadweight	Attribution	Impact
Changes observed		Evidence source	Number		Number			Equivalent financial value		Quantity x Eq. Value	What might have happened without the activity?	Who else would contribute to the change?	Quantity x financial proxy, less deadweight and attribution
Agencies													
Nominal value of agency costs			1631	Assumed that some cost would be saved for 50% of befriendees	816			Value calculated at average cost of unqualified social worker cost at £44 p.h. x 1 h.p.w.	PSSRU; 139; 11.1	£932,932			£932,932
TOTAL													£932,932

Residual value													
	Full year	10% in Full year would be worth	Yr 1 out of scheme	Y2 OOS	Y3OOS	Y4OOS	Y5						
Value	£3,986,206	£398,621	£298,965.42	£224,224.07	£168,168.05	£126,126.04	£0.00						£817,484

1. Community Action Bradford & District (Bingley Office):

Community Action Befriending Project Final Report on Innovative Approaches Pilot: 'Cardigan House Friends Activities'

Summary of Innovative Approach Pilot

The challenge we faced was a need for supported social contact by lonely older people with low confidence and chronic health problems. They seldom get out, so miss out on past hobbies and groups. They are less aware of local opportunities and feel less engaged with their local community. Meanwhile, local community groups, housing associations and small charities want to increase participation in their centres, groups and events. We wanted to support local neighbours, carers and volunteers to be aware of and connect with each other more.

Community Action provide half of the Shipley Area Links Befriending partnership project, using befriending volunteers and staff to visit people who are referred to us. We work in the Bingley area, including surrounding villages of Cottingley, Crossflatts, Gilstead, Eldwick, Wilsden, Cullingworth and Harden. Community Action run some supported activities in our two Bingley community centres. Our Befriending project has many isolated older people waiting without befriending volunteers available to visit them. It was hoped to use supported involvement in group activities, to avoid dependency on one visiting volunteer or staff member.

Our target audience is people over 50 years of age who live alone and/or have a long-range health condition. We aimed to broaden contacts between older people, including befriending hosts, people on our waiting list, older volunteers needing support and day centre group attendees. We have made progress in publicising events and groups all around the area through a newsletter. We have used HPoC funds to harness our resources of staff, volunteers and local contacts, to organise, transport and accompany older people in outings and activities. The feedback from participants is appreciative and encouraging in social enhancement outcomes. Some people plan to continue attending activities after the end of this project.

What happened?

Identify isolated people who want to meet new people and/or join groups

- We used an activities questionnaire finding out interests and support needs.

Improve engagement in community by newsletters promoting different groups

- We produced newsletters, listing events at community centres around Bingley; some of which people attended.

Reduce loneliness by connecting old people, volunteers, carers and neighbours

- We asked our volunteers to network and support other pairs, unpaired individuals and groups, with some good results.

Prioritise outreach to people with chronic health problems, especially housebound

- We targeted letters offering extra support to priority people and supplied tailored support as needed.

Case Study examples:

Wurlitzer Organ Trip

Many people asked for support with musical interests and we arranged a trip to a Wurlitzer Organ Concert at Victoria Hall Shipley. This involved one staff and three volunteers, bringing 7 older people by minibus and car. One blind lady plays organs and wanted to attend the monthly Cinema Organ Society (COS) concerts but could not get there due to transport and confidence issues. Some had particular associations with Victoria Hall and/or live music. All had health challenges, including dementia and mobility (three used zimmers, one a wheelchair). We liaised with COS North, who were very encouraging and helpful. All had a grand day out and some went again the next month. "It reminds me of my mother playing piano for a singalong in our parlour" "I felt like I was back in Blackpool again" "Thanks so much for this once in a blue moon opportunity" "There is so much on my doorstep I didn't realise" "Meeting them (people in the Society) and hearing this performance inspires me – I can't wait to play these key changes too!" "If you decide to do monthly trips out let me know and I don't mind paying".

Table Top games in sheltered lounge

We had several contacts in a sheltered housing complex, including one we had helped to move there and two shy ladies fond of Scrabble. We organised a table top games afternoon with tea and cake each Wednesday afternoon for a month. One lady with dementia had stopped coming to our centre and stayed in her room, saying she felt too unwell to go out. With personal escort from staff she knew, she came out and enjoyed Scrabble games. With one to one encouragement, she also started attending weekly activities again. Others enjoyed cake and dominoes and mixing with each other and were encouraged to use the

lounge more generally. "I do like a game of dominoes!" "I am starting to make friends here now".

Evaluation of Innovative Approach Outcomes

Identify isolated people who want to meet new people and/or join groups

- The activities questionnaire went to 83 befriending list contacts and we got 24 detailed responses. 9 sent back forms. We interviewed another 15 more isolated people needing help to complete forms. We then gave invitations to the specific organised events. Some people who expressed interest were not actually able to attend as arranged. Cancellation rate is high, due to health conditions of these most isolated people. They appreciate the attention, even if they do not join a group as a result.

Improve engagement in community by newsletters promoting different groups

- We have done four newsletters so far, listing 39 events at 11 community centres in Bingley, Cottingley, Crossflatts, Cullingworth and Eldwick. We posted them to our mailing list of 83. We also handed out at our events, local library and GPs. We enabled 27 people to attend some of these events for the first time, especially Christmas events. We didn't get sufficient feedback from groups to judge the full wider impact. However, publicity is often not sufficient in itself to get attendance. The Christmas day events received high bookings and low attendance generally. We achieved attendance at these by visiting our people beforehand with specific written instructions, contact numbers, written instructions also given to identified trusted taxi drivers and organisers. The newsletter is also appreciated by some people who can't go out but like to know what is happening locally and do quizzes and read poems.

Reduce loneliness by connecting old people, volunteers, carers and neighbours

- We emailed 47 volunteers to appeal to them to network and support each other. Some suggested groups to promote in the newsletter. Several encouraged their befriending hosts, with 11 volunteers accompanying groups. Feedback confirmed enjoyment of activities and reduced isolation and loneliness as a result. 37 different older people have attended 13 different events so far. 17 attended more than once, which we encouraged, in the hope that some will go after the scheme has ended, for sustainability.

Prioritise outreach to people with chronic health problems, especially housebound

- We tailored letters and met with known contacts to offer extra support to priority people. The letters offered support to attend the community group activities listed in the newsletters, but with extra support as needed – e.g.

accompanied lifts to the Community Cinema in Bingley. They were also invited on specific trips we organised - to Tropical World in Leeds, to a Wurlitzer Organ Concert and to Cliffe Castle Museum reminiscence events. We risk assessed each trip and used a minibus with tail-lift and experienced staff and volunteers. We also ran a series of events at a sheltered housing complex, private to the residents, so not advertised. Some people known to us require specific support from staff and a few trusted volunteers. It was more labour intensive on staff time than we had planned.

Recommendations and next steps

- To continue with the newsletter as this has been proven to be beneficial to service and have attending events promoted through it. Continue to encourage volunteers to support their befriender to attend events of interest.
- Recommendation for wider stakeholders to make them aware of the newsletter and the option for them to use the information and to feed into it.
- Building links with partner community groups in our area, especially ones using our community centres.
- Next steps would be incorporate the newsletter into the befriending & activities programmes on quarterly basis giving information to service users, carers and the general public.
- Allocate this part of the project to other members of staff/ volunteer- e.g. publicity, admin, self-care.
- Continue to email volunteers with the newsletter and upcoming events.

Conclusion

This project has achieved good results as set out in our Outcome aims. We were very ambitious with the scope of the innovations. We created new information and publicity materials. We ran large surveys of contacts. We developed new partnership contacts and raised our profile. We ran many brand new activities and trips. Some were run as one-off, but half in weekly or monthly sequence. All were successful and appreciated. A few older people will add a new regular activity to their routines, with new friends. Some people who seldom ever leave home will have treasured memories. We have continued to build up the sense of community and trust between our service users, our staff and volunteer team in this Befriending and wellbeing team working through Community Action Bradford & District from Cardigan House, Bingley.

Joy Mills

Befriending Co-ordinator (Shipley Area Links Befriending – Bingley section)

joym@cabad.org.uk Tel: 01274 781222.

Community Action Bradford & District, Cardigan House, Ferncliffe Road, Bingley BD16 2TA

Appendix of Activities

November 2018

Activities supported:

10/11/18 and 23/3/19 – Cardigan House Coffee Morning

27/11/2018, 10/02/19 – Community Cinema, Bingley Arts Centre (staff lifts, vol accompaniment) 7 and 4

December 2018

Activities promoted in newsletter:

CH Sunday Lunch (monthly)

Cottingley Centre – computer club (weekly), Other CC events (regular/one-off)

Abbeyfield 'Winter warmer' free lunches (temporary December)

St Michael's Xmas Day lunch (one-off)

Cullingworth Village Hall Xmas Day lunch (one-off)

Central Hall, Keighley Xmas Day lunch (one-off)

Activities supported

5/12/2018 – Wilsden Wellbeing café (lifts, accompaniment) 3

12/12/18 – Cottingley Centre – lunch club (promotion) 2

16/12/18 - CH Sunday Lunch (promotion) 5

25/12/18 - Central Hall, Keighley Xmas Day lunch (booking, transport) 3

25/12/18 – Cullingworth Village Hall Xmas Day lunch (booking, transport) 3

25/12/18 – St Luke's Xmas Day lunch (promotion) 2

30/12/18 - Abbeyfield 'Winter warmer' free lunch (booking, transport) 2

January 2019

Activities promoted in newsletter:

Eldwick Memorial Hall – Thurs Over 60s Club, Janus Club (weekly), 8 other groups (regular weekly or monthly)

Eldwick Church Hall – coffee morning (Tues+Thurs ams), 4 other regular groups

Gilstead Ladies at Fern House (monthly),

Glen Troupers over 60s at Glen pub (weekly)

All together now Singalong (weekly Mon am Thurs pm)

Bingley Community Cinema (monthly)

Extra Activities in befriending letter:

Tropical world, Roundhay Park (minibus trip 30th Jan),

Wurlitzer concert at Victoria Hall Saltaire (2.30 10th Feb and monthly),

Cliffe Castle Museum, Keighley (monthly Fridays 10.30)

Shipley Glen Tram (any Sunday)

Salts Mill, Saltaire (open daily)

Activities supported

Falkland Ct tabletop games Wed pm 16/01/19, 23/01/19, 30/01/19, 6/2/19 (12?)

Tropical world, Roundhay Park (minibus trip 30th Jan), (6 participants +driver + staff

February 2019

Activities promoted in Newsletter

- Coffee & a Natter every Thursday 10.30 am until 12pm
Located at St Aiden's Church, Canal road, Crossflatts.
(all below at St Aiden's Community Centre by COPWA)
- Monday – Coffee morning: 10:00am-12:00pm.
- Crafts knit & natter: 2:00pm - 4:00pm.
- Tuesday – Bingo: 2.00pm - 4.00pm
- Wednesday – Entertainments: 2:00pm - 4:00pm
- Luncheon club the 1st Saturday of each month 12:00pm-2:00pm
- Film club the 1st Friday of each month 2:00pm - 4:00pm
Located at the Community Centre, St Aiden's square.

Activities supported

(Falkland Ct tabletop games Wed pm 6/2/19 (as above) 21

Wurlitzer concert at Victoria Hall Saltaire 2.30 sun 10th Feb, driver, 2 vols, 10

Cliffe Castle Museum, Keighley, Friday 10.30 15/02 - 4



2. CareLink:



An evaluation of a peer-to-peer approach to befriending older people

March 2019

Keighley & District Volunteer Centre
23 Temple Row
Keighley
BD21 2AH



Contents

Executive Summary of a peer- to- peer approach to befriending	2
What happened in the project	3
Evaluation of the peer-to-peer approach	8
Recommendations	9

Summary

This report is an evaluation of CarelinK Befriending Scheme's trial of utilising a peer-to-peer approach to befriending older people aged 65+ aimed at reducing loneliness, whilst at the same time increasing our capacity to meet increasing demand for loneliness interventions.

CarelinK befriending scheme is a member of Bradford & District Befriending Network and has provided 'formal' one-to-one, befriending support in the Keighley district, utilising trained volunteers for 13 years. In a climate of diminishing budgets and difficulty in recruiting sufficient number of volunteers, the long-term nature of befriending can be a challenge for befriending services, and it can be a struggle to keep up with demand. Whilst longer term, 'formal' befriending is particularly beneficial in meeting the needs of those who are frail and housebound, this trial of peer-to-peer befriending looks at whether linking individual service users together on a peer-to-peer basis is a more effective and sustainable approach to reducing loneliness for some lonely older people.

Key Messages

- People between the ages of 65 and 95 have wide ranging needs, therefore a range of approaches to tackling loneliness and social isolation are necessary in order to meet individual needs and circumstances.
- Peer-to-peer befriending can be particularly effective at helping people to get back on track and reconnect with others following a temporary set-back such as bereavement, a period of ill-health or relocation to a new area.
- This approach can be an effective addition to 'formal' befriending provision by enabling befriending services to provide temporary support to 'move people on' and free up volunteers and staff to meet the needs of frailer older people.

The project - LINK-UP a peer-to-peer approach to befriending

CarelinkK trialled LINK-UP, a peer-to-peer befriending approach aimed at people over the age of 65 living alone in Keighley and surrounding villages. The aim of LINK-UP was to reduce loneliness and isolation by tailoring the service to meet individual needs and interests and provide an opportunity for participants to develop meaningful and sustainable friendships. People identified as experiencing loneliness and social isolation were invited to register an interest in being matched and introduced to another individual in similar circumstances based on shared interests and aspirations. Information about LINK-UP was distributed to 50 older people already involved with our befriending scheme and our social day group and the project was also publicised in the local press. In order to meet their individual needs, people were asked to state how they would prefer to be linked with another individual i.e. as pen-pals, for phone chats, by email, or to meet another or others for a cuppa and a chat.

A total of 19 people responded, of whom, 16 people registered an interest in being involved in the project. People who registered an interest in being involved were visited by a project worker to assess their individual needs and aspirations and carry out a risk assessment. The assessment visit was a means of getting to know individuals and their circumstance in order to facilitate the matching/introduction process. It also enabled us to identify people for whom we felt the service was inappropriate so that we could signpost them to other services or activities better suited to their needs.

Eight people in total went on to be matched and linked up. Two of these were ladies who were living in the same sheltered housing scheme and were introduced to each other by their regular befriender from CarelinkK. Another, a gentleman living in central Keighley, was matched up with a housebound lady and visited her at her home. Four ladies attending our social day group were linked up outside of the social day group and began meeting up for lunch each week in a local café.

NUMBER OF PEOPLE INVOLVED	Number of people
Total number of responding to request for expressions of interest in being involved peer-to-peer befriending (including positive and negative)	19
People who went on to register an interest in being involved in the project	16
Number of individuals matched together in peer-to-peer befriending relationships	8

RESPONDENTS CHOSEN MODE / MODES OF SOCIAL CONNECTION (more than one may be applicable)	Number of people
Meet someone 1-1, face to face	14
Meet in small group	12
Contact via phone chats/befriending	2
Contact via emails/befriending	3
Contact as pen-pals	1
Other method	0

SOURCE OF REFERRALS	Number of people
Self-referral	16
Social Prescriber	2
Social Worker	1

AGE RANGE OF REFERRALS	Number of people
65 to 69	1
70 to 79	4
80 to 89	8
90+	3

Case study - Janet & Kathleen

Janet was a relatively newish attendee at one of our social day groups, having been referred to us by the Community Mental Health Team. Although she lives with her husband of 50 years, Janet was interested in being involved with LINK-UP as she and her husband have a difficult relationship because of his domineering nature. Spending most of her time with him was affecting her confidence and self-esteem and she had begun to suffer from anxiety and low mood. Despite her lack of confidence Janet was keen to get out of the house and develop her social support networks. Janet aged 78, was matched up

with and introduced to Kathleen, an 82 year old widow who is an attendee at our other social day group. Both ladies were interested in meeting someone in a café for a cuppa and chat and we felt that Kathleen's sunny, caring nature would help to increase Janet's confidence and self-esteem. Janet and Kathleen look forward to meeting each week for lunch in Morrison's café and have now been joined by two more ladies from our social day group. The four ladies continue to meet up independently without the need for support from the project. Quote from Janet: ***"I am so pleased to have met these ladies, it's the highlight of my week. This has been really good for me. I had got into a bit of a rut at home but now I feel as if I have a new set of friends."***

Case study - Stanley & Ruth

Stanley is an 89 year old widower and has been involved with our befriending scheme for several years. He is a sociable, friendly man but often feels lonely. Despite him joining in with some of the social activities at the sheltered housing scheme where he lives, he is sad that none of the other residents call to his flat to see him, and he seldom has visitors apart from weekly visits from his befriender from Carelink and the Community Matron. Rather than being alone in his flat, Stanley goes out on his mobility scooter each day hoping for the opportunity to have a chat with someone. ***"It would be nice if I had someone... somewhere I could just pop in for a chat and a bit of company. Weekends are the worst. So lonely if you don't have much family."*** We introduced Stanley to Ruth who is also involved with our befriending scheme. Ruth is an 87 year old widow with various long term health problems which restricts her ability to get out and about. Her son is quite supportive but cannot visit so often because he lives some distance away. Ruth is a friendly lady with lovely sense of humour, and we felt that she would be a good match for Stanley because she needed someone who would be able to visit her at home and she lived within easy travelling distance for Stanley on his mobility scooter. Stanley was delighted to be introduced to Brenda and looked forward to visiting her for an hour or so each Sunday. He told us ***"You couldn't have matched me with anyone better, we've even got the same sense of humour. She's a lovely lady is Brenda. It's given me a real boost."*** Although the relationship started well, against our advice Stanley began to visit Brenda without phoning first because he wanted ***"to surprise her"***. Also, his visits had grown longer than the suggested hour or so. Brenda informed us that over recent weeks, Stanley had overstayed his welcome and he seemed oblivious to her hints that it was time for him to leave, ***"He is a nice man and it is nice to see him but some days all he talks about is cricket! I can't cope with him staying for the whole afternoon. Sometimes I don't feel well, and I just need to rest."*** At this point Brenda's health declined further and she was admitted to hospital and wasn't well enough to return home so moved into a care home. Brenda was pleased to

see Stanley when he paid her a couple of short visits whilst she was in hospital, but he no longer visits her. Stanley has reverted back to having visits from a trained befriender and is being encouraged and supported to access group activities.

EVALUATION OF THE PEER-TO-PEER APPROACH TO BEFRIENDING

This small scale project has produced some positive outcomes for a number of individuals as well as for Carelink.

Adopting a peer-to-peer approach to befriending has been particularly beneficial for a group of four ladies who were linked together for companionship and social support. Each of the ladies were assessed as having the potential to develop and maintain social relationships with their peers with minimal support from a project worker. All four ladies are reasonably mobile, three of them are widows and two ladies in particular have limited support networks due to the loss of family and friends. They have since gone on to become firm friends, meeting up each week for lunch and have developed their own sustainable, mutual support network. Two of the ladies also continue to attend our social day group, whilst the other two have moved on no longer feel the need to attend our day group as a result of peer-to-peer befriending.

Peer-to-peer befriending was also effective in reducing loneliness for Freda and Mary who live in a sheltered housing scheme. Freda, who feared rejection because of her dementia, kept herself to herself and lacked confidence to join in with activities at the housing scheme. With her permission, Freda's 'formal' Carelink befriender matched her up with resident Mary who was experiencing loneliness and low mood. Although Mary and Freda knew of each other, they had had little direct contact until they were matched up. Mary became very supportive towards Freda and was instrumental in increasing Freda's confidence and encouraging her attend activities along with herself and other residents.

People registering an interest in taking part in the project appreciated being offered a choice over the mode of social contact to suit their individual needs (e.g. one-to-one, small groups, phone calls, emails etc.) Whilst there was a clear majority of people wishing for one-to-one contact or meeting up in small groups, several people with computer skills also welcomed contact via emails. Interestingly, the majority of those with a preference for meeting in small groups, were not interested in being signposted to other existing, established social groups or activities.

We found that the peer-to-peer approach was inappropriate for some people. In order to ensure the safety and well-being of individuals, 'formal' befriending provided by a trained volunteer or paid worker may be more appropriate for some older people who are emotionally or physically frail. For example, two people who were interested in participating in the project were well known to us as they each had been receiving 'formal' befriending support for several

years. Each had been matched with a member of staff rather than a volunteer because of long-term mental health issues and we were concerned that they may place heavy demands on a peer-to-peer relationship. Since registering an interest in being involved in peer-to-peer befriending, sadly one of the men has committed suicide whilst the other continues to receive 'formal' befriending support from a member of staff.

Other issues which affected our ability to match people up individually or in small groups included changes in health, admission to hospital and having access to appropriate transport.

Recommendations

- Befriending is a low cost effective loneliness intervention and the overall potential savings far outweigh the costs of delivering befriending.
(Social Care Institute for Excellence, 2012)
- People between the ages of 65 and 95 have a wide range of needs, therefore a range of approaches to tackling loneliness and social isolation are necessary in order to meet individual needs and circumstances.
- A peer-to-peer befriending approach can be particularly effective at helping people to get back on track and reconnect with others following a temporary set-back such as bereavement, a period of ill-health or relocation to a new area.
- This approach can be an effective addition to 'formal' befriending provision by enabling befriending services to provide temporary support to 'move people on' and free up volunteers and staff to meet the needs of frailer older people.
- CarelinkK Befriending Scheme aims to incorporate peer-to-peer befriending into our befriending service in appropriate cases in order to improve outcomes for individuals as well as increasing our potential capacity.

3. New Horizons at Royds:

Executive Summary of Innovative Approach

The challenge of this project was to create a new innovative approach in order to tackle isolation and loneliness among the elderly, with our target audience being anybody over the age of 60 from any cultural or ethnic background living with our locality and geographical coverage. This is a problem that groups have been tackling for many years and the creation of new ideas is integral to move befriending forward. Research has shown that befriending projects help “older people to re-engage with the community and their external environment.” (Cattan, 2008)

Our project plan was two-fold. Firstly, we wanted to offer group befriending in several care settings and extra care housing. This approach not only tackles isolation and loneliness with visits from a befriender but also brings together like-minded people within the familiar communities in which they are based in a circle of support. This then allows our befriendees to foster friendships and create social contacts within the settings in which they are based. We wanted to offer this social and familiar service to support the research that the chance “to engage in ‘ordinary’ conversation,” is “unique compared with other statutory and voluntary services where the emphasis is on dealing with problems.” (Cattan, 2008) Our second approach was to develop partnerships with local schools and youth groups within our locality in order to deliver our *Precious Postcards Project* where local children design and send a postcard to lonely and isolated people in order to build measured conversations that will benefit both parties. The cards could be sent for special events or in order for the elder party to pass on knowledge from their working life or an education in ‘Make do and mend’, a lost skill in modern throwaway society. The young person can also pass on knowledge relating to the new technological world; using a smartphone, for example. New Horizons at Royds covers a number of areas across Bradford South through our befriending, but the areas we were introducing our new innovative approaches were Avery Tulip Court at Low Moor, Earlswood at Wyke, Woodside Court in Woodside and Beeches Care Home in Buttershaw plus a range of schools and youth groups from across the BD6 and BD12 localities.

Our aims were three-fold. Firstly, to build the levels of social contact that older people were having in order to help them feel less isolated. Our second aim was that we also wanted to build mutual support amongst the befriendees so they could befriend each other and are then less likely to use other services because they feel they already receive appropriate support from each other.

Finally, we wanted to improve understanding between children and older people about their own respective lives building a bond of education between them. Numbers started small as is often the case with innovative approaches, as those involved are often unsure of new approaches but as the project moved on so did the numbers and towards the end, we have been engaging with over 60 different older befriendees across the projects.

The new projects have already begun to be incorporated into our mainstream delivery, with postcards still being sent and our circles of support continuing to run weekly. However, we would like to create a service that is transferrable to other groups and replicable in other localities. The project is currently run by staff members, but we would like to introduce volunteers to learn the process in order to serve larger numbers within our already established circles of support and to potentially offer the service to other groups within our area thus building our reach.

This project has allowed us to trial two innovative befriending models where our main model has been one-to-one befriending, and the results have shown that both are attractive to befriendees.

We would hope that, as the consequences of loneliness and isolation on health and wellbeing are more understood, that funders and clients see the need to support even more innovative befriending approaches so that more and more need can be addressed in all age groups. We are very grateful for the opportunity to have explored these two pilot schemes.

Description of what happened in the project

With all our befriendees, we will always do a baseline assessment to establish their wellbeing and how they may be feeling at present. There are two assessments we use. Firstly, we use our Pre Evaluation Form which consists of simple numerical scales for the befriendees to answer. This then gives us an indication of how they feel in regard to their loneliness and isolation. This is followed up with a Post Evaluation form which includes both numerical scales as well as simple 'Yes/No' boxes to tick. We also offer the opportunity on the Post Evaluation Form to add any 'other comments'. Another form of baseline evaluation we use is our 'smile-o-meter' which, using a simple scale of smiley faces, allows the befriender to indicate their feelings before and after a session. This is an evaluation exercise that works well across the board as the symbols are recognisable and can be used by people of all abilities.

Precious Postcards was started with the intention of building relationships and understanding between older and younger generations linking lonely, isolated elderly people with school children and youth groups via a Precious Memory Postcard. We first helped some of our elderly befriendees to create a postcard about themselves and their work. This offered them a chance to tell stories about their life, something they may not be able to do these days with no one to tell. These postcards were then delivered to various youth groups and the children were encouraged to write responses including questions about the postcards received. We started this project with a ballet school in Clayton (RJS Ballet School) who wrote their responses. Over a period of time different postcards were sent to celebrate different events including Christmas cards. The writing of Christmas cards was important because when one becomes isolated and lonely it is often due to the passing of friends and relatives, so Christmas cards aren't often received. The effects of our Precious Postcard are documented in the accompanying case study.

The Circle of Support approach which saw us use befriending in larger groups offered a more holistic approach to befriending where rather than focussing on personal dilemmas, conversations were more rounded and topical leading to discussions to the outside world. When one is isolated and lonely, conversation about current affairs is often restricted to 1-to-1 chats with a carer or traditional 1-to-1 befriender, however a group approach builds the opportunity not only for open discussion but also has the added benefit of building contacts within the Extra Care communities meaning that conversations can carry on after the befriending staff have left. This approach helped us to achieve our aims of allowing older people the opportunity to get mutual support by meeting together, which in turn could make them less likely to use other services as they feel they are getting appropriate support through the provided groups. We worked closely with four Extra Care communities: Woodside Court in Woodside managed by Anchor Hanover Housing Association, Avery Tulip Court in Low Moor managed by Housing and Care 21, Earlswood managed by In Communities and Beeches Care home in Buttershaw managed by Victorguard Care. Below is a study of Mr and Mrs G who have attended some of our circles of support: Mr and Mrs G had formally enjoyed an active social life, often visiting their local club, the "fat pot". They recently had to sell their home in the Royds area and move into sheltered accommodation which is also in the same locality. Their move has resulted in them experiencing feelings of loneliness and isolation even though they live amongst a community, they miss their former neighbours.

They have regular one to one visits from New Horizons at Royds which they enjoy, and on discussing with their daughter have proved to be invaluable. From the one to one sessions they have developed the confidence to join our circle of support befriending group and are enjoying the gentle exercise sessions within their own surroundings. As well as the exercise sessions, they are also developing new friendships and reminiscing around old Bradford especially their old social meeting places and schools. This has enabled them to re-engage and become part of their new community.

The hard work that our qualified befrienders have undertaken with Mr and Mrs G has been a resounding success. Building confidence for them in their new home and allowing the family to know that there is a supportive network around them. During a recent visit, the befrienders were invited to attend the Diamond Wedding celebrations for Mr and Mrs G. It is an honour for them to be invited to celebrate with them and their family.

Case Study 2 – Mrs J's journey

Mrs J is fiercely independent and refuses any form of regulated care or support, apart from a regular visit with the community matron and her daughter in law whom lives in Lancashire she has no social connections whatsoever.

The community matron had contacted our service and enquired about home visiting for Mrs J so we contacted her daughter-in-law and established a basic background including likes and dislikes and a brief history. We were told that it may take us up to three visits to successfully get over the threshold, so how surprised were we to gain entry on our first visit, with a fresh bunch of flowers in hand and smiling Diane. Mrs J reminisced about her previous work and her fond memories of Skipton as a child. She said she was looking forward to seeing them again and would have the kettle on for their next walk down memory lane.

Our work with Mrs J continued and now she has moved into sheltered housing we continue to work with her there. Her development has leapt forward due to being able to join in the Circle of Support sessions where she has been able to meet other like-minded people. She was apprehensive at first due to her previous social anxieties but has not looked back since joining in her first session.

Our work with Mrs J has confirmed to us the importance of befriending and how even in cases where there may be social obstructions, there is always a way to help.

The effect that our groups have on the family and extended family of our befriendees is also crucial to how we work. By engaging with the older person, it alleviates the pressure on their immediate family. Below is a testimony from the daughter of one of our befriendees:

'Mum has suffered with Dementia for ten years and was diagnosed with vascular dementia 5 years ago. As a family we were struggling with day to day care for mum, we contacted social services who arranged for an agency to call on mum to assist with washing, dressing meals etc. At this time mum was spending the majority of her time on her own during the day.

One tea time I received a call from Kay asking if mum would like to attend their Group Befriending. At first I said no I didn't think mum would fit in. How wrong I was. Circle of Support gave mum a new lease of life, she enjoyed the company, the entertainment, the lovely fresh fruit, but most of all the friendship and support she has received is second to none.

Mum has enjoyed the music and dancing and mum can remember and enjoy songs from her childhood which are untouched by her illness. We would not have been aware of this without the circle of support involvement. The singing has been a main factor in keeping mum happy and at

times when distressed singing has helped manage her well-being. Even though mum cannot remember attending befriending group she was always contented and happy on her return to her flat, which gave her a feel good factor.

On Kay's advice we arranged for mum to attend day centres four days a week. Each especially selected for mums needs and with Kay's recommendation.

Over the last five years mum dementia has deteriorated but through each step Kay has been able to guide us through the next stage and advise what further care is needed.

Without Kay's guidance and support we would have not been able to keep mum in her own home as long as we have done.

I would like to thank Kay and

everyone at the Circles of Support Befriending for the support and kindness they have shown my mum. Without them the last year would have been a struggle for all our family and has given mum a better quality of life.'

Another befriender family member had this to say:

'New Horizons Group Befriending has been an absolute godsend to me and my sisters. I feel so lucky to have found it. I know our mum is left in a safe, secure and friendly environment and all her needs are cared for. It has a huge impact for myself knowing my mum thoroughly enjoys every minute she spends with the people and staff and to know she recognises faces is fabulous as it is only once a week and such a shame it can't be more often. Myself and family are so grateful to the time and effort the staff put in. I would certainly recommend New Horizons to all, my mum with dementia has the time of her life.

Thank you to all.'

Tracy Gothard 49

The work we do also has an effect on our many volunteers who help us to run our successful services. Their testimonies can be seen below:

'I have been asked to write about what it means to me to be a volunteer worker at Group Befriending at Woodside. It means so much to me, it's hard to put into words. First of all, the staff are so kind, they have a way of making me feel so welcome, and even the small amount of help I give is important. What it means to myself, it gives me a reason, to go out and be involved with people which I love. Also makes me do something worthwhile in a day which is so good for my wellbeing and brightens my everyday life. I would recommend to this work to everyone.'

84yrs.

'New Horizons Group Befriending at Avery Tulip Court is a wonderful organisation. I have done voluntary work for different organisations for nearly twenty years, and this is the one for me, we do not ask for anything, but you are made to feel special, I feel ready and of use to people, everybody is caring and lovely. Thankyou'

78yrs

Evaluation of Innovative Approach

Our outcomes for the group befriending projects were to encourage older people to have increased regular social contact and feel less isolated as well as providing the opportunity to get mutual support. These outcomes were achieved through attendance of the sessions because by meeting as a group they are instantly making social contacts within their Extra Care communities. This then provides them with friendships that can be nurtured after staff members have left meaning that befriending is providing them with long term permanent solutions. This social contact will also provide the mutual support that is required to limit their need for other services. The use of support circles allows befriendees to educate each other as well as providing a safe space for open discussions about different topics and current affairs. One lady at Beeches Care Home enjoyed sugar craft as a hobby in her younger years and has continued to this day. She led a demonstration for the group to show them how it was done, passing on her knowledge. They were then able to discuss and engage in the activity. Other successful activities have included sensory reminiscence using flowers, leaves and other natural elements in order to stimulate memories of nature and gardening from their younger years, this activity was also done using a dog as the sensory element. These activities work well as they open up memories and allow the groups to tell stories of their past, whether a tale about a pet or the time they visited a farm or zoo.

The discovery or rediscovery of these certain skills were an additional outcome to our approach and certainly an added bonus in terms of results. Not only had we brought people out of isolation and in to a situation where they were able to socially interact, but we had also helped them to re-engage with hobbies and skills that they may have enjoyed in earlier years. This was evident with the lady who taught the sugar work, but genealogy was also an activity that was requested by numerous befriendees who wished to re-engage with it as a former hobby.

One of the main lessons we learnt was to listen to our befriendees' ideas for a session. Their skills and knowledge helped to shape many of the activities and discussions held within our support circles and they were able to educate us as much as the other way around. The ability to educate provides a sense of usefulness for an older person so using their skills to run an activity or discussion is as useful a part of befriending as just talking and listening. We also found that because a group are all a similar age, they do not all share the same interests. This initially sounds like a negative aspect of group befriending but in fact is a positive as it means that each befriender has something different to bring to the sessions. If we were to repeat this project we would try to deliver it in a more measured manner.

Andrea Dobson, manager of Woodside Court had this to say about the project.

'The Wednesday befriending group provided by New Horizons has been invaluable to the residents of Woodside Court. They enjoy the variety of the sessions from armchair exercises, laughing yoga, giant snakes and ladders games and quizzes to name a few. They look forward to the ladies attending every week and the different sessions boosts their confidence and I know they have such a good time because of the laughter I hear from my office.

The sessions are stimulating, fun and interactive. The sessions are also inclusive to all residents so those with disabilities can also join in which makes a real difference to their wellbeing. It promotes interaction and some residents that don't necessarily know each other can socialise in the group.

The group has attracted a really good number of residents and has grown since October. I would say two thirds are regularly attending now and this is the most successful group we have had at Woodside Court, so this speaks volumes for their enjoyment.

Thank you for what you do, and I appreciate all your involvement.'

Kelly Halpin, the scheme coordinator for Ormond House gave this testimony about the befriending service we provided.

'Royds befriending service holds seated exercise classes here at Ormond house every Tuesday as part of their befriending group. This has had a great impact on our residents.

Residents enjoy the class that is delivered, and I have had nothing but positive feed-back from all who attend.

They say that it gets them out of their flat and helps them make new friends. They enjoy the social side which in turn alleviates isolation. It gives them exercise that is tailored to their mobility and this helps them keep fit and mobile.

One resident said. It helps gets my arms and legs moving, makes me feel good about myself and I enjoy that other people are doing it with me. I just wish we could have the group daily.'

The Precious Postcard Memories project aimed to build a social bond between younger and older generations. The objective, as well as tackling loneliness was to bring about an improved level of understanding between generations. Offering the opportunity for the older people to educate either about their work lives or perhaps ideals they had to live by in their younger years (make do and mend, share a skill) automatically brings them out of isolation and allows them the opportunity to feel useful. The lives younger people lead in the contemporary world may seem alien to a person over the age of 60 so it was important for us during the project to bring about a level of understanding that way also. Indeed, in one situation, a group of older befriendees were shocked to discover you could take a 'selfie' on your mobile phone. Helping to educate them on contemporary issues begins to break down isolation as it helps them to feel in contact with the world outside of Extra Care Housing.

The receiving of correspondence from younger people within our chosen schools and organisations were integral in helping our befriendees to feel less lonely. Whilst the older befriendees were the main target for the Postcard project, we found that the children were heavily invested in the project. Indeed, we found that the bond also stretched to the families (mums, dads and siblings) either encouraging them to help with the postcard or more simply building contact between generations within the family.

Recommendations and Next Steps

Going forward we are looking to how we could create a funding model to keep the project moving forward. Whether that would be to look at where we could draw funding from to continue our work or whether we could create a scheme where families of older people can pay a premium for the group befriending service in order to alleviate the loneliness and isolation potentially experienced by their loved one. Some families are distant and are unable to visit so the opportunity to know that someone is visiting them and enriching their lives may be a comfort. With the Precious Postcard project, we look to get more schools and organisations involved but would also like to engage families of the younger person which gives the bond a more well-rounded structure. This may work better for befriendees who miss their family as a whole.

Our work on this project has shown us that by achieving our aims we are potentially alleviating the stress on other services potentially on offer to our befriendees, whether provided by GP practices or the NHS. Often, an older person may try to contact care practices for a way to deal with loneliness either in medication or maybe even just the chance for conversation. This then draws practices away from the work they could be doing elsewhere. Investments in both group befriending and projects similar to Precious Postcards could alleviate this pressure as by dealing the isolation and loneliness felt by elderly people it may make them less likely to feel dependant on other stakeholders.

Whilst we have already continued our approach into our mainstream delivery (the Circle of Support groups are still meeting), there are a few ways that we could further incorporate the new innovative approaches. As specified before, we desire to create a service that can be moved to other groups and that can be replicated in other locations. In order to achieve this, we need to step back and observe what we have done, what worked and what didn't and create a model that observes a more measured approach using highly skilled volunteers. This model can then be used as a plan that can be taken by volunteers into other practices and localities.

We also want to further our knowledge and build our contact list of youth groups and schools willing to partake in the *Precious Postcard Project* so as to offer more dialogue options for the elderly befriendees.

Organisation Contact Details

Kay Wright

Service Manager

New Horizons at Royds

Tel: 01274 355600

E-mail: newhorizons@royds.org.uk

kay@royds.org.uk

Web: www.royds.org.uk

4. Bradford and District Live at Home Scheme:

Bradford and District Live at Home Scheme Innovative Approach to Befriending.

Julie Maude Scheme Manager

Unit 76b Carlisle Business Centre

Carlisle Road Bradford

BD8 8BD



Executive Summary

Our Project challenged us to find innovative ways in which we could befriend/support older people in Great Horton, Lidget Green, Wibsey and Clayton.

Bradford Live at Home Scheme has been supporting older people in the community for 25 years, during this time we have seen a change in the way older people want to live their later years and how the traditional day centre style support and one to one Befriending in the home doesn't suit everyone.

We consult with older people in the community on a daily basis and the feedback we receive is that they want something different. In an ideal world the older people in the community want a choice of services, they want control over where they go, what days they go and what time they get there and the flexibility of dipping in and out of activities and services to fit around other commitments.

The frailer members in our community enjoy the company of a befriender one a week but feel it doesn't go any further and for the rest of the week they still feel isolated, as part of our project we will establish the barriers that older people are facing that prevents them from coming to activities in the community.

The active older people in our community are very keen to maintain links in the community and attend activities that they can dip in and out of. Not all of them want to join a building based activity e.g. coffee morning or lunch club, but would defiantly be interested in exercise classes, day trips, short breaks and friendship groups and volunteering opportunities.

All the older people in our community fed back that if they ever couldn't attend activities in the community due to ill Health or another reason they would like someone from our organisation to visit them until they were able to return.

All older people fed back that it would be nice for them to be able to contact one single place if they have any worries, concerns or need help in finding information.

The evaluation of the feedback we have received has informed us of how we can deliver our innovative approach to supporting all older people in our community.

Our Aims-

- Support and Coordinated Volunteer and User Led Community Based Activities.
- Hub Based Outreach Support and Befriender Led micro clubs.
- Provide a telephone support service.

Our Objectives-

- Every Older Person to receive a home visits by an outreach worker so they can tell us what they really want, establish any barriers they are facing in attending activities they would like to join.
- Create a plan tailored to the individual to support them to achieve the things they have identified that will support them to enjoy a fulfilled life.

- Create opportunities for Older People to meet other Older people with the same interest and hobbies of their own, creating small friendship groups. Our scheme will coordinate these.
- Set up Volunteer Led activities and local business opportunities, e.g. Pie and a Pint in a local pub, to help sustainability.
- Provide a Bi- Monthly Newsletter for all members of our Scheme ensuring that partner agencies and other Organisation have the opportunity to promote their services.
- Every Older person receiving one of our services will be asked if they would like to join our telephone support service, this service offers immediate support if an older person needs help. It is run by one of our office staff. Every phone call is triaged, if a member can be supported over the phone it will be dealt with immediately, if it's a more complex case then the office will make a call to one of our outreach workers who will go visit the member at home.

Support and Coordinated Volunteer and User Led Community Based Activities

Our Scheme has set up the following micro clubs which our Volunteers are taking the Lead on:

- "Lidger Lunchers" - Meet at the Flying Squirrel public house at various time throughout the month, this group is for people who like to eat out and make new friends. The volunteer taking the lead on this group often takes a quiz along. On the last trip to the Flying Squirrel we had 17 people attending.
- Clayton "Walk About" - meet at Clayton Methodist church every Thursday for a walk around various places in Clayton and then back to our Hub for tea and biscuits.
- Wibsey Walkers - Meet every Tuesday and set off from Wibsey library at 10.30am, the walks are different every week, and after we go back to the Wibsey Hub for tea and biscuits.
- Out and About Club - Aimed at all Older People who would like to visit places they would not normally be able to go themselves. - Our out and about club goes on different days of the week to give people a fair chance of been able to go depending on their personal situation. Our Out and About club have visited the following places. Meadow Hall, B and M Industrial Museum, Home Bargains, Matalan and Salford Quays and 68 people have attended these day opportunities.

This has been a huge success, the feedback we have received from members has been overwhelming- Quotes from members

"Barbara said it has given her something to look forward to"

"Bob "It has been a really big treat for me to visit the Industrial Museum and have a go at printing my own book mark "

"Hazel "I never thought I would ever get to see Meadow Hall, I've had a Lovely Day"

The biggest challenge for our scheme to achieve this project was arranging transport for people with limited mobility. We overcame this by recruiting additional volunteer drivers and an additional volunteer mini bus driver.

Another challenge for us to was ensure all the walks were and accessible, our outreach workers planned suitable walks and carried out a full risk assessment prior to any walks taking place.

Case Study for User Led Community Based Activities

A member who has attended our " Lidget Lunchers " was telling us that she used to go out once a week for lunch with her sister, unfortunately her sister past away last years and she hasn't been out to lunch since. Our outreach worker visited her at home and told her about the various activities we delivered in the community; she told our worker that she didn't like the idea of attending a hub based activity but she would enjoy going out for lunch. One of our volunteers visited her at home prior to the next lunch date, the volunteer went with her for the first time and in no time she was happily chatting to the other people who came that day! She has attended on her own on another two occasions.

Hub Based Outreach Support and Befriendee Led micro clubs.

- Wibsey"-Woodworkers "- Every Tuesday 10am-12pm from the Salvation Army in Wibsey. This people who are attending this group are making wood models out of various wood materials including match sticks, so far we have had 6 people attending this activity
- Tai-Chi -Our sessions are every Monday at the Ukrainian Community Centre in Lidget Green, 11am-12noon. The sessions are run by one of our Volunteers who have been trained to deliver Tai-Chi both sitting and standing. We have 12 regular people attending on a weekly basis.
- " Roots and Shoots planting pals" Runs every Wednesday from our Hub in Clayton 10am-11.30am this group is currently growing plants from seeds and building their own wooden planters which will eventually be filled with flowers ready for the summer to make our garden look nice. This group is suitable for everyone as we have adapted it for people with all mobility's. This group had currently got 14 members.
- " Pool Club Pals" A volunteer Led activity at our Lidget Green Hub, every Monday 1pm-3pm, A chance to meet new friend for the afternoon and play a game of pool, darts, dominoes with a cup of tea and cake. This group has three members so far.
- Glens Men Cooking Den- is our newest group which has only run once where we had four people attending, this group is aimed at men who want to learn new skills and men who already have cooking skills who would like to share them, and enjoy a meal together.

The group will run every Tuesday 11am-1pm at the Salvation Army in Wibsey.

We are working in Partnership with the Access Bus Service to provide more transport opportunities for people with poor mobility; we have also provided volunteer opportunities to support people using our Scheme mini bus 5 days a week, when it was used two days per week. All of the Older People using this service will have met the volunteer driver and member of staff escorting on the bus prior to them using the bus so they have met the people collecting them. We have set up a Buddy system at all Hub Activities so the Older Person has someone they recognise and know when attending an activity in the community from our Hubs. This has made a lot of difference for people

coming for the first time; we have received feedback from workers in the group that attendances have raised for first time attenders.

The new activities have been a huge success, this is due to our staff and volunteers listening to the Older People in our Community and supporting them to design and planning their own activities rather than providing them with a prescriptive list of what we can offer.

The Challenges to this project were ensuring that the Volunteers were equipped with the correct training to ensure they were confident leading on an activity on their own. The training we delivered was food Hygiene Level2, Risk Assessment, Moving and Handling, First Aid, Confidentiality, Safeguarding and GDPR.

Case Study for Hub Based Outreach Support and Befriender Led micro clubs

One of our existing volunteers used to be a carpenter and had approached the manager of the Scheme and asked if he would be able to set up a woodworking group to make models. We arranged a suitable space for him and other people to work in. He approached a number of people in the community and asked if they would like to join. This group has made a massive difference to our volunteer's confidence and self-esteem, he is now feeling valued and his feeling of self-worth has improved massively.

Provide a telephone support service

Our telephone support service was offered to members receiving one to one befriending and people who were supported through our new project. When the member calls the office with an issue or a query- either the office based CPC deals with it there or then or it gets passed to a CPC in the community who took the lead on any action required. Over the duration of the project we have supported 112 people through our telephone support service and it has been a great success it has given our members peace of mind knowing there is somebody at the other end of the telephone who they know. When we started this service we made sure that all members were aware of what it could be used for and how it worked.

Case Study for Telephone Support.

One of our members contacted the office and told us he had a very bad water burst in his house, the office contacted an outreach worker who went to his house and supported him with the help of a Volunteer to clean up and dry things out, then contacted a Local Plumber to repair the leak. Whilst the plumber was repairing the water leak our outreach worker supported our member to contact the insurance company.

Evaluation

From the outset this project felt like it was a bit risky and a massive change to the usual approach to one to one befriending in the home. The decision was taken to Pilot a project like this was an outcome of earlier consultation had with Older People in the community back in August and September 2018. Where I was getting mixed messages about Befriending in the Home, such as "its only once a week, then I have nobody to talk to until the week after" and "I Still feel isolated "

There is no doubt that some Older People need befriending and not all Older People want to come out, but I felt it important to find out which of these Older People did want to come out and what barriers they were facing preventing them from coming out. I also wanted to Pilot this project and evaluate the outcomes to inform me of a more sustainable future for services for Older People in the future.

There is no doubt that volunteer Led activities and group befriending support is a more cost effective than one to one support in the home, and our Project has showed me that the more people Older People have to talk to, the less isolated and the more confident they feel.

Since our Project started we have delivered group support to 27 new Older People in the Community which includes 8 People in wheelchairs who would normally think they couldn't ever go out on a Day Trip to a seated Tai-Chi session.

We have 12 Volunteers leading on Activities whose feeling of self-worth has increased and now feel like they have purpose in their retirement and spare time.

Whilst managing this project and talking to the people accessing the additional service, they have formed their own peer support, by swapping telephone numbers and forming their own telephone befriending. They are ringing each other on a night and on weekends and going to each other's houses for coffee or sharing taxis and going out for lunch. This was an unexpected outcome for our project! After reviewing the

Assessments of new people attending our Activities 100% of these people are feeling better in themselves, 82% of people feel they have something to look forward to, 100% of people have made new friends both at Activities and at Home, 81% of people are feeling more confident and 38% of people have not visited the doctor as much cause they have other people to talk to.

One of the main successes of our Project was asking the Older People to design their own activities, when I attend the activities I feel a sense of belonging both from the members and Volunteers they have even got name for their individual groups and had naming ceremonies.

After evaluating this project I wouldn't do anything differently, by supporting the Older People and Volunteers in the community to design their own services is defiantly a Model I will be adopting for the future.

To support the small micro clubs and swapping skills we have been really overwhelmed by businesses in the community offering space in their restaurants or teaching people new skills e.g. woodworking, cook and eat sessions.

Recommendations and Next Steps

The recommendation for my organisation would be to do a larger pilot for two years to extend into other communities in the Bradford District which will complement and develop the existing services we have in Bradford.

Our Scheme has five "Live at Home Connection Hubs" in the District of Bradford from these hub we offer a variety of building based Activities, support for Carers and people with dementia, by offering extended activities into the communities we would be able to develop activities and Outreach support that are cost effective and have long term sustainability.

The services we have created during our Pilot will continue as part of our service delivery, but will have to look for funding opportunities to cover room hire until they are fully developed and become self sufficient

We are currently supporting 935 Older People in the communities we work in, with the support of 102 Volunteers, if we could continue supporting Older People with this new Innovative Model we project that we could be supporting an extra 50% by 2021 and delivering to the wider and hard to reach communities.

In order to continue to develop this Model of service delivery and to continue the Outreach support that has been a vital part of this Model. I would like to suggest that further funding is made available to develop and reach into other areas and communities.

From the Scheme and the Staff I would to thank you for this opportunity to be able to put our vision into practice.



And Thank you from our Members!

5. The HALE Project:

Bradford & District Befriending Network
Innovative Approaches Final Report
The HALE Project
08/03/2019

EXECUTIVE SUMMARY

The HALE Befriending Project innovative pilot targeted people over 50 years who feel isolated and lonely in the Shipley area, either on the current waiting list or identified from outside the scheme. Our main aim was to match more mobile befriendees with each other rather than a volunteer, to widen their social network and to address barriers preventing them from socialising. Our outcomes were to create sustainable matches, encourage people to try new activities, reduce loneliness or social isolation, and create sustainable social groups.

Our pilot established two Saturday morning groups in local church cafes in Shipley and Baildon, we linked clients together at Windhill Community Centre, at the HALE office for a Soup Group, Bradford Picturehouse Silver Club and a Well Being session. Our Advocacy worker visited local older people's groups promoting advocacy and providing information on self-care, winter and energy schemes etc.

In the future, using local church cafes or community centres are recommended as they are welcoming and very cost effective. Making the occasional match between befriendees if the opportunity arises is worth supporting but on the whole they are very time consuming and aren't as resilient as matches with volunteers. Introducing befriendees with memory problems to activities needs to be supported at early stages as they are less receptive to new activities when the condition is more advanced and takes time to establish a new routine.

PROJECT AIMS

- 1. The main aim of the innovative project was to match more mobile befriendees with each other rather than a volunteer. Encouraging them to increase their social connections.**

We arranged two Saturday morning coffee groups within church cafes in Baildon and Shipley, providing transport for those that needed it. The cafes were chosen as they were staffed by volunteers who welcomed people into the cafe and provide a sustainable meeting place.

St Paul's Saturday group has steadily increased, achieving 6/8 people on a regular basis and peaking at a membership of 9 people. Three people applied to become a volunteer befriender, one experienced volunteer and one new volunteer have regularly attended the group. Two people are new to the area and one person comes from Cottingley as she feels lonely at the weekend, when her family don't visit. Several people have re-connected with previous friends/acquaintances.



Baildon Methodist Saturday group have gone really well with between 3 and 7 people attending. Again, we have a mixture of volunteers and befriendees attending, which should help the sustainability of the group. People are generally getting on well, although, we have included a couple of befriendees with significant mental health needs which needed some management. They will need to be sign posted elsewhere to ensure the longevity of the group. One lady has brought in a lot of donations for our established Knit and Natter group and another has joined and started knitting hats for BRI. It has widened people's social group and linked them in to other activities. One lady who is part of a walking group in Baildon is encouraging others to join, another lady has attended a local singing group as a result. Moving forward we are hoping attendees will consent to either creating a telephone list to keep in touch with each other, or we will encourage someone to take the lead to be there on a Saturday.



"I enjoy meeting people. This is the only thing for me going on at the weekend. I have no family in the area, so it definitely helps."



Wesley's Group

Windhill Group

Windhill Community Centre group has been very difficult to get off the ground. With ill health, hospital appointments and school holidays we have had to cancel a few of the sessions. The core group is 3 with another lady who is keen but had a series of health issues. The group has bonded well, and we have had some great discussions. The idea of the group was to try to link people in to the activities at Windhill Community Centre, an exercise session being the main objective.

Silverscreen outings group has enrolled 5 people to the Silverscreen Club which enables them to get cheap cinema tickets with free refreshments before or after the film. The group enjoyed the film outings and the chance bond over refreshments. All indications are that several of the group will continue the outings.

The Soup groups had 14 attendees, 10 of whom came in from other social groups, really enjoyed the group and bonded with other people. There were 4 new clients who came to the soup groups and through the contacts at this group, ended up attending other new groups. Everyone received a soup book and some people went home and cooked soup from the book. Everyone said that they much preferred homemade soup after attending the group.



Photo sent to soup group facilitator of soup made at home from the complimentary book.



2. To encourage and support befriendees with early stage memory loss to have more social contact.

We tried to establish a new routine for 3 ladies with early memory problems and 2 people with high pain levels. The 3 ladies enjoyed the Well Being Cafes, one in particular was very reluctant to go initially due to anxiety levels, but with support she enjoyed the Cafe and also agreed to start a new exercise class. Of the two people in pain, one found sitting through the session too uncomfortable, the other found it helped her forget her pain.

3. Be more proactive with our advocacy and look at befriendees who should be able to get out, assessing what the barriers are causing isolation, providing a plan to overcome these issues.

The advocate identified 3 new clients through this proactive approach and gave out lots of useful information which was new to many members of the social groups.

4. Identify events for isolated people on Christmas Day and work on building confidence, linking people for support to enable them to attend such events.

This was unsuccessful as there weren't the events happening that we had identified from previous years. We did access one small event, but it was not as advertised and inappropriate for our client base.

Evaluation of Innovative approach.

We managed to evaluate 29 of the people who were involved with the new activities. These are people who attended regularly. We did not evaluate people who only attended once.

VCS Innovative Project Evaluations	Yes	No	Not sure
<i>Have you enjoyed the group/groups?</i>	29		
<i>Have you made any new friends?</i>	29		
<i>Have you attended any other new activities?</i>	14	14	1
<i>Has attending the group made you feel less isolated?</i>	26	1	2
<i>Has having other people to talk to made you feel better able to cope with day to day issues?</i>	28	1	
<i>Has attending the group improved your sense of wellbeing (mental health)?</i>	28	1	0
<i>Has attending the group improved your physical health?</i>	16	10	3
<i>Has attending the groups improved your confidence?</i>	23	4	2
<i>Do you feel more linked in with your community after attending the groups?</i>	20	3	6
<i>Would you like to continue with any of the new activities?</i>	25	1	3

Our main aim was to match clients on the waiting list with each other, in a one to one scenario, however, we found even with having extra time for additional support this was very difficult. We made one match through the cinema group, but that was with a volunteer who had recently become available, rather than two befriendees. We learnt that if the opportunity arises it can be well worth matching befriendees, sometimes they have lots in common. However, there are often too many barriers to make this approach work, with a one to one relationship.

Widening social contacts and developing friendships in a group setting was highly successful. 100% felt they enjoyed the groups, 100% felt that they had made new friends and 48% started new activities. In a group setting this makes a relationship much more relaxed and friendships can develop at a slower pace, with less pressure.

The expectations on a couple are reduced in the group. If one person can't attend due to mental or physical health, there are still others within a group offering support. Group work, especially in a community setting, such as a church or

community centre cafe, are a very cost effective way of tackling social isolation. It remains to be seen whether people will continue to attend without a facilitator to support the group and organise transport.

Taking people with memory problems to the Well Being Cafes worked well and can make a big impact, pain can prove to be a barrier.

Of the people we surveyed, 98% experienced increased wellbeing. Considering the difficulties of getting people out in winter, the additional health problems at this time of year and the holiday period over Christmas and New Year, we were pleased with the progress we made. We would definitely continue to look at promoting groups in community spaces if funding was available. A good mix of people with different levels of social activity is helpful to promote new groups to those that need encouragement to try new activities. Having reliable volunteers involved supporting groups is also really helpful in ensuring their success and enabling sustainability.

Case Study 1

*names changed for anonymity

Jane* was a lady in her 70s who was identified as having a link with one of the church cafes, but who had become isolated and severely depressed after the long illness and losses of both her husband and son. She was encouraged to attend the Saturday morning cafe and when she attended found that she knew another of the ladies that was also attending. They reconnected each week and we also invited both to a Well Being Session. The session included massage, reiki healing, manicures and the finished with a guided relaxation. The group really bonded well, they swapped contact details and shared information regarding a support group that one or two of the group already attended.

Jane said, "Due to losing my husband and son and living on my own with anxiety/depression/grief I would really love to volunteer in some way and at the same time I need nurturing....I feel in no man's land at the moment...All the lovely ladies in Hale have made me feel very welcome at a difficult time in my life. They are all so special, as are all the new people I have met through the social groups. Thank you all so much. There is so much genuine care and love in Hale"

Jane feels that she has made new friends, feels less isolated, feels like she is able to cope with day to day issues better and has improved physical, mental and general wellbeing. We will continue to support Jane and encourage her to volunteer when the time is right.



Well Being Session

Case Study 2

Mary* was at a very low time in her life when she was referred for befriending, just as the new funding came through. She was in her early 50s. Earlier in her life she and her daughter had been involved in a life changing car accident, which had left them both traumatised and permanently disabled. In more recent years her pregnant daughter died suddenly, resulting in the additional loss of her unborn grandchild. Following on from those bereavements, both parents had passed away and she had become very depressed. Mary had stopped going out and become very isolated. With the help of the extra funding we were able to support Mary to join the new soup group, which fell between other social groups held in the same venue. As Mary slowly got introduced to people from those groups she started first to arrive earlier in time to join the knitting group and ended up staying longer to join with the woodwork group.

Mary says, "Going to the soup group has been good for my confidence but mostly it has made me eat, as I wasn't really eating well, and I will try to make my own soup now."

Mary feels that she has made friends, feels less isolated, feels like she is able to cope with day to day issues better and has improved physical, mental and general wellbeing. She also seems more independent and is doing other activities.

Recommendations and Next Steps

Feedback and evaluations have evidenced how important social groups are. With cuts to day opportunities funding, it's becoming more difficult for third sector organisations to provide social groups and it is necessary to look at the most cost effective ways of delivering them. From this experience our recommendations would be to investigate community spaces such as church and community centre cafes as cheap or free venues. Having reliable, experienced and confident volunteers to support groups is a real bonus, but unfortunately, most volunteers are not willing to be solely responsible for a group of vulnerable individuals. Again, these venues already specified are useful because they are staffed by people who are welcoming and supportive, but only time will tell as to whether this is enough to

make the group sustainable. It is recommended that we monitor who these groups progress.

Our next steps are looking at ways of continuing with some of the connections and interests that we have begun. For example, we are not able to continue with the cinema outings group, but we are looking at supporting a cinema club from our meeting space which could be run by and organised with the help of volunteers. Also, the Windhill group were interested in an exercise class but none of the groups have been convenient or appropriate for them. So, we have identified other befriendees who would benefit from an appropriate exercise class and have used some of the funding to update the Befriending Coordinator's exercise qualification. We will then aim to identify a small funding grant or introduce a fee and organise numbers to enable the group to be sustainable.

Some elements of the pilot that we could incorporate, are encouraging people to the wellbeing cafes, especially those with carers or families who might support them or to some degree through our specialist befriender. We might also be able to introduce people to groups on a small scale through our specialist befriender. We have focussed on helping those people on the scheme who have some level of mobility and ability to access groups and activities. It is important to remember that there are a large number of people on the scheme who need a befriender because they are isolated and lonely due to living with conditions related to physical health, frailty and mental health, including dementia.

At the moment we are funded through the Big Lottery, which means we have a befriending team and so have been able to do a lot of activities with the additional funding. This may allow us to incorporate some of the elements into our mainstream project. However, our funding is coming to an end in August. How the scheme takes shape (if at all) after this period will obviously have a big impact on the recommendations and next steps that we have identified here.

1 Westgate, Shipley, West Yorkshire BD18 3QX

Tel: 01274 271088 **Fax:** 01274 710843

Mobile: 07535 660 959

www.haleproject.org.uk



Charity No. 1123542 Company No: 6443243

6. Healthy Lifestyles Solutions CIC:

Executive Summary of Innovative Approach

Healthy Lifestyle Solutions CIC (HLS) was trying an alternate way of working in befriending. One to one befriending can be difficult freeing up volunteers, matching them with referrals for befriending and having a great enough number of volunteers to deal with the demand of referrals.

HLS decided to attempt to run interest group for those who wanted befriending to see if we could find a solution to some of the above issues. We recognise that some of the people who want befriending have common interests. HLS works in across the Community Partnership 9 area BD4 Community; the target audience for befriending is those identified as being socially isolated.

The aim of the project was to see if we could reduce the number of people requiring one to one befriending by providing them with an opportunity to participate in a variety of interest groups.

We managed to setup referral pathways with the local medical practice on other services, develop 6 interest groups with a small number of regular attendees at each group.

Both methods of befriending can exist with less emphasise on one to one befriending being required in this community but recognising that there is still a need for it.

Description of what happened in the project

HLS would develop befriending groups established around topics of interest. Initial assessment will be carried out with referrals to find common interest such as crafts, reading, etc.

HLS would develop befriending groups with a focus on shared health concerns identified and referred by District Nurses and Community Matrons with a view to improving health conditions of those referred alongside reducing social isolation.

CASE STUDIES

Mr & Mrs X and Mrs Y

Mr X joined the men's group and I had spoken with him about our BD4 Community Pals group and he asked if his wife could come along. I arranged to visit her at her home, during the visit her friend Mrs Y called in for a visit and told me she had recently lost her husband and had lost her confidence and didn't get out much Mr X now attends the men's group and goes to lots of different places such as bowling, golf and playing dominoes with likeminded people .

Mrs X has problems with her back and mobility and is now attending BD4 Community pals, a swimming class for people with physical difficulties and is really

enjoying these activities so much. She is very good at making new members of the group feel welcome and now wants to become a volunteer herself

Mrs Y attends BD4 Community Pals and is very creative, she loves to crochet and sew and makes things and now attends Work of Hearts and through her patience advising new members on how to make things she would also like to become a volunteer she is now also attending Lost friends

Mrs Y visits Mr & Mrs X quite often and is very close to them she has commented on how much better they get on together since Mr & Mrs X are getting out more and doing things

Evaluation of Innovative Approach

One of the groups (BD4 Community Pals) was setup to act as a feeder group. This allowed those taking part to communicate amongst themselves and then organise interest groups. We now have 6 groups running BD4 Community Pals, Breathing Buddies, Lost Friends, Work of Hearts, Book Worms, Garden Grubs. Additionally, some members of the BD4 Community Pals have gone on to improve their physical wellbeing by collectively going along to a local swimming group. This happened after a guest speaker from the swimming group was invited to talk to BD4 Community Pals to promote a local service. We have also had members attend other external groups from promotion at BD4 Community Pals.

Having the groups establish themselves in this more organic way where they befriend one another prior to becoming interest groups allows less dependency on a coordinator or volunteer roles to initiate and sustain the group. Some of those taking part in these groups have shown interest in volunteering and acquiring new skills to support others less confident than themselves whilst expanding on their life skills and recognising their own self-worth and personal development.

The project has also built on the relationship with referrers due to the positive feedback received from those taking part. The groups have also given us the opportunity to gather evidence such as photos to present to practices to show some of the value brought at these groups.

HLS setup an initial group in December for referrals with similar health conditions. Those invited were unable to attend which helped us recognize that some people need more one to one or didn't require current services on offer.

Prior to the project starting we had discussions with the District Nurses about the type of groups we could expect to setup for practice patients. We initially spoke about the possibility of setting up some kind of activity group for those with health issues relating to their legs such as ulcers, etc. We found referrals for these health issues were more appropriate for one to one befriending.

It was later identified that there was a lot of patients with COPD. The GP practice sent out letters on behalf of the befriending (to respect GDPR concerns) to relevant patients to invite them to take part in a group called Breathing buddies. This group is now running weekly with regular attendees and regular further interest being expressed.

HLS has spent a lot of time with people who are isolated and feel that the most empowering thing is when you see a person who is very shy and timid through lack of self-belief and confidence, start making decisions for themselves without thinking about it, leading to them taking responsibility and ownership of their lives. The Coordinator going out to referrals and doing an initial assessment helped identify additional barriers to engagement beyond physical health conditions such as leg ulcers, etc. Groups are now arranging other activities amongst themselves with support and are forming their own friendships who motivate and encourage each other. This has developed into a distraction from contacting the surgery and focussed their attention on something else such as activities/talking/listening to each other.

Identifying physical disabilities on a more extreme level such as leg ulcers, we presented those referred with the opportunity for one to one support with a volunteer in a more traditional befriending capacity with a view to increasing confidence and later introducing them to groups.

We have been able to feedback this by showing the practices the value this contact has brought. We are now looking to expand on these types of groups including support groups for Parkinson and diabetes.

Recommendations and Next Steps

The recommendation is for the groups to continue as much possible with leaders identified within the groups, and support and training offered where appropriate. Where possible attract additional funding to continue delivering the project in a similar fashion to how the innovative project has been run. The groups are showing enthusiasm to continue beyond the project end date and have been reassured that Healthy Lifestyle Solutions will support them going forward.

Our recommendations for the wider stakeholders are to recognise the value of this project and support HLS in attracting further funding for continuation of such as a well needed service.

The next step is to support the current groups to remain actively involved and supportive of each other by encouraging them to approach local businesses such as local cafes and entrepreneurial ventures to develop and expand their groups. Discussions and planning have already started taking place for April 2019 and beyond. The Community Partnership is developing a Recovery College pilot and sees some of this group work as being important to this model, developing a structured program of services and fitting around these program activities such as this innovative project. Day Opportunities funding from Bradford Council for the local area is also looking at a similar model complementing this innovative project type of work.

We recognise that the funding was limited to a small number of months and in this time the project felt rushed with little time to develop each group beyond what they became. However, given these time restraints we feel that the project has been welcomed by those taking part and has brought about a transformation to their lives.

Further time would have allowed an increased opportunity to identify volunteers within the groups and provide further training to sustain the groups beyond the funding limitations.

Sharon Townend
Healthy Lifestyle Solutions CIC
2 Proctor St
Bradford
BD4 9QA
01274 685449
sharon.townend@healthylifestylebradford.co.uk