The Centre for Ageing Studies



LEGACY REPORT 18. SECOND BRIGHTLIFE BRIGHT IDEAS SURVEY

Evaluation
Status Report

The University of Chester Evaluation Team

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PART 1 Background

1.1 Introduction

This is the second report that examines the experiences of Bright Ideas (B.I.) service providers, the purpose of which is to update the Brightlife Partnership Board regarding the progress since the first report (Report 14, July 2018). It is part of the wider evaluation process of Brightlife which is being conducted over the project lifetime. Furthermore, it seeks to not only identify and understand challenges and enablers faced by B.I. service providers, but also capture learning to inform the future commissioning of services.

PART 2 Evaluation Methods

2.1 Method

The data in this report was gathered through an online survey, followed by a 'learning event', which was attended by a number of B.I. service providers. This research employed a mixed methods approach to gathering data and utilised both quantitative and qualitative research methods.

2.1.1 Online Survey

Data was collected using an online survey (previously Bristol Online Survey) based on the first Brightlife Bright Ideas Survey that was reported on in July 2018 (Report 14). Questions were a mix of multiple choice and free text answer styles to explore the experiences of B.I. service providers in relation to:

- Participant recruitment and selection
- Service design and delivery
- Sustainability
- Common Measurement Framework (CMF)

2.1.2 Learning Event

A Bright Ideas Learning Event was held in November 2018, facilitated by coresearchers from the University of Chester and a researcher from the Centre for Ageing Studies. Attendees at the learning event were divided into groups to discuss a range of issues and comments written on 'post-it' notes. Each session was followed by a plenary to capture the key thoughts and experiences of the whole group. Notes were taken to provide context and elaborate on the comments recorded on the post-it notes. Analysis of the survey and learning event was undertaken to identify and report emergent themes.

2.2 Respondents

Online survey

Twelve B.I. service providers were invited to complete the online survey

Table 1: Bright Ideas (B.I.) service providers and funded projects

Organisation/Provider	Service	
Bridge Wellness Gardens – Better Lives Club for over 50s 2	Activity club for over 50s including baking, meditation, relaxation and chair yoga	
The Reader – Brightening Lives with Shared Reading	Run by trained volunteers in a variety of settings such as care homes, sheltered housing and community centres	
DIAL West Cheshire – DIAL house 'T' Club	A monthly social group for those aged 50 and above	
Snow Angels – Happy Mondays	Social group for older people with learning disabilities	
Heal Earth – Women Makers Fab Club 50+	Women's woodworking classes for building confidence and resilience, creating connections, purpose, friendships and circles of support in the community	
Listening Ear – Fab Cheshire West	Bereavement counselling and activity groups where participants can create their own social groups	
EPNAVCO – Lively Lunchtime	A cooking club for older people from minority backgrounds	
Maplas Cancer Friends 2	A peer support group led by older people living with cancer	
Bright Lights Theatre Club – Neston Theatre Arts Club	An over 50s community theatre group through a collaboration between the Little Actors Theatre and Brightlife	
Vicars Cross Community Centre – Senior Screen	A film club for anyone aged 50 and over	
Age UK Cheshire – Sharing Time	Connecting people and creating friendships to reduce social isolation and loneliness	
The Conservation Volunteers –Young and Green at Heart	A project for older people who have an interest in horticulture	

Bright Ideas Learning Event

The invitations were sent to 30 B.I service providers who had taken part in either the first or second online surveys, or had been commissioned to deliver services, but had not yet started. In order to protect the anonymity of attendees, details of the organisations represented is not included within this report.

PART 3 Results

Part 3 identifies the key points of difference from the responses to the first Bright Ideas Survey published in July 2018 as well as emergent insight and learning. For ease of comparison this report is structured in the same format as the first report (July 2018, report 14) and the responses are summarised accordingly within the four areas below:

- Participant recruitment and selection
- Service design and delivery
- Sustainability of services
- Common Measurement Framework (CMF)

3.1 Participant Recruitment and Selection

Approaches to recruitment and determining whether potential participants are members of the Brightlife target group

Recruitment strategies

Consistent with the first report, B.I. service providers intended to adopt a variety wide range of approaches to advertise and target potential participants. Additional locations and media were mentioned in the second survey; these included:

- "community access points" to post advertisements and flyers
- "local handbooks"
- Parish Newsletters

Furthermore, GPs and surgeries were specifically mentioned by 50% of respondents from the online survey (n=12), up from 20% in the first survey (n=10). The increased level of engagement between B.I. service providers and GP surgeries could improve recruitment from the target group and to communicate the potential benefits of engaging with B.I. service providers to a broader health-based audience.

However, a number of concerns raised by attendees at the learning event specifically relating to the practicalities in respect of referrals from GPs Comments included the

difficulties experienced in access, or "getting in" to GP surgeries and other 'NHS services', as well as frustrations regarding a "lack of referrals" from GPs, hospitals and Well Being Coordinators.

Developing a relationship with GP surgeries and/or Practice Managers was seen as important to improve the levels of engagement and number of referrals. It was felt better relationships between GP surgeries and B.I service providers helped to establish credibility and better communicate the potential benefits of different products and services. Some attendees stated they had emphasised the financial benefits to GPs to encourage increased referrals, "I'm going to save you money". Whereas some B.I service providers stated they avoided GPs and targeted care homes and sheltered housing instead.

Support or information required to help recruit from the Brightlife target group

Fewer B.I. service providers indicated they required support to help recruit participants; 42% compared to 70% in the first survey. Two organisations specifically highlighted the help received from Brightlife regarding the design of marketing flyers and receiving referrals. The remainder made generic comments regarding help with advertising and networking opportunities to raise awareness of services to improve signposting and referrals.

Most effective methods of recruitment

The majority of respondents (92%) identified one particular method had been effective in the recruitment of new participants to activities. The most effective approaches to participant recruitment highlighted by B.I. service providers include:

- word of mouth
- social media
- Brightlife referrals
- leaflet distribution/flyers
- referrals from GP surgeries
- an information and taster session at 'Storyhouse' (a mixed cultural building in Chester that includes a theatre, cinema, library and restaurant).

Identifying Brightlife target group prior to enrolling them in services

There was an improvement in the numbers of B.I. service providers who stated the intention to establish whether potential participants were within the Brightlife target group; 75% compared to 40% in the first survey.

However, 50% of respondents either relied on participants having read criteria on promotional literature or requested the participant's age prior to enrolment. Furthermore, 17% of respondents identified the Common Measurement Framework (CMF) as the means for establishing eligibility, although this is not completed until a participant has enrolled on an activity. Nonetheless, once participants are accepted, all B.I. service providers attempt to assess social isolation or loneliness using the CMF or through conversations. One B.I. service provider in the second survey uses the 'Lubben Scale' (LSNS 6, a social support assessment tool) to determine the target group participants prior to enrolment.

Attendees at the learning event discussed potential difficulties in establishing whether a person is socially isolated, "it is problematic to identify the target group", which has resulted in some B.I. service providers focusing on "the need for the service" rather than criteria based on social isolation or loneliness. However, one attendee stated "there were various screening questionnaires available on the internet". It was agreed (at the learning event) a 'screening tool' would be helpful to determine social isolation and/or loneliness.

One larger, more established, B.I. service provider maintains a separate database, to help signpost ineligible individuals to an appropriate alternative service if they are not considered to be part of the Brightlife target group.

3.2 Service Provided

What assists or will assist with the delivery of the Bright Ideas Service

Networking was considered a key theme for assisting service delivery. B.I service providers were aware of, and had accessed, arrange of support mechanisms to help deliver services.

The responses reflect those in the first survey, with the most effective sources being:

- Brightlife and other networking events
- Brightlife learning events
 - o specifically linking B.I. service providers with each other
- Brightlife marketing and promotions
 - o including 'Bright Ideas' in Brightlife publications
- Cheshire West Voluntary Action
- University of Chester staff
 - particularly to share 'best practice' expertise or provide evidence of 'top tips'

In respect of sharing 'best practice' top tips included:

- Plan an activity and service, work hard for funding and, if successful, deliver as promised and incorporate learning into the next cycle
- Don't be afraid to work with other organisations
- Involve friends and relatives of participants
- When trying to engage men in activities, make the approach by asking if they can help with x, y or z, rather than if 'they' need help

Flexibility in the Brightlife contract was also identified as a positive by an attendee at the learning event. The B.I. service provider explained that following early evaluation shortly after the contract had been awarded, changes were made to the delivery mechanism based on 'test and learn' in close consultation with Brightlife.

Involvement or planned involvement of older people in the design and delivery of services

All B.I. service providers stated the intention to either involve or plan to involve older people in the design and delivery of Brightlife funded services, which is consistent with the first survey. The involvement with older people was recognised as important to "keep the group service user-led" and ensure services continue to be developed based on feedback from "our clients and volunteers".

There was a greater emphasis on holding regular meetings with older people in comparison to the first survey, and one B.I service provider had established a Steering Group involving previous participants.

In terms of further support or information to help involve older people in the design and delivery of the service comments included:

- help with networking to find existing meeting places of target group with good accessibility (transport a limiting factor)
- sharing new ideas
- signposting to connect with potential participants and volunteers.

Recruitment of Volunteers

Whilst the recruitment of volunteers was recognised as an important strategy to support the delivery of services it would appear there is a disconnect between the number of possible and actual volunteers "...statistics...(on the numbers of potential volunteers)...do not match...(our)...experience...". Equally, attendees suggested the demand for volunteers increases as a result of reductions in funding affecting staffing levels. Consequently, organisations with the same 'target' group may ultimately be competing to recruit volunteers from the same limited resource pool.

Retention was raised as an issue, "...only four of the ten who have been trained for a specific role remain as volunteers for a significant period of time...". Furthermore, not all volunteers are keen to take on certain roles such as leading groups. Nevertheless, it was suggested it is possible that both retention and the roles that volunteers are able to take on could be addressed through skills training and/or development.

Suggestions to increase volunteer recruitment included:

- Brightlife and Cheshire West Voluntary Action were specifically identified as being supportive in recruiting volunteers
- Encouraging previous participants to consider volunteering or asking friends, families and/or carers to help with easy tasks as a way of initially becoming involved

- Consider targeted recruitment to match roles with potential volunteers' skills, interests or ambitions
- Approach organisations already involved in a particular issue or those with volunteering programmes such as the University of Chester. For example, students may want to gain experience or develop certain skills in specific disciplines such as counselling or health and social care

Volunteer Skills and Training

A number of different approaches to the training offered to volunteers was reported ranging from "informal discussions", reviewing the information provided though the "application processes", "mentoring" and "undertaking the in-house training" to a formal "well managed volunteers scheme" and developing specific standards for roles that require counselling skills or other specialisms.

Ten (83%) of respondents highlighted the specific training provided, including:

- Food Hygiene (2 respondents)
- Safeguarding Vulnerable Adults (5 respondents)
- Training Programme specific to service (6 respondents)
- Risk Assessment (2 respondents)
- Health & Safety (2 respondents)
- First Aid (2 respondents)
- Other (service specific) (4 respondents)

Transport infrastructure

The issue of transport for participants to and from activities was identified as a significant challenge within discussions. B.I. service providers considered this would be especially important in communities with an "inadequate" transport provision, and in cases where there were health concerns, or costs were a factor for potential participants. This was considered as much an infrastructure issue as it was about service delivery and thus Brightlife and providers may be unable to resolve some of the transport difficulties. However, as part of 'test and learn', it could be helpful to

extend the conversation to local authority and commissioners within the scope of infrastructure planning.

3.3 Sustainability of services

Ensuring the service is sustainable without Brightlife funding

The issue of sustainability appears to be somewhat contested, between responses to the online survey and the discussion at the learning event. All B.I. service providers who responded to the online survey reported that a sustainability strategy was already in place or one was being planned for, once Brightlife funding ceased. However, some attendees at the learning event stated they were not actively working on sustainability at the current time, as there was "...plenty of time...". However, it is important to recognise, due to test and learn, some projects may not be sustained based on the evaluation outcomes.

Nonetheless, sustainability strategies were similar to those identified in the first survey, although two key themes emerged:

- engaging volunteers (with training) to run groups post-Brightlife
- charging participants for services and building financial reserves

"As our project goes on, we intend to invest in training for some of the group to be able to keep the project running into the future after funding has finished"

Other comments included:

- seeking alternative funding sources including sponsorship
- identifying efficiencies in delivery to reduce potential costs to participants
- reducing the frequency of activities
- organising fund-raising events

With regards to any additional assistance to help develop sustainability strategies respondents highlighted the support available from Brightlife, Age UK Cheshire and

Cheshire West Voluntary Action, particularly in relation to ideas around publicity and advertising, collaboration, fund raising opportunities and grant application support.

3.4 Common Measurement Framework (CMF)

All respondents to the online survey reported suitable information had been provided regarding completion of the CMF, which is an improvement on the first survey; 100% compared to 80%. B.I service providers were positive about the initial and any subsequent support received from Brightlife, although one did comment that "a little more information on coding would be beneficial".

B.I. service providers felt prepared to undertake the CMF and recognised the importance and benefits of building rapport with participants when completing the CMF. However, this also presented potential difficulties such as "...the completion of the CMF...(being)...very time consuming".

Equally, some participants may not disclose sensitive information on week one, or it may take some time to discuss issues affecting loneliness or social isolation, "...participants will not initially admit to being lonely, but by the end of the activity programme they become more comfortable and open up..." and "...it takes time for individuals to recognise their issues and to open up, thus often they are over optimistic on their initial CMF form...". However, not completing the CMF at entry to a particular activity can result in the initial data not being captured accurately. Moreover, it was felt there were differences between women and men; the latter being far more reluctant to identifying themselves as lonely or socially isolated.

Nonetheless, attendees recognised the value in being able to access data, including individual outcomes to help with developing products and services, generate case studies or use towards future funding bid applications. Some attendees collect data through internal mechanisms whilst others would like to receive data at the end of funded projects.

PART 4 Discussion and Conclusion

It is important Brightlife funded service providers (both commissioned services and Bright Ideas) recognise the potential challenges of reaching socially isolated peopleⁱⁱ, ⁱⁱⁱassess the design and delivery of activities, and consider long-term sustainability.

This follow-up report was used to gain feedback from B.I. service providers about participant recruitment and selection, service design and delivery, sustainability, and the Common Measurement Framework. Furthermore, it is anticipated it will help inform future commissioning discussions for those programmes and projects that are funded post Brightlife.

4.1 Participant Recruitment and Selection

There is a consistency between both reports regarding the use of a range of media to advertise services and recruit participants to activities. B.I. service providers employ a breadth of approaches and locations to publicise services, seeking to maximise 'community access points' such as GP and dentist surgeries, community centres, places of worship, local shops and libraries. Equally, word of mouth, social media, and networking with other partners are considered effective recruitment strategies.

There was an increased focus on trying to recruit participants by developing relationships with primary care services, namely GP surgeries. Indeed, if relationships with GP surgeries can be effectively developed it has the potential to improve recruitment from the target group.

However, attendees at the learning event described some practical difficulties in obtaining referrals from GPs. Issues highlighted included access routes, referral numbers, confusion around what services are available, and not being clear as to the potential benefits from referring people to services. It was suggested emphasising the financial benefits to GPs could improve referrals. Conversely, it is important to ensure claims about being able to provide financial benefits can be substantiated. Therefore,

a strong evidence base is essential to support claims of potential benefits; financial or otherwise.

There was a significant increase in respondents stating they intended to establish whether participants were part of the Brightlife target group prior to enrolling in services. Nonetheless, it appears the primary basis of recruiting participants is age as opposed to criteria based on social isolation and/or loneliness, which reflects the feedback in the first survey. The CMF was referenced as a means of identifying suitability, although this is completed once a participant has enrolled on an activity. Equally, some B.I. service providers appear to rely on participants having read the relevant details on promotional materials and literature.

Identifying participants within the Brightlife target group of social isolation and/or loneliness rather than just being aged 50 or over continues to be problematic, particularly when initially recruiting to activities. It is clear a number of providers would be interested in the use of suitable screening tools to determine suitability of potential participants. This finding is in-line with the points for discussion in the previous report.

In terms of previous reports, it is also acknowledged Brightlife have not directed B.I service providers to use social isolation screening tools to recruit participants and are willing to accept that some individuals may not be within the target groups (Bright Ideas Survey Report, 2018). Decisions of inclusion or exclusion criteria will always be subject to a judgement, based on the specific circumstances of a project and conversations between commissioners and service providers; in this case, a matter for the Brightlife Partnership. However, in terms of future learning as part of the Brightlife legacy it is vital to recognise the value of having appropriate inclusion criteria and suitable screening tools. This will support commissioners and providers in demonstrating measurable outcomes from activities, identifying the benefits of investment and providing a strong evidence base on which to apply for funding and make commissioning decisions.

4.2 Service Design and Delivery

Support with the design and delivery of services was recognised as an essential factor in successful outcomes. Specifically, the relationship between Brightlife and B.I. service providers was identified as important to help with the promotion of activities via Brightlife publications and marketing approaches. Equally, peer-to-peer support and linking in with other organisations through wider networking opportunities and learning events to 'connect' and share good practice.

As with the first report, all B.I. service providers were currently involving or planning to involve older people in the design and delivery of the 'Bright Idea'. There appears to be a real commitment to make services 'user-led' and two main strategies emerged in helping to involve older people.

The first was through obtaining regular feedback from participants or by holding meetings to share ideas, encourage engagement and promote the co-design of services. The second was to recruit volunteers from within the target group. A number of support mechanisms to help with the recruitment of volunteers including linking with Brightlife, Cheshire West Voluntary Action (CWVA), and other organisations with established volunteer schemes such as the University of Chester were highlighted.

However, concerns were also expressed that the number of suitable available volunteers does not necessarily match the number required to deliver services. Equally, retaining volunteers was identified as being potentially problematic. It is important to note that working with volunteers is also a critical part of sustainability planning and the issues associated with volunteers in general should be given equal prominence in considerations of how to continue with the delivery of services post-Brightlife funding.

Equally, suitable and affordable transport has emerged as a critical issue through both online surveys and the learning event. It was suggested this needs to be a significant factor in the future design and delivery of services particularly, although not exclusively, in areas with limited public transport options

4.3 Sustainability of services

Sustainability is a key part of the Bright Ideas funding process and support is available from Brightlife and CWVA to help potential applicants. With the exception of one, all B.I. service providers had considered sustainability issues post Brightlife funding, although the reported strategies varied on a sliding scale from clear processes to vague or more generalised approaches.

A minority of B.I. service providers described robust strategies for sustainability, including requesting a financial contribution from participants at the onset of an activity and/or offsetting costs from other projects. Conversely, the majority of respondents provided less detail on how sustainability could be achieved. A common approach was through the recruitment of volunteers to manage activities or make up any shortfall in staffing due to financial constraints. However, linking to the previous section on 'service design and delivery' regarding the efficacy of recruiting and retaining volunteers, a cautionary note should be taken if sustainability is solely reliant on this approach.

A further sustainability consideration was to make funding applications to alternative commissioners and/or projects. The effective capture of data to demonstrate outcomes and impact will be an important element in the successful application for funding from alternative sources.

Whilst sustainability is a key part of the Bright Ideas process, decisions as to the robustness of such plans will always be a judgement call for funding bodies such as Brightlife. However, future commissioners or service providers may wish to pay specific attention to the details contained within sustainability planning and any particular scrutiny that will be applied, should it be a critical factor in deciding to award funding.

4.4 Information on the Common Measurement Framework (CMF)

All respondents to the online survey reported they had received adequate information about the CMF. Furthermore, attendees at the learning event highlighted the

importance of participants completing the CMF, which suggests a positive 'test and learn' outcome from the first survey.

Comments from both the online survey and the learning event relate to the practicalities of completing the CMF. Issues such as being time consuming and potentially intrusive were identified and should be acknowledge as valid concerns. Conversely, it is important to note the CMF was designed by the National Lottery Community Fund, who funded Brightlife as part of the Ageing Better programme.

Moreover, attendees at the learning event discussed some participants may be reluctant to disclose personal or sensitive information during the early stages of engagement, or may not be fully aware of issues affecting levels of social isolation and/or loneliness. Therefore, it appears crucial to quickly establish trust and build rapport with participants. This is particularly important in order to accurately capture the relevant information required to set a baseline at the start of the activity from which to measure outcomes at its conclusion.

Equally, it is essential for commissioners, providers and participants to understand the relevance and value of any performance measures that are applied or mandated as part of a funding agreement, as well as the method by which data is captured. Such an approach will not only provide effective project management processes between commissioners and providers, but also and more importantly, improve the accuracy of pre and post-project data and support a more robust evidence base to help inform future commissioning decisions.

4.5 Recommendations

There are a number of recommendations for consideration by the Brightlife Partnership group and those who may commission or deliver services in the future.

- Develop positive relationships between key stakeholders, particularly with organisations or groups with the potential to refer participants into programmes such as GP surgeries or other healthcare providers
- Establish effective arrangements for capturing data in order to provide a strong evidence base to support claims of potential benefit
- Where services are provided for a specific target group consider clear inclusion and exclusion criteria and identify suitable screening tools to support decisionmaking
- Support wider networking events to connect stakeholders to share learning and good practice, develop and maintain healthy relationships and build a wider community of practice
- Where volunteers are central to delivery and sustainability planning, it is essential to develop robust strategies for recruitment and retention, and engage with volunteering hubs, coordinators or organisations with existing volunteering programmes for support
- Consider the strategic implications of transport in relation to people accessing services within commissioning arrangements, project design and funding decisions

Appendix A - Responses from the Brightlife Team

The Brightlife team have added the following comments and clarifications to this report

Additional comments

It is good to see so many positive comments regarding Bright Ideas, the way they are working genuinely on co-production and the support provided by Brightlife and CWVA on project development, contract flexibility, data support, marketing, volunteer recruitment etc

ⁱ Worth considering that projects based on an activity, interest or particular need can focus on recruiting volunteers with a shared interest as opposed to a Social Isolation target group

ⁱⁱ We have found part of the learning is that socially isolated/lonely people may not want to participate in a group that has a singular focus and indeed that may not be helpful with integration. More important that groups are based on common interest or purpose and are open, engaging, welcoming and supportive

iii Please see comments already made on recommendations on page 4