Maximising Older People's Use of Personal Budgets: Programme evaluation summary

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The programme

Following the launch of the 2007 *Putting People First* concordat, personalisation has become central to social care policy and personal budgets have become a key mechanism for achieving it. Since their introduction, however, concerns have been raised as to the extent to which personal budgets work for older people. This has led to suggestions of a need to build support for older people on personal budgets. Volunteers and peer support have both been identified as having a role to play in ensuring that personal budgets lead to greater choice and control.

Within this context, Age UK developed its Maximising Older People's Personal budget Use (MOPPU) programme, for which it received funding from the Department of Health's Health and Social Care Volunteering Fund. The MOPPU programme ran from July 2011 to November 2014. Its overarching aim was to 'improve social care outcomes for older people using personal budgets' through the development of an 'innovative volunteer-delivery model'. The programme had four specific objectives:

- To promote awareness of personal budgets amongst older people;
- To increase understanding and take-up of personal budgets amongst older people;
- To enable older people to identify their own needs and use their personal budgets to maximum effect;

- To develop volunteer peer support community-networks of existing recipients to support those not yet using personal budgets.

It had three associated targets:

- To recruit and train 290 volunteers;
- To promote awareness of personal budgets amongst 7,750 older people;
- To directly support 1,495 older people to maximise the use of their personal budgets.

The programme was coordinated nationally by Age UK and delivered locally by a network of five Age UK partner organisations. Within the overall framework of the programme and its aims and objectives, each of the partners had individual targets and the flexibility to develop projects which responded to local context.

The evaluation

An evaluation was commissioned to understand the process, review the learning and to assess the outcomes emerging from the programme. It involved five elements:

- **Scoping:** a review of key literature and policy documents, and familiarisation with the programme and its main stakeholders;
- **Participatory workshops:** Workshops at the start and end of the evaluation period, brining programme and project staff

together to explore the theory of change behind the programme (start) and the implications of the emerging evaluation findings (end);

- **Programme manager interviews:** Three sets of semi-structured interviews with the key staff responsible for managing the programme at national level;
- **Monitoring data:** Analysis of programme monitoring data collected by local projects and collated by national programme mangers; alongside the design and analysis of evaluation outcomes forms for older people (n=399) and volunteers (n=111).
- **Case studies:** Two waves of qualitative data collection and analysis with key stakeholders at project level, including interviews and focus groups with: project coordinators and their managers; volunteers; older people supported through the programme; local authority representatives.

Programme overview

Responsibility for managing and coordinating the programme lay at national level, and involved four key elements: monitoring and reporting to the funder; coordinating partners and facilitating communication between them; keeping abreast of key national policy and practice developments; transferring the learning from the programme through the development of a toolkit.

At the local level, the basic model that was intended to form the core of the programme was the established of a referral pathway for older people on or entitled to a personal budget from the local authority social care teams into the project. Volunteers were to be recruited to support the older people referred into the project with an assessment of their needs and the provision of information and advice to support them in understanding personal budgets and how to maximise their use. Within these boundaries there was considerable flexibility. As the projects evolved and responded to national and local contexts, different project models emerged.

Delivery models

Four different dimensions emerged which distinguished the different delivery models that developed across the five partners.

Support provision
Two overarching models of support provided to older people were identified.

- Specialist information and advice: providing older people with information and advice about personal budgets and the availability of local services;
- Specialist brokerage and befriending: enabling access for older people to a range of different services and activities in their local area, on the basis of an ongoing assessment of need, some of which is undertaken during befriending visits.

Relationships with the local authority
Developing partnerships between the projects and their local authorities was a fundamental part of the programme design. The nature of relationships between projects and authorities, however, varied considerably. Three models were identified:

- Embedded within the local authority, through co-location or co-working;
- Working alongside the local authority, through developing effective referral mechanisms;
- Working outside the local authority, where it was not possible to operationalise referral mechanisms and alternatives were established.

Referral processes
Five different referral mechanisms were identified across the programme, with most partners developing multiple mechanisms, but with their significance varying considerably:

- Referrals from local authority adult social care teams;
- Referrals from local authority first point of contact teams;
- Referrals from other statutory and voluntary sector providers;
- Referrals from within Age UK;
- Self-referrals.

Staff and volunteer roles

Six models of volunteer involvement were found across the programme, although their significance to the projects varied and in some projects the roles were undertaken by volunteers, and by paid staff in others:

- Assessors: assessing the needs of older people;
- Broker/coordinator: making links and building connections between older people and services;
- Befriender: providing regular company and general help to older people, with a specific emphasis on helping with issues connected to personal budgets and personalisation;
- Information and advice provider: providing information about personal budgets, entitlements, and services;
- Peer supporter: empathising and sharing experiences of receiving personal budgets and/or accessing social care;
- Administrator: helping to administer the project.

Key deliverables

The MOPPU programme had three core national targets, with associated individual project level targets, each of which was assessed through monitoring data.

Deploying volunteers

In total, **266 volunteers were recruited** into the programme, 92% of the original target of 290. At project level, the numbers recruited ranged from 10 to 93. While two projects exceeded their targets, three fell short. Volunteers were recruited into the projects through a range of mechanisms, including through Age UK workers, family and friends, and promotional materials. The evaluation forms suggest that volunteers were predominantly White, female, and aged 55 or above.

Raising awareness

Monitoring data suggests that awareness of personal budgets was raised amongst **11,032** people, 142% of the original target of 7,750. Achievement against targets varied across partners. Awareness raising was achieved through a range of mechanisms, including leaflet distribution, presentations to group sessions, and one-to-one information provision.

Providing support

Across the programme, **1,518** older people were supported to maximise the use of their personal budgets, 102% of the target of 1,495. There was variation across partners in terms of both the absolute number of people supported (from 112 to 445) and the achievement against target (three projects exceeded target, two fell short). Evaluation forms suggest that a majority of support recipients were White and female. Nearly three-quarters (72%) of evaluation form respondents were aged 75 or over, half (51%) said they were frail, and two-thirds (66%) were living alone. Nearly half (47%) were on a local authority personal budget. They looked to the projects for help with information regarding personal budgets (50%) and information about care and support services (39%).

Programme outcomes

The programme has led to outcomes for a number of different stakeholders.

Outcomes for older people and their carers

Older people received support on a range of different issues, from information about personal budgets through to assessments of need, and delivered through a variety of mechanisms, from one to one support through to peer support groups. The support contributed to:

- **Maximising personal budgets and direct payments**: 79% of older people completing evaluation forms, for example, said they understood more about personal budgets as a result of the project. Some had been able to use this new understanding to negotiate with the local authority about their funding levels or how their funds were used.
- **Personalising and enhancing social care**: 82% of older people completing the evaluation forms, for example, agreed they were more involved in deciding what is best for them as a result of the programme; 88% said they had come to understand what their options are, and 69% felt more in control of their situation.

In some cases it was suggested that support planning processes had been improved.

- **Community involvement and holistic care**: Some older people had been supported in accessing services and activities in their local communities in order to meet their wider social care needs. A majority (83%) of older people completing evaluation forms, for example, agreed that they were more knowledgeable about local services, three-quarters (78%) felt more involved in their local community.
- **General well-being**: There was some suggestion that the programme had also contributed to positive outcomes for older people in terms of improvements to their general feelings of well-being. Nearly three-quarters (73%) of those of completing evaluation forms, for example, said they felt better in themselves since being support through the programme, 72% were less worried and 56% less lonely.

Having the time to spend with older people emerged as an important factor in each of these outcomes.

Outcomes for volunteers
The reasons that volunteers gave for getting involved in the MOPPU programme were both altruistic (e.g. wanting to help people) and instrumental (e.g. wanting to learn new skills). Some got a lot out of being involved:

- **Enhanced sense of well-being and confidence:** Three-quarters of the volunteers completing the evaluation form said they felt more appreciated since being involved and a similar proportion felt better within themselves. Half felt more confident as a result of volunteering. Volunteers said the experience was 'fulfilling', it gave them a sense of 'purpose to life', and left them feeling they had 'done something good that day'. It could also, however, be frustrating, especially when they were under-utilised or not given feedback.
- **Using and gaining skills and knowledge**: Volunteers were able to access a range of different training courses through the programme. Many felt they were able to utilise their existing

skills through the programme, and this was satisfying, while many were also able to develop new skills. The learning that came through volunteering in the project, contributing to new understandings about older people's situation and in some cases to changing attitudes and behaviours.

- **Making friends and connections**: Volunteering in their projects led some people to make new friends, and to get more involved in their local communities (74% and 76% of evaluation form respondents agreed with these respective statements).

Outcomes for adult social care teams
The programme had begun to lead to positive outcomes for those adult social care teams that engaged with it:

- **Relieving pressure through increased capacity:** In at least three of the project areas, the projects had effectively added capacity to the adult social care teams, helping to relieve some of the pressure on staff and also add value to the services they provided.
- **Contributing to targets and service outcomes:** In some cases, the projects had been contributing to the achievement of local authority targets and service outcomes, either directly through increasing the capacity and capability of social service teams, or more indirectly through the work the project did to increase levels of awareness and understanding of personal budgets and direct payment, whether inside or outside of local authority referral systems.
- **Facilitating access and inclusion?** In some cases it was hoped that the project would lead to longer term outcomes for adult social care through the engagement of older people who might otherwise have been excluded from services. In particular, it was suggested that while some older people may resist engaging with statutory service provision, they may be more willing to be supported by a voluntary organisation or volunteers.

Outcomes for Age UK
A number of positive outcomes were reported for Age UK, particularly at local project level:

- **Increased profile:** Volunteers and the older people supported in the programme came to know more about Age UK and what it does as a result of the programme. In some cases, Age UK's profile was also raised amongst key stakeholders such as the local authority.
- **Enhanced models of volunteer involvement:** It was suggested that some local partners had been able to involve a more diverse range of volunteers in more diverse roles than had previously been possible.
- **Enhanced internal capacity and capability:** Age UK workers had learnt about personalisation, personal budgets, new ways of working with partner organisations, and of engaging volunteers.

Difference

Across all outcomes, evidence suggests there was variability in their achievement across projects. This is likely to be influenced by the pathways that projects took in response to the national and local contexts.

Critical factors

A number of critical factors at nation and local level have been identified which have shaped the programme as a whole, and influenced the different pathways and models of delivery that projects adopted and the outcomes that were achieved.

National context

- **Policy context and programme positioning**: the programme has been operating within the wider context of personalisation being rolled out across statutory services, while at the same time those services are also dealing with the effects of austerity. This has contributed to a challenging policy context.
- **Programme management and coordination**: Whether or not the correct balance was struck between coherent national programme management and flexible local delivery within MOPPU was debated.

Local context

- **Adult social care structures and processes:** There was consensus across all those involved in programme delivery, that local authority structures, processes, approaches and personnel had a significant (and challenging) impact on project delivery. The evaluation identified a number of hindering and enabling factors.
- **Geography:** The geography of the areas in which the project partners operated had implications for delivery, particularly the level of rurality, the size of the area covered, and boundary issues.
- **Age UK partner structure:** The size, structure and resource base of the project partner organisations influenced programme delivery, as did the configuration of other services within the organisation.
- **Project coordinator capacity and background**: The individuals charged with coordinating projects at the local level had a significant influence on delivery and outcomes: their skills, knowledge, confidence, attitudes, and approaches shaped the projects.

Conclusions

The MOPPU programme has promoted awareness of personal budgets to older people and associated stakeholders, and has reached many more people than originally intended. Levels of understanding about personal budgets have also been raised, albeit in slightly lower numbers than hoped for. This has led to some people maximising the use of their personal budgets, and to others it has facilitated a personalisation of their wider care. It had achieved this, in part, through the involvement of volunteers, who were involved in a range of different roles on a scale that was just short of the initial programme intensions. As well as benefiting the older people supported, some of the volunteers also got a lot out of their involvement.

The programme has then contributed to growing levels of understandings about personal budgets and has supported some people in the move onto direct payments. Perhaps more significantly, however, it has

contributed to enabling some older people to feel more involved in deciding what is best for them, understanding what their options are, feeling more knowledge about what's going on in their local communities, and generally better in themselves. Its success is perhaps best judged as enabling personalisation, which contributed to feelings of well-being and supported people in accessing services, rather than more narrowly maximising older people's use of personal budgets.

Achieving the programme targets, aims and objectives has not been easy. A number of challenges have been experienced at programme and project level which had the potential to undermine programme outcomes, but in many cases have slowly been overcome. The most significant challenge faced was building relationships with and referral pathways from local authorities.

The flexibility within the programme design for individual partners to adapt their projects to their local context meant that they were able to respond to local context. The learning that has been gained through delivery in light of these challenges and complexities and the subsequent evolution of five different 'models' of delivery, with multiple pathways and outcomes, has been valuable in and of itself.

Recommendations

A number of specific recommendations emerge from the evaluation:

To Age UK partners looking to support older people maximise personal budgets:

- Find out what is already happening in your local area, and complement rather than duplicate.

- Integrate specialist advice on personal budgets and care navigation with existing information and advice services.
- Integrate with existing befriending service, so that befrienders are sensitized to identify different needs of the older people they befriend, provide expert knowledge and advice, and broker services.
- Develop multiple referral pathways into the project, including but not limited to those from the local authority.
- Involve volunteers in creative ways that maximise their potential to add value to services.
- Explore the potential to develop opportunities for co-production and co-location with local authorities.
- Be flexible, responsive and pragmatic, but don't lose sight of project goals.
- Be persistent and celebrate success along the way.

To Age UK partners looking to involve volunteers:

- Get everything in place, before recruiting volunteers.
- Be inclusive, both in terms of seeking to engage a wide range of volunteers and to involve them in a wide range of roles.
- Be supportive, by investing in the recruitment, training and ongoing support of volunteers and in the creation of opportunities which match organisational need and volunteer motivation.

For Age UK looking to deliver national programmes through local partners:

- Balance flexibility and autonomy, with guidance and direction.
- Consider the role the organisation can play at national level to advocate for the programme and to shape policy and practice at national and local level.