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Evaluation of The Bureau – Glossop’s Community Wellbeing Charity

Part A – Executive Report

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School of Health and Society

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Introduction – Sophie Glinka, Chief Officer, The Bureau

The Bureau is a community wellbeing charity dedicated to improving the quality of life for the people of Glossopdale and the surrounding areas. We support people and communities across Glossopdale to take action that improves the quality of life of local people. We do this by creating solutions and opportunities that enable people and communities to create positive social change and community benefit, underpinned by our values of:

- ✓ **Passion and Commitment** to making a difference in our community.
- ✓ **Vision and Bravery** to have ideas and make them a reality.
- ✓ **Value of People and Community** by practicing what we preach valuing the strengths and diversity of our staff, volunteers, partners and the people we work with.
- ✓ **Strength in Partnership**; we are stronger together.
- ✓ **Getting it done** by delivering what we say we will; well.
- ✓ **Making an Impact** by making difference in everything we do and being able to demonstrate it.

We have a unique way of working; treating all our projects and activity as one interdependent model that can flex, grow and respond to the needs, interests and opportunities within our community. The model continuously changes as we review what works and respond to feedback or as the funding landscape changes. Despite these changes our work always falls into the following areas:

- Community and Voluntary Work
- Health and Wellbeing Work
- Bureau Partnerships

The Bureau model works flexibly in many different ways through all parts of the system to achieve this. Working with commissioners and strategic partners to shape the future provision and respond to local gaps and needs. Where services are not good enough it acts as a mouthpiece for local people to be a catalyst for change and improvement. The Bureau works to connect the health, social care and other public services to community approaches that support people towards wellness. Our priority is people, treating them as individuals, never assuming what is right for them and accepting them for who they are. We walk alongside people to offer a person-centred approach to improving wellbeing.

The varying support we offer is an interdependent web that wraps around an individual to support them with their needs and provide opportunity for them to give to others; often

simultaneously through voluntary activity. Our volunteers are at the heart of who we are and what we do. They are the thread that runs through every project, helping us to reach more people in our community and bringing a wealth of skills and experience. We value each and every person that comes to us for support or to give their time. There is something for everyone, we make roles to suit them rather than fitting them into roles we need. Because of this we have an incredibly diverse raft of activity happening at The Bureau where people can be valued for who they are and because of this can really shine.

We are keen to understand and evidence further the value of working in this way, looking at our impact as a whole rather than each project as a separate unit. In 2018, The Bureau commissioned the Public Health team at the University of Salford – led by Dr Margaret Coffey – to evaluate its service offer.

Executive Report of the evaluation - Prepared by Dr Margaret Coffey, Dr Cathy Ure & Dr Tamara Brown, University of Salford

Evaluation aims

The aims of the evaluation were to:

1. Explore the health and wellbeing outcomes of The Bureau’s activities, including cost effectiveness (where possible) achieved between 1st August 2017 and 31st July 2018, using secondary data.
2. Explore the experience of engaging with The Bureau’s activities from a stakeholder, client and volunteer perspective.
3. Provide recommendations in respect of The Bureau’s activities, including those relating to aspects of data collected and evaluation measures that could be put in place in the future.

Methodology

The evaluation was carried out using mixed methods, comprising secondary data analysis of routinely collected data and interviews with participants, as follows:

- Step 1 – secondary data analysis of routinely collected data regarding service provision. Details of how secondary data was collected and analysed for the period 1st August 2017 to 31st July 2018, are available in Part B – Technical Report.
- Step 2 – primary data collection and analysis using 31 interviews (telephone/face-to-face) with stakeholders, volunteers and clients to understand the experience and impact of engaging with The Bureau’s services.

Findings

Summary of secondary data availability

- The Bureau uses SWEMWBS to explore wellbeing outcomes. SWEMWBS measures both mental and emotional wellbeing (i.e. how good someone feels) and psychological wellbeing (i.e. how well someone feels they are functioning). It is a simple paper-based survey. It can be used as a measurement tool, before and after an intervention, to identify if there has been a step change in the wellbeing scores. Thus, providing evidence that an intervention has improved the wellbeing of a client. Within The Bureau, it is administered to new clients at the outset of their engagement with The Bureau and repeated at intervals. The evaluation identified that client SWEMWBS (wellbeing) data is collected although ‘health’ data *per se* is not collected. The data collected is not always complete, nor is it consistently collected across the different services. In this regard there is scope to extend the collection of both health and wellbeing data, with timepoints for each data collection round to be considered, to enable consistent points for health and wellbeing data collection throughout the client journey.
- Data, in respect of the health and wellbeing of volunteers (as opposed to clients) does not appear to be routinely collected. Where possible it would be useful to also collect this data. Potentially, existing meetings could be used to collect data, although creative ways of data collection (e.g. telephone survey/interviews) need to be considered for some services, particularly those where clients or volunteers do not travel into The Bureau (e.g. Call Companions).

Overall summary of secondary data

Wellbeing outcomes data

SWEMWBS data is collected by The Bureau, and analysis of the data available for the evaluation period 1st August 2017 to the 31st of July 2018 was completed.

Pre and post SWEMWBS results from 76 clients indicated that attending the service significantly improved their wellbeing. The average pre score was 18.34, while the average post score was 21.40. The difference between the pre and post SWEMWBS scores of the clients was found to be statistically significant, indicating that attending the service significantly improved clients’ wellbeing.

- When compared to normative data these results indicate that the clients attending The Bureau have below than average wellbeing both before and after attending the service.
- However, only 7 clients provided long-term follow-up data, therefore the lasting effect of utilising services on clients’ wellbeing is unknown

Monetising volunteer hours

- The estimated total annual value of the volunteers working within The Bureau was calculated as £71,818.77¹.
- This monetary figure does not capture the wider social benefits of volunteers, such as social cohesion or inclusion (Wales Council for Voluntary Action, 2016).

Monetising social value

- The Bureau has wide reaching social economic benefits.
- The estimated net social value of The Bureau was calculated as £710,431.29².

¹ Estimated using the description of job roles and hours worked [provided by The Bureau] and the ONS Annual Survey of Hours and Earnings (ASHE, 2018) to determine the average market value wages. This is an estimated total value as some of the data supplied were approximate figures. Moreover, some information was not provided such as the number of hours worked per month by the buddies [See Technical Report, section 4.1.2.].

² This value was calculated using SWEMWBS scores and the costs of the organisation, including the volunteers value as a cost. These results need to be read with caution due to limitations in the data provided, such as the exact number of services users per year was unknown, and the cost data provided did not align with the time periods of the study.

Overall summary of primary data analysis

An overview of the strengths, challenges, opportunities and threats identified by stakeholders, volunteers and clients is provided in Table 1.

Table 1: Themes identified by stakeholders, volunteers and clients

<p>Strengths</p> <ul style="list-style-type: none"> • Thriving organisation • Good, supportive staff • Politically astute • Successful partnership working • Innovative ways of working • Positive impact on health and wellbeing of volunteers and clients • Provide continuity and a sense of security to clients • Good location 	<p>Challenges</p> <ul style="list-style-type: none"> • Flexibility in how to engage with grant receivers and acknowledging others’ strengths • Resource limitations • Restricted access to first floor offices • Providing evidence of effectiveness
<p>Opportunities</p> <ul style="list-style-type: none"> • Ensuring evidence is consistent/applicable to all evaluations • More partnership-based working • Improved communications with stakeholders, volunteers and clients • Improve support for first time users of group sessions 	<p>Threats</p> <ul style="list-style-type: none"> • Sustainability/funding challenges • Challenging geographical position

Summary of stakeholder perspectives

- **Stakeholders who worked with and provided funding** to The Bureau regarded them very highly/positively, describing the organisation as thriving, with good staff who were politically astute, successful at partnership working; in a good location that is facilitative of networking/good relationships; and using innovative and creative ways of working.
- They were described as good value for money, with potential/capacity to develop further.

- Stakeholders identified the key challenges to The Bureau’s sustainability/capacity related to the lack of core/infrastructure funding that The Bureau attracted, partly due to their small size, their geographical location, and the fact that their financial footprint was not a clear match, as they sat between two CCGs.

“what they do well is grasp this strategic understanding of the work that they deliver and how they can link that into their operational delivery, but then to also help draw down funds to deliver the wider community stuff that they do. And then, from what I’ve also observed, is the way that the front-line team engage and interact with people. That was a really positive experience to observe” (Interviewee 4 – grant provider).

- **Stakeholders who purchased services and worked with** The Bureau again spoke highly of the organisation, discussing the value of the physical space, it’s location and how it was decorated, how people worked well together, and the additional help that staff provided to them.
- There were few improvements or changes suggested, but again the scope for them being better resourced was mentioned, in terms of more staff and funding, which would enable them to extend/provide further services.
- **Stakeholders who received funding/grants from** The Bureau again spoke highly of the facilities that The Bureau had and the services they offered.
- They perceived however that there was scope for them to work more closely with The Bureau, and that the links between The Bureau and themselves could be strengthened.

“I would have liked to have seen more partnership working...to me a partnership is where you exchange ideas and you look and where you’re going to move forward; it’s not renting out a room to a group” (Stakeholder 11).

- They felt that the close links that The Bureau had to some of its funders had led to a change to their ways of working, i.e. a social prescribing model and ethos, which, to some degree, had led to the exclusion of other ways of working.

Summary of volunteer perspectives

- Twelve volunteers were interviewed to understand their experiences of The Bureau. Five were volunteer drivers, four were clients who had subsequently become volunteers, and two were volunteers who worked within The Bureau.
- The drivers reported very much enjoying their role, which they found socially rewarding.
- The drivers spoke very favourably about The Bureau, discussing how it had become more professional over the years, and was very highly thought of by the clients that used and valued their services.
- Drivers spoke about the positive benefits the service had on the clients, enabling them to attend medical appointments, and occasionally social appointments. This saved them money, but more importantly, kept their clients safe, provided them with an opportunity to talk, and reduced their social isolation.
- Training was provided by The Bureau as needed (e.g. wheelchair training), and communication was regular between the drivers and The Bureau and was reported as good.
- Some of the drivers felt that both themselves and their clients had limited knowledge of the broad range of services that The Bureau provided.

“...it’s a good scheme, and I think, talking to the people I take on my trips, it’s a well-liked scheme and an appreciated scheme...I don’t think I’ve ever had negative feedback from anyone” (Volunteer 9 – Driver)

- Two ‘general volunteers’ who helped at The Bureau were interviewed. They valued their roles, and the opportunity to give back to the community.
- They reported the very positive health and wellbeing impact, including social benefits, of volunteering for The Bureau.

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- Occasional challenges were highlighted, particularly relating to the extent with which they could help people with some issues, e.g. housing, or those that would normally be considered within the remit of social workers.
- Clients who had since become volunteers had been referred to, or got involved with, The Bureau due to a range of health issues that had led to them becoming socially isolated. The volunteers discussed how they transitioned from being clients to volunteers, because of how much they got out of the services, which made them want to give back.
- The volunteers spoke very highly of The Bureau, describing the warmth, friendliness and helpfulness of the staff with whom they had developed strong relationships.
- They advocated the services of The Bureau to friends, family and colleagues.
- The volunteers discussed the huge difference that The Bureau had made to their lives, reducing their anxiety and isolation, and providing them with skills, training and the confidence to gain employment e.g. as a mentor for a local organisation.

“It’s made a large difference for me anyway, because I’ve gone from being practically stuck at home 24/7; to - I actually leave the house every day now” (Volunteer 7 – previous client).

- Changes that volunteers advocated could be made to the service were; more/better advertising (so that others in the community could have a better idea of the range of services that they offer); having more resources (including staff) to enable The Bureau to extend the valuable work that they did; and ensuring that staff changes (e.g. when they moved from one service to another, or when staff left) could be undertaken a bit more gradually/smoothly.

Summary of clients’ perspectives

The Bureau was regarded very highly by clients. The experience of being socially isolated was a common theme across these interviews. Clients described a range of health and wellbeing benefits gained from utilising the services on offer. These included gaining social support, gaining purpose and having something to look forward to; experiencing a sense of continuity and security; and being able to ‘be who they are’.

“Actually enjoy coming here, I enjoy the people. Nobody has any preconceived conceptions of you which is nice” (client 8)

- Clients were very complementary about the services and support provided by The Bureau.
- Some clients found resource limitations challenging including ability to get to Glossop, and therefore The Bureau’s services, due to a lack of public transport or limitations created by the transport available to take people to seated exercise classes.

“by the same rule it all depends on getting on the bus, because a lot of people get on the bus, which holds, I think 15, 16 people, so that limits how, the size of the class” (client 4).

- Some clients found their initial experience of engaging with group sessions at The Bureau challenging with an initial sense of greater isolation rather than an immediate sense of gaining benefit.
- Opportunities identified by clients to improve the service provision included improving communication – what The Bureau ‘is’; what’s on and when; widening opportunities for participation and arranging outings and events for clients.

Recommendations

Recommendations from the secondary data analysis

1. To consider extending the collection of wellbeing data (using SWEMWBS), to enable consistent points of data collection throughout the client journey.
2. To collect ‘health’ data. The single-item self-rated health measure advocated by the North West Public Health Observatory (2014) is recommended. The measure has been shown to be concise, a strong predictor of mortality, and has been included in several long-running British surveys. The single-item measure takes the form of a question, ‘how is your health in general’, with five response choices available, ranging from very good to very bad (Bowling, 2005).
3. To collect health and wellbeing data from volunteers, which could be included as part of service evaluations.
4. To use existing meetings to collect health and wellbeing data and consider more creative ways of data collection (e.g. telephone survey/interviews) for some services, particularly those where clients or volunteers do not travel into The Bureau.
5. Regular evaluations should be carried out, to identify strengths and weaknesses relating to service provision, and opportunities for further development.

Recommendations in respect of volunteer hours

1. To routinely record volunteer hours.
2. To have a clear description of each volunteer job role, allowing for an accurate determination of the average market value wages.

Recommendations in respect of the secondary analysis of SWEMWBS pre and post scores

1. To consider extending the collection of wellbeing data (using SWEMWBS), to enable consistent points of data collection throughout the client journey and a longer-term follow up.

Recommendations in respect of the monetisation of social value

1. To ensure that the number of clients accessing the service is recorded.
2. To continue to collect SWEMWBS data along with the cost of the services provided.

3. To routinely calculate the social value of The Bureau, allowing for a greater understanding of the benefits of the service.

Recommendations in respect of the stakeholder findings

1. Maintain the excellent services that are delivered and explore ways of developing them further.
2. Explore ways of obtaining core/infrastructure funding to enable the services to be expanded.
3. Carry out systematic and regular evaluations of the services provided to demonstrate the value of The Bureau’s work and enhance the ability to bid for core/infrastructure funding.
4. Work with funders to explore what social return on investment (SORI) look like from their perspective.
5. Consider ways to strengthen partnership working with those services that The Bureau provides funding for.

Recommendations in respect of the volunteer findings

1. Maintain the excellent driver services that are delivered and explore ways of developing them further to include driving for social purposes (i.e. to visit friends or have a haircut).
2. Without breaching privacy consider ways to collect additional information from clients in respect of their proposed journey (e.g. with whom they are travelling, whether they are bringing a wheelchair, and whether there is the possibility of them feeling unwell after their medical appointments).
3. Explore ways of advertising The Bureau’s services more widely.
4. Maintain and encourage opportunities for clients to transition to volunteers.
5. Explore ways of extending the service.
6. Consider how changes (e.g. from one service to another, or staff changes) could be managed more smoothly.

Recommendations in respect of the clients’ findings

1. Maintain the excellent range of service provision delivered (funding permitting).

2. Consider ways to increase clients' awareness of the different groups and activities that The Bureau supports, to encourage wider participation, including potential volunteering opportunities.
3. Consider developing a by-line for advertising materials to communicate the purpose of The Bureau.
4. Consider increasing the number of drop-in sessions available for clients.
5. Explore opportunities to fund planned social events including trips out for clients or sessions facilitated by external professionals.