THE IMPACT OF SOCIAL PRESCRIBING IN YORK

An evaluation report by York CVS

January 2019
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Message from Alison and Jasmine

Jasmine Howard, Ways to Wellbeing Project Leader
Alison Semmence, Chief Executive, York CVS

York’s social prescribing service, Ways to Wellbeing, provides a person centred, holistic approach. Based within GP surgeries, we work alongside people to explore non-medical options to improve wellbeing.

We know that if you’re born into poverty you’re more likely to walk a difficult path in life – to be overweight, have high blood pressure, and even die earlier.

We know that if you have close relationships and access to social interaction, you’re more likely to live a healthier, longer life. Social isolation is now recognised as a public health risk.

Good social prescribing is far more than signposting, the practitioner role is essential to its success. Without a supportive framework, information provision can be a token action. This report highlights the importance of being accepted for where you are, not where you should be, giving time and space to explore what is important to people, thinking outside the box and giving due consideration to the emotional and practical barriers that can prevent people from participating in their communities.

At the heart of Ways to Wellbeing are relationships. The relationships and collaboration between the Ways to Wellbeing worker and the GPs who make the referrals. The relationships between the Ways to Wellbeing worker and the clients. These connections and those with our statutory, voluntary and community partners are what enable us to make difference.

As an infrastructure organisation York CVS is well placed to host Ways to Wellbeing. Delivering a diverse range of social action projects, York CVS provides a neutral and non-stigmatising environment from which to run the Ways to Wellbeing service. We are well connected with a network of over 200 different voluntary, community and social enterprise sector organisations.

A Social Return on Investment evaluation approach allows us to articulate how this preventative approach has create social value and brought life changing outcomes to people who needed a little help to get to where they need to go.

The Royal College of General Practitioners has called for funding for every GP surgery to have access to a dedicated social prescriber. We hope that this report contributes to the national evidence base for social prescribing and supports the case for social prescribing across the country.
What we do

2.1. Social Prescribing

Social prescribing aims to address the challenges faced by GPs of increasing pressure and stretched resources. It recognises that the determinants of health are wide and varying. It tackles these by connecting people with voluntary and community organisations who provide a range of support options. Nationally, the way social prescribing is delivered differs, with models tailored to local resources and opportunities. Fundamental to all is that social prescribing is a preventative approach, providing a framework to empower people to make changes that will be of benefit to their health and wellbeing. The Kings Fund describe social prescribing as:

“Recognising that people’s health is determined primarily by a range of social, economic and environmental factors, social prescribing seeks to address people’s needs in a holistic way. It also aims to support individuals to take greater control of their own health.”

2.2. Ways to Wellbeing

Ways to Wellbeing is York’s version of social prescribing. It is based on the five ways to wellbeing described by the New Economics Foundation of Connect, Give, Take Notice, Keep Learning and Be Active.

We believe in the power of collaboration, relationships and exploring what is meaningful to someone in finding their own Ways to Wellbeing. We work creatively, pragmatically and flexibly to identify non-medical options that can improve wellbeing. In working with people, we draw on opportunities in the community as well as financial support, information and advice, informal resources and peer support.

We spend time with individuals on a one-to-one basis to:

- Listen, hear their story
- Identify potential networks of support for individual.
- Work with individuals to achieve the outcomes that are important to them.
- Identify and challenge barriers to improving wellbeing. For example, finding ways for a person to attend a local community group.
- Help individuals to make simple changes to their lifestyle and their home environment, to improve independence and quality of life. For example, supporting someone to get an Occupational Therapy assessment or apply for a grant for household items.
- Help individuals identify their strengths and develop new ways of doing things.
- We offer a volunteering pathway to facilitate embedding of new skills and confidence building. Giving back is empowering, providing a sense of purpose and involvement with the local community.

An example of our work is the best way to understand the Ways to Wellbeing service:

A client was referred to us because she had a history of bipolar and had lost her self-esteem, causing her to become socially isolated. Ways to Wellbeing worked with her, meeting in the community to build confidence and explore places to socialise nearby.

Now she has weekly visits from a Runner from GoodGym and attends sessions at Kyra. She also joins in with Compassionate Cards workshops run by Ways to Wellbeing to socialise, craft, and raise money for charity.

She reflected that Ways to Wellbeing helped her to make a plan to create change. Also, being supported by someone else to attend things for the first time boosted her motivation. Before, she would find excuses to stay home. She talks about doing research on running and exercise to share with her GoodGym runner. Being viewed as a ‘coach’ and someone who can help feels more empowering than someone visiting just because she was lonely. This has also helped her to start to lose weight and move around more. She still has good days and bad days, but now she has things to look forward to and says she feels like a different woman.

Ways to Wellbeing was first commissioned in 2015, initially based in Priory Medical Group. We have recently expanded and now also work with Haxby Group Practice and York Medical Group.

We take referrals from GPs and the wider practice, plus self-referrals from those registered within the three medical groups. This annual evaluation is based on clients from Priory Medical Group, as we have been based in the other two groups for less than a year.

https://www.kingsfund.org.uk/publications/social-prescribing
https://www.gov.uk/government/publications/five-ways-to-mental-wellbeing
How we measure outcomes

3.1. Our Approach

In the three years since commission we have considered carefully the challenge of measuring what changes for people as a result of accessing the service. We have observed with keen interest the development of other social prescribing services nationally and acknowledged the difficulties faced by all in measuring the broad and fluid concept of wellbeing.

For Ways to Wellbeing, the challenge can be boiled down to the need for balance between a desire to communicate our impact in a robust way and a need to uphold the ethos of the service. We know, anecdotally, that the service makes a difference to people’s lives. Capturing this difference and understanding the drivers is important to inform service development and to demonstrate our value to stakeholders. On the other hand, the ethos of the service is person centred and flexible, providing an alternative to clinical or medical interventions. Requesting all clients complete lengthy clinical based questionnaires for our benefit would not be appropriate. Keeping this balancing act in our minds, we have developed our framework for outcome measurement as shown in figure 1.

We place clients at the centre of our approach, asking them directly what difference Ways to Wellbeing makes to them and subsequently, matching outcome measures carefully. For this evaluation, we reviewed approaches that would allow us to communicate our findings with a diverse range of stakeholders. We chose Social Return on Investment (SROI) due to its comprehensiveness in accounting for a broad concept of value, capturing social as well as economic outcomes.

3.2. Our Stakeholders

There are two main groups of people who are affected by our work:

1. Clients, the people who access Ways to Wellbeing.
2. Priory Medical Group, the GP practice in which we are based.

In SROI analysis, stakeholders are only included if it is considered that the change they experience is significant and relevant to the decisions made about a service. Ways to Wellbeing potentially affects other groups such as voluntary sector organisations, statutory services, e.g. mental health services and the families of clients. The impact on these stakeholders should be explored further in future.

3.2.1. Clients

For the purposes of this evaluation, clients are the 71 people who accessed and engaged with the Ways to Wellbeing service in a one year period from July 2017-June 2018 from Priory Medical Group.

The majority of clients were female as displayed in figure 2. The highest proportion of clients were referred to increase emotional and mental wellbeing as shown overleaf.
3.3. What we Measure

Standardised measurement tools

Based on the initial pilot evaluation and client interviews, we measured these outcomes prior to accessing Ways to Wellbeing and at a three-month follow-up point:

- Mental wellbeing
- Confidence
- Loneliness

The scales used can be seen in Appendix II.

It was not appropriate for all clients to complete these formal outcomes measures. In total, 26 clients completed both the baseline and follow-up measures above.

Outcome and intermediary count measures

For all 71 clients, we also measured:

- The number of GP appointments held by clients before accessing the service and again three months later.
- The number of new volunteers and the hours given.
- The number of people engaging in physical activity as a result of the service.

The number of GP appointments is an outcome measure, whereas the number of new volunteers and people engaging in physical activity are intermediaries in our Theory of Change. This means that they are part of the necessary steps to create change in physical and mental wellbeing and loneliness.

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### Figure 3

<table>
<thead>
<tr>
<th>Reasons for Referral</th>
<th>People</th>
<th>Percentages*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional and mental wellbeing</td>
<td>40</td>
<td>56%</td>
</tr>
<tr>
<td>Increased social and leisure activities</td>
<td>17</td>
<td>24%</td>
</tr>
<tr>
<td>Long term conditions</td>
<td>13</td>
<td>18%</td>
</tr>
<tr>
<td>Exercise</td>
<td>11</td>
<td>15%</td>
</tr>
<tr>
<td>Advice</td>
<td>10</td>
<td>14%</td>
</tr>
<tr>
<td>Carers support</td>
<td>5</td>
<td>7%</td>
</tr>
<tr>
<td>Advocacy</td>
<td>4</td>
<td>6%</td>
</tr>
<tr>
<td>Volunteering and skills development</td>
<td>1</td>
<td>1%</td>
</tr>
</tbody>
</table>

*Clients may be referred for more than one reason.

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**Interviews**

Six clients were interviewed to help us understand any further outcomes and develop our measurement framework.

**GP Surveys**

Similarly, eight GPs participated in an online survey to further explore outcomes and inform future evaluations.
The difference we make

4.1. Clients

Outcomes

For people accessing Ways to Wellbeing, we found an improvement across all standardised measures:

- Increased mental wellbeing, there was a statistically significant increase in average wellbeing score from 16.3 to 20.7, a four point difference. 93% of clients improved, 7% stayed the same.

- Increased confidence, there was a statistically significant increase in average confidence score from 2.1 to 3. 69% clients improved, 27% stayed the same and 4% became less confident.

- Decreased loneliness, there was a statistically significant decrease in loneliness reported from 2.2 to 1.6. 54% improved, 42% stayed the same and 4% became more lonely.

Intermediate changes

We also found that one fifth of clients accessing the service increased their physical exercise or chose to give back by becoming a Ways to Wellbeing volunteer.

- Increased physical exercise, 21% of clients increased their physical exercise due to accessing the service.

- Increased volunteering, 21% of clients became Ways to Wellbeing volunteers, giving a total of 213 hours over the year period.

Number of hours volunteering: 213

Mental wellbeing scores increased:

- 16.3 to 20.7

One fifth increased their exercise

After accessing Ways to Wellbeing, the client...

- Improved 93%
- Stayed the same 6%
- Became worse 7%

Increased mental wellbeing

Increased confidence

Decreased loneliness

Number of hours volunteering: 213

Mental wellbeing scores increased:

- 16.3 to 20.7

One fifth increased their exercise
Mental Wellbeing

The significant increase in wellbeing for nearly all clients demonstrates that accessing the service promoted feelings of optimism, usefulness, relaxation and the ability to deal with life challenges. The average wellbeing score after three months is much closer to the national average of 26. There is significant potential for this to continue to improve as a result of the support to connect with activities and groups. One client demonstrates this when talking about the long term impact of the service, highlighting that progress can often take time.

“Probably it has a long term effect though very subtle. I don’t always feel good. Sometimes I say something that I regret or I start to worry about it because I have paranoid problems. Being with other people is a trigger for paranoid thoughts but it would probably be worse if I wasn’t with other people, if I was totally isolated. So it isn’t perfect but it’s better than what it would be otherwise.”

Further quotes demonstrate that it is the connection to support such as financial advice, counselling or exercise that promotes wellbeing. The final quote also highlights that, although the work of partners is vitally important, without Ways to Wellbeing the connections would not have been made in the first place.
“The financial support has taken a big pressure off because to be honest I would literally have had no gas and electric without her [Ways to Wellbeing worker]. I would literally have been sat there in the dark and cold without it. I’ve actually run out of electric for lights, only a couple of hours before and it’s awful. It’s quite depressing, you know because I’m terrible for lights, I like everything light and bright.”

“I know I’m knocking on a bit, but I like to go for a swim but I wasn’t feeling comfortable going for a swim and leaving my wife by herself. Through [the Ways to Wellbeing worker] Age UK arranged for someone to come from half past eight to half past ten on a Monday morning so that I can go swimming. When I’m in that water, I have some headphones, and I have an MP3 player specially for swimming and I play my music and that’s all I’m thinking about and it takes my mind away from anything and everything else.

I just love being in the water, I always have done, right from being a kid and I just swim up and down. I go at that time because it’s very quiet and you can just swim until your hearts content and it’s just a wonderful feeling.”

“The counselling has been good because it’s made me think about what I can do myself and this might not seem like much from ten weeks counselling but it made me think about how I was when I lose my temper. I developed this smile technique for when I feel myself getting cross.

It doesn’t always work because sometimes I’m so far gone and I can’t do it but if I feel it coming on, the anger and the frustration, I make myself smile simply. I physically make myself smile, whole face. Most of the time that helps me to not get angry and I just carry on and it doesn’t build up. Without [the Ways to Wellbeing worker] I wouldn’t have had the counselling.”
Confidence

Self-confidence is important in making and maintaining change. It contributes to resilience when dealing with challenges. The improvement in self-confidence for two thirds of clients suggests that people are becoming better equipped to deal with life’s difficulties as a result of accessing the service. Clients told us that the service achieves this through empowerment of clients, a positive outlook and supporting clients to make small changes first.

“I went away feeling positive about the things she’d spoken to me about. Knowing that she’d agreed that she would arrange to get some paperwork together to help me to facilitate various things outside the house or inside the house.”

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Loneliness

Loneliness improved for just over half of the clients, with just under half remaining the same. Time is needed to tackle loneliness. Within the three month follow up period, clients are connected with activities, volunteering and groups and are therefore no longer socially isolated. However, feelings of loneliness take longer to improve. For people that have been very socially isolated, it is not uncommon for them to want to observe rather than participate in a group situation initially. As confidence and trust builds, people will then start to engage and build connections with others.

“If I go to St Nick’s or to the Breathe Bags sessions I’m with other people. At St Nick’s not only am I in a beautiful natural surrounding but I’m with other people who I’m getting to know better.”

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Physically swimming is obviously very good because it’s exercise. I don’t get exercise now like I used to because my wife doesn’t go out, so it’s one way of getting out of the house and just losing myself.”

“I lost a bit of weight which might have something to do with the conservation work.”

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Volunteering

Ways to Wellbeing provides opportunities for clients to become volunteers, through a variety of roles such as making self-care gifts, ‘Breathe Boxes’, to give to other clients, cardmaking, photography and being a ‘buddy’ to other clients. Ways to Wellbeing also connects people with other volunteering opportunities in the wider sector. In addition, to the value created by people giving their time to help others, the importance of volunteering for self-worth and sense of purpose is recognised by clients.

“I think helping with the Breathe Boxes has given me a chance to be of service to others without putting my mental health in jeopardy. Unfortunately, due to changing circumstances, my work became very stressful and my mental health declined. But doing the Breathe Bags allows me to fulfil my altruistic side without stress and anxiety and damage to my mental health.”

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Physical Exercise and Health

A fifth of clients took up a wide variety of physical exercise such as walking groups, yoga, personal training, falls prevention classes and swimming, as a result of accessing the service. Whilst quantitative data was not collected in this evaluation on the improvement of physical health, the uptake of exercise is known to reduce the risk of heart disease, stroke, diabetes, cancer and osteoarthritis.

“I’ve worked in a shop all my life, so I thought I don’t fancy going behind a counter any more but I volunteer at the Holy Trinity Church on Goodramgate. I do meet and greet, I go once a week to my hour with the children every Tuesday morning.”

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“I was also suggested that I volunteer maybe for something. I’ve worked in a shop all my life, so I thought I don’t fancy going behind a counter any more but I volunteer at the Holy Trinity Church on Goodramgate. I do meet and greet, I go once a week and do three hours there. That gets me out and about and meeting people. I couldn’t sit at home, it would drive me out and about and meeting people. I couldn’t sit at home, it would drive me round the bend. Maybe two days a week when I’m in, rest of the time I’m going somewhere, doing something. I think that is most essential. I wasn’t doing quite as much before when the depression set off, so I am doing more getting out that much more.”

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**4.2. Priory Medical Group**

The combination of numerical data and qualitative data provided information to allow us to understand outcomes of the service for Priory Medical Group.

The survey was an opportunity to explore changes beyond GP appointment numbers. Anecdotally, we are aware of a culture shift within the practice. Over time, referrals to the service have built and GPs are more open to thinking beyond medical interventions. Capturing the value of Ways to Wellbeing in contributing to this is challenging. The survey provides a base to start to understand this better.

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**GP Appointments**

There was a statistically significant reduction in the average number of GP appointments three months after accessing Ways to Wellbeing. The total number of appointments held by Ways to Wellbeing clients prior to accessing the service was 210, and the total after was 143. This is a 32% reduction in overall appointments. Nationally, the figure is reported as 24%¹ therefore, Ways to Wellbeing is performing above and beyond other social prescribing services.

**GP Survey**

A survey of eight GPs from Priory Medical Group provided further insight into outcomes of working with the Ways to Wellbeing service.

75% said the service has reduced pressure on GP time for non medical needs, echoing the reduction in GP appointments. Additionally, 100% said that the service had enabled them to take a more holistic approach in meeting patients’ health and wellbeing needs. Increased pressure and short appointment times often do not facilitate thinking beyond medical needs. It is positive to recognise that as a result of working with the team, GPs feel more able to consider people holistically.

The value of the service as seen by GPs is illustrated in the quotes below:

"This is an absolutely amazing service, valued by patients and clinicians alike. It helps a cohort of people who fall between the cracks of health and social care needs. The staggering improvement in wellbeing achieved by our Ways to Wellbeing worker on the lives of individuals really struggling with low level confidence, social isolation and a sense of community has been astonishing.

We all highly value this service and the integration of this with primary care, where it absolutely best sits- as “first point of contact” for health and social care needs. Only wish this service could be available for all our 9 sites and to the wider York community in the near future."

“We have a lot of confidence in our Ways to Wellbeing co-ordinator and the difference that she is making to people’s lives. It is an incredibly valuable service, made especially more so by our coordinator’s knowledge, commitment and personality."

“I have had excellent feedback from some of my most challenging patients”

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4.3. Social Return on Investment

The SROI analysis in this report follows the Cabinet Office Guide (2012) to calculating social value. Throughout, we have followed the principles set out in this guide and would like to emphasise:

- **Understanding what changes**
  We have worked hard to understand our outcomes and how they arise. We considered both intended and unintended outcomes, as well as positive and negative changes. Our theory of change (appendix II) sets out how our changes happen.

- **Value the things that matter**
  Financial proxies are used that mean outcomes not usually thought of in terms of value can be recognised.

- **Do not over claim**
  We have taken great care to consider factors at every stage of the analysis that may influence the result. We acknowledge the contribution of others to the outcomes, use benchmarks to consider what would have happened anyway and recognise that we cannot calculate benefit past one year.

- **Be transparent**
  Although our aim is to produce a jargon free and untechnical report we would like to share our methodology and learning with stakeholders. Therefore, further details of this evaluation can be found in the appendices and we would also be delighted to have further conversations with anyone interested, so do get in touch!

We know that focusing on value in monetary units can often distract from the underlying outcomes. It is important that the SROI is understood within the context of the rest of this report, including the interviews, case studies and survey.

Social Return on Investment is calculated as follows:

\[
SROI = \frac{\text{Total Present Value}}{\text{Total Inputs}}
\]

The total value created by Ways to Wellbeing is based on changes in outcomes based on changes in the outcomes measured and displayed in the table below (see appendix III for more information).

The total inputs is based on the value required to run the Priory Medical Group service for one year was £60,000.

In other words, for every £1 invested in Ways to Wellbeing, £5.16 of social value is created.

It should be noted that we have taken a conservative approach to calculating SROI. We have included financial proxies for only the outcomes we have measured and can evidence a change in (see appendix III). We have also not included outcomes for other stakeholders, such as the local mental health provider and hospital trust. Other social prescribing evaluations have demonstrated that social prescribing can contribute to reduced Accident and Emergency attendances, hospital admissions, and mental health service appointments. Therefore, the overall SROI is likely to be much higher than £5.16.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Present Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased mental wellbeing</td>
<td>£215,148.52</td>
</tr>
<tr>
<td>Increased confidence</td>
<td>£30,070.79</td>
</tr>
<tr>
<td>Decreased loneliness</td>
<td>£13,002.26</td>
</tr>
<tr>
<td>Increased physical activity</td>
<td>£48,956.01</td>
</tr>
<tr>
<td>Reduction in GP Appointments</td>
<td>£969.52</td>
</tr>
<tr>
<td>Increased volunteering</td>
<td>£1,289.11</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>£309,436.22</strong></td>
</tr>
</tbody>
</table>

**Therefore our SROI on investment is: £5.16:£1**

For every £1 invested in Ways to Wellbeing, £5.16 of social value is created.
Why Ways to Wellbeing works

Understanding what makes Ways to Wellbeing different to other interventions or services alongside outcomes and the process through which they occur is important. We asked clients what the unique and important elements are that have enabled them to make change:

- Collaboration with partners
- Open and non-judgemental
- Listening
- Maintaining an open door

Collaborating with partners

The worker being aware of and having contact with a wide range of opportunities for clients was described as important. Enabling people to articulate their goals and putting them in touch with the people that can help clients to achieve them is central to Ways to Wellbeing.

I’m very grateful to Ways to Wellbeing for introducing her [fitness coach] because it’s something I hadn’t really considered at all or I would have been very wary approaching somebody.

The Ways to Wellbeing workers’ wealth of contacts, wide range of contacts all over the place have been great. I would never have found them without Ways to Wellbeing.

I wouldn’t have found Kelly (Accessible Arts and Media), of course I wouldn’t.

Open and non-judgemental

Working from a stance of acceptance and ensuring clients do not feel judged or labelled is important to promoting trust and developing a relationship conducive to positive change.

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I find that the Ways to Wellbeing worker understood, didn’t expect anything of me. The worker has that way of accepting how I was on any particular day.

The way the Ways to Wellbeing worker talked through what my possibilities were didn’t make me as if I was going into a group of ‘sick people’. I think that’s helped me most of all in so far as I can do an activity that’s helping me but without categorising people.

I wasn’t really sure what to expect but the Ways to Wellbeing worker was very kind, friendly and put me at my ease. One of my difficulties is actually getting out of the house and attending for appointments so I eventually did get myself there. I was quite happy at that first session to arrange another meeting. After all the trepidation I felt she eased things for me which was good. It wasn’t a terribly intrusive experience which I was kind of expecting it to be.
Simply being given the chance to be heard in a non-pressured environment was reported as a significant factor by clients. In some cases, people are not ready to make any changes but being listened to has a positive effect in itself. The service works in a person-centred way, empowering people to make the changes that are important to them. Providing a guiding hand, rather than taking the lead, promotes autonomy and the motivation to succeed.

The first thing I noticed when I was referred was that I expected a quarter of an hour appointment and it was at least an hour. My goodness me, did I need it and more really. Having the hour was quite a relief because I had so much to say and so much to tell and that was brilliant from my point of view.

When I first came to Ways to Wellbeing I didn’t know what I wanted to do, we talked about these things that were available. My mind and me weren’t ready to go down any of those roads yet but we talked and it was great to talk, great to get it off my chest.

I don’t think any of the changes would have been made without Ways to Wellbeing. I’ve had everything offered to me by the family. I think it was just talking to somebody who listened rather than who said this will happen, that will happen, you’ve got to do this, you’ve got to do that. There was no pressure.

Ways to Wellbeing recognises that people’s lives are often unpredictable and that they may need some further support in future. Additionally, sometimes people may need more time before engaging with the service. Therefore, Ways to Wellbeing works to ensure clients know that there is always an open door. It does this by having flexibility in the number of meetings with people and sharing contact details after the sessions come to an end.

I tend to try and do things myself anyway because I’ve never been able to rely on anybody else but then if I can’t I know that she’s [the ways to wellbeing worker] just a text away to pick her brains really.

I’m going on the right way. But I think all this helps and knowing that there is somebody there that you can ring up.

After a few months, things deteriorated a bit, things weren’t getting any better at home at all and I was really struggling. I’d got to the stage where I couldn’t cope any more and I thought I must do something. I emailed the Ways to Wellbeing worker and I told her what had happened because I knew I could.

Timing is very important as well, the way your body reacts to things. The Ways to Wellbeing worker gave me her card as well and said I could contact her if ever I needed to or wanted to or couldn’t make appointments. I’d already told her that I sometimes get as far as the front door and I can’t get out.
What we have learnt

In summary, this analysis has told us that Ways to Wellbeing:

- Increases mental wellbeing for nearly all clients
- Increases confidence for the majority of clients
- Decreases loneliness for the majority of clients
- Reduces GP appointments by a third
- Facilitates uptake of physical activity for a fifth of clients
- Facilitates volunteering for a fifth of clients

This evaluation provides reassurance that we are asking the right questions and gathering good quality data, in a way that fits with the ethos of the service. We will continue to measure our outcomes ensuring they are captured for clients of the two new partners to Ways to Wellbeing, York Medical Group and Haxby Group.

There is much value in reflecting on what we have learnt from the process of an internally led evaluation and recognising improvements for the future.

The client interviews provided an opportunity to understand what we may not be capturing so well. Outcomes measures are focused around mental wellbeing, yet, some clients told us that their physical health had improved, such as through weight loss, reduced pain and increased sleep. Consideration of how we can capture these physical health changes accurately is a priority for the service.

Similarly, we work in partnership with Citizen’s Advice York (CAY), providing a small amount of funding for GP based advisor appointments. The outcomes for these clients were not included in this evaluation. As a result of being referred to CAY, we know that there is often a substantial reduction in financial stress for people.

Therefore, we are working with CAY to understand how we can share information about outcomes better in the future.

There are two further key reflections about this process.

The first is that the ethos of the service will always come first. We will never ask people to complete an outcome measure where it is not appropriate. This means that any quantitative evaluation will always be a partial picture of the service. However, we hope that for those clients not represented by numbers, their experiences are captured in stories of change, photographs and videos.

The second is that, due to the nature of funding, we are unable to explore any effects of the service long term. Ways to Wellbeing aims to increase people’s ability to tackle future challenges, confidently and with resilience. However, at present we are unable to follow up with people over a longer period to find out if this is the case.

Finally, as a Ways to Wellbeing team and as a wider team at York CVS, we are keen to share the learning.

Evaluation in the voluntary sector is difficult, often under resourced and can be hard to get to grips with. Yet it is essential in demonstrating the value of the projects we passionately run. This type of in-house evaluation and Social Return on Investment Analysis was new to York CVS. We would like to share what we have learnt in more detail than we can do here. We are considering how best to do this, so watch this space!
Appendices

Appendix I: Theory of Change

Appendix II: Measurement Scales

Below are the scales completed by clients at the first appointment and at three months follow up.

Campaign to End Loneliness Tool, Q2.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Short Warwick Edinburgh Mental Wellbeing Scale (7 items, plus confidence question from original Warwick Edinburgh scale)

The questions below are about well-being. Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks.

<table>
<thead>
<tr>
<th>Statements</th>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I’ve been feeling optimistic about the future</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>2. I’ve been feeling useful</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>3. I’ve been feeling relaxed</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>4. I’ve been feeling interested in other people</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5. I’ve been thinking clearly</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>6. I’ve been feeling close to other people</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>7. I’ve been able to make up my own mind about things</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
## Appendix III: SROI Analysis outcomes and financial proxies

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Total Population</th>
<th>Outcome</th>
<th>Indictator</th>
<th>How much Change</th>
<th>Outcome Incidence</th>
<th>Financial Proxy</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ways to Wellbeing clients</td>
<td>7</td>
<td>Decreased loneliness</td>
<td>Proportion with ave increase on CTEMAT</td>
<td>0.54</td>
<td>38.34</td>
<td>LSE cost of loneliness per decade</td>
<td>£600.00</td>
</tr>
<tr>
<td>7.</td>
<td></td>
<td>Increased mental wellbeing</td>
<td>Proportion with ave increase on SWEMWBS</td>
<td>0.44</td>
<td>31.24</td>
<td>QALY lost through poor mental health</td>
<td>£10,560.00</td>
</tr>
<tr>
<td>7.</td>
<td></td>
<td>Increased confidence</td>
<td>Proportion with ave increase on SWEMWBS confidence Q</td>
<td>0.67</td>
<td>47.57</td>
<td>Social Value Bank-</td>
<td>£1,195.80</td>
</tr>
<tr>
<td>7.</td>
<td></td>
<td>Increased physical activity</td>
<td>Proportion taking up physical exercise</td>
<td>0.21</td>
<td>14.91</td>
<td>Frequent mild exercise HACT/</td>
<td>£5,394.30</td>
</tr>
<tr>
<td>State</td>
<td>7</td>
<td>Reduction in GP Appointments</td>
<td>Proportion of clients visiting GP less</td>
<td>0.57</td>
<td>40.47</td>
<td>PSSRU Unit cost of GP consultation</td>
<td>£38.00</td>
</tr>
<tr>
<td>Ways to Wellbeing Volunteers</td>
<td>15</td>
<td>15 volunteers gave a total of 213 hours over a year period</td>
<td>Number of hours</td>
<td>213</td>
<td>0.21</td>
<td>Minimum Wage</td>
<td>£7.83</td>
</tr>
</tbody>
</table>