

# Age UK Doncaster Circles Project

Evaluation Report 17/18

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# 1. Executive Summary

## Circles Project

Circles for Independence in Later Life (CFILL) or 'Circles', is a five-year project from 2016 – 2021, funded by the Big Lottery under the Reaching Communities Programme. This £499,815 investment aims to reduce social isolation and loneliness experienced by older people (aged 50+) living in the Metropolitan Borough of Doncaster. Based on the Community Circles model, the project focuses on increasing social engagement, independence and resilience of older people, particularly those at risk of hospitalisation or entry into a care home.

Traditionally, in the Community Circles model a volunteer facilitates support for a person. In this project, the volunteer role has needed to be adapted. Volunteers become part of an older person's social network or 'circle' rather than facilitating others to create one. Throughout this report, an older person who is receiving support from the project is referred to as 'a person with a circle.'

## Evaluation

The National Development Team for Inclusion (NDTi) have been commissioned to conduct an evaluation of the Circles Project against the four project outcomes. This report provides an overview of findings from the period April 2017 to July 2018 and will be shared with Age UK Doncaster, the Big Lottery, the participants involved in the evaluation and other stakeholders.

## Methods

This evaluation is based on a mixed methods approach that draws on both quantitative and qualitative methods of data collection including:

- Project monitoring information for individuals (demographic data) and volunteers
- Measurement scales (The Warwick Edinburgh Wellbeing Scale (WEMWBS), Campaign to End Loneliness Scale, Purpose)
- Person-centred tools (Relationship Circles, Working/Not Working, 4+1, One Page Profiles)
- Fieldwork conducted in February 2018 and July 2018 (interviews n= 14, focus groups n= 8)
- A Change Story written and submitted by Age UK (n= 1)
- Volunteer Action Log (VAL).

A Theory of Change workshop was held in November 2017 to create a vision for change for the project, understand the contexts surrounding the lives of those involved, the desired outcomes and the mechanisms for change to achieve those outcomes.



The Circles Project outcomes are:

1. Older people at risk of institutionalisation have more confidence in managing their long-term health conditions and staying independent.
2. Older people at risk of institutionalisation have increased mental wellbeing and improved physical health
3. Older people at risk of institutionalisation are less isolated and more active in their communities.
4. Families and volunteers benefit from the mutual support and contributions of older people through their involvement in Circles.

The Theory of Change was used to develop an outcome data framework, which built on Age UK Doncaster's existing data collection/monitoring. Whilst it was the intention to work with Community Evaluators to complete the fieldwork and analysis of the project, the one volunteer who was appointed to this role was later unable to take part.

### **Circles Project delivery and reach**

Since the start of the project (up to July 2018) 112 people have been involved in this initiative. Seventy-six of these are actively engaged, so they have had contact with a Circles Connector at Age UK Doncaster. Forty people out of the 76 who are actively engaged have been matched with a volunteer i.e. have an active circle. The average age of those actively engaged in the project is 81 years, with ages ranging from 51 to 97 years old. There are twice as many women (n=51) actively engaged than men (n=25). The reason or purpose people cite for seeking support from the Circles Project is either a general desire to get out, meet new people and have conversations; or they have a specific activity in mind to pursue, like using a tablet or visiting sites of historical interest. Most of the referrals for the project are from the Home from Hospital Team and self-referrals. Of the data that has been collected in June and July 2018, 19 volunteers have dedicated 118.5 hours to activities with a person with a circle. The main activities people with a circle are engaging in include having conversations (including telephone support) and getting out of the house (such as attending an art group).

### **Progress towards project outcomes**

Our analysis of the quantitative and qualitative data collected so far, indicates that the project is having a positive impact in relation to the 4 outcomes set out in the Theory of Change. Whilst there is less conclusive evidence to indicate if and how people are managing their long-term health conditions, there is an indication that with the support of the Circles Connectors and volunteers, people with a circle are finding ways to manage different aspects of their day to day lives.

WEMWBS data for 8 people collected after 6 months, has indicated that being involved with the project has significantly improved their mental wellbeing ( $p < 0.05$ ). This finding is supported by people with a circle also describing feeling better and having improvements in their emotional and mental wellbeing by being involved with the project. The impact on physical health is less evident. Many people interviewed have seen no change in their physical health (at this point in time) and were not seeing health professionals any less than prior to the start of their participation in the project.



The project is increasing people's social connections and alleviating feelings of isolation for many people with circles, giving them something to look forward to. Eradicating experiences and feelings of loneliness is however, proving harder to achieve, although it is recognised that for many people involved, this is a new approach and the project is not yet half-way through its five year term.

Analysing the available data has shown that being involved in the Circles Project has significantly increased people's ability to achieve their goals; for many people this was about wanting to get out, meet more people, have conversations and learn a new skill/do an activity. This is also reflected in the Volunteer Activity Log. However, although people with circles are active in a range of activities in their community some people did not feel *engaged* in their community. This is an area that requires further exploration.

Volunteers are benefiting from the contribution and support of the people with circles, reporting that the friendships are two-way. People with a circle are also contributing to the project in other ways such as helping to promote the project.

### **Project Delivery: what's working, what are the challenges and lessons?**

The Community Circles model adopted by Doncaster has been tailored to support older people who have no family or friends or where they don't want them to be part of the circle. This adaptation requires volunteers to be a supporter or circle member rather than a facilitator, which was the role of the volunteer in the original Community Circles model.

Whilst person-centred approaches and tools are being used to help guide conversations for people to make a change, motivation has been identified by the Circles Connectors as one of the biggest barriers for people. This is an area that the project team wish to develop with the volunteers. Other barriers include poor health, lack of confidence, poor mobility and lack of transport.

One of the biggest challenges for the project is volunteer recruitment and management which needs time and investment to ensure the sustainability of the project. Time is also a key factor in people building relationships and being ready to make changes in their lives to do the things that matter to them. The project team is finding and testing ways of overcoming each challenge.

People with a circle are divided in terms of the types of opportunities and relationships they are seeking. Some enjoy groups and activities to meet new people. Others prefer one to one contact.

### **Conclusions**

The Circles Project aims to reduce social isolation and loneliness in older people (aged 50+) by increasing social engagement, independence and resilience. The evaluation of the project to date has shown that the project is having a positive impact for those involved, measured through progress towards the 4 project outcomes. The most significant change to date is around increasing mental wellbeing. People are also increasing their social connections through the project.

As the project continues to grow, more people are referred, and more volunteers are recruited. This report includes a number of questions to consider when thinking about the future of the project and its impact on older people. These include:

- Understanding what's important about the type of connections people make.
- Understanding and developing work on what motivates people to change.



- What can be learnt about where current volunteers live to help further volunteer recruitment? For example, is it easier or harder to recruit volunteers that live within a community that has a culture of volunteering or community support? Do recruitment campaigns focus on areas where there are no volunteers but lots of people waiting to be matched?
- How reviewing monitoring data more regularly and consistently can provide stronger evidence to demonstrate the impact and support the case for the future of the project. This may include the value in the number of hours volunteers are giving to support people with a circle.



## 2. Introduction

Around 10% of the population aged over 65 is lonely all or most of the time<sup>1</sup>. The Office of National Statistics estimate that the population in Doncaster aged over 65 is 58,630<sup>2</sup>, meaning that loneliness is a daily reality for approximately 5,863 older people living in Doncaster<sup>3</sup>.

Circles for Independence in Later Life (CFILL) or 'Circles', is a five-year project from 2016 – 2021, funded by the Big Lottery under the Reaching Communities Programme. This £499,815 investment aims to reduce social isolation and loneliness experienced by older people (aged 50+) living in the Metropolitan Borough of Doncaster. Based on the Community Circles<sup>4</sup> model, the project focuses on increasing social engagement, independence and resilience for older people, particularly those at risk of hospitalisation or entry into a care home.

The project is based on the learning from the Age UK Home from Hospital service which highlighted the needs of people who are socially isolated and the over use of care and health services in the locality, even where people would prefer to remain at home.

Three outcomes were initially identified for the project; an additional 4<sup>th</sup> outcome was added at a Theory of Change Workshop (see Section 3 and Appendix 1):

### Circles Project Outcomes

1. Older people at risk of institutionalisation have more confidence in managing their long-term health conditions and staying independent.
2. Older people at risk of institutionalisation have increased mental wellbeing and improved physical health
3. Older people at risk of institutionalisation are less isolated and more active in their communities.
4. Families and volunteers benefit from the mutual support and contributions of older people through their involvement in Circles.

The Community Circle, or Circle of Support, model brings a small group of people, usually family, friends and support workers, together around a person, who wants some help to make a change in their life. The change can be anything they want. It might be to get out more, start a new hobby, meet new people or reconnect with old friends. The people around this person will work together to provide practical support to help the person to make those changes and achieve their goals.

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<sup>1</sup> Victor, C. 'Loneliness in older age: the UK perspective' in Age UK Oxfordshire (2011) Safeguarding the Convoy: a call to action from the Campaign to End Loneliness

<sup>2</sup> 2011 Census – Population and Household Estimates for England and Wales, March 2011

<sup>3</sup> <https://www.campaigntoendloneliness.org/wp-content/uploads/Local-loneliness-statistics.pdf>

<sup>4</sup> <http://www.community-circles.co.uk/>





Traditionally the Circle of Support is facilitated by a volunteer who supports these meetings and reviews progress with this person. In this project, the model and volunteer role has needed to be adapted. This will be further explored later in the report but for the purposes of introducing the model, Age UK Doncaster has instead matched volunteers with older people, so they have become part of the circle rather than facilitating others to create one. Throughout this report, an older person who is receiving support from the project is referred to as ‘a person with a circle.’

Over the five years, the project will support 374 older people, particularly those who have already been hospitalised, are over 85 years of age, living alone and those with dementia, to set up a Circle of Support. The project is being delivered by Age UK Doncaster. The Circles Project Team consists of two Circles Connectors and one Volunteer Development Officer.

The National Development Team for Inclusion (NDTi) has been commissioned by Age UK Doncaster to evaluate the process and impact of project delivery from April 2017 to July 2018. This report shares the findings of this evaluation.

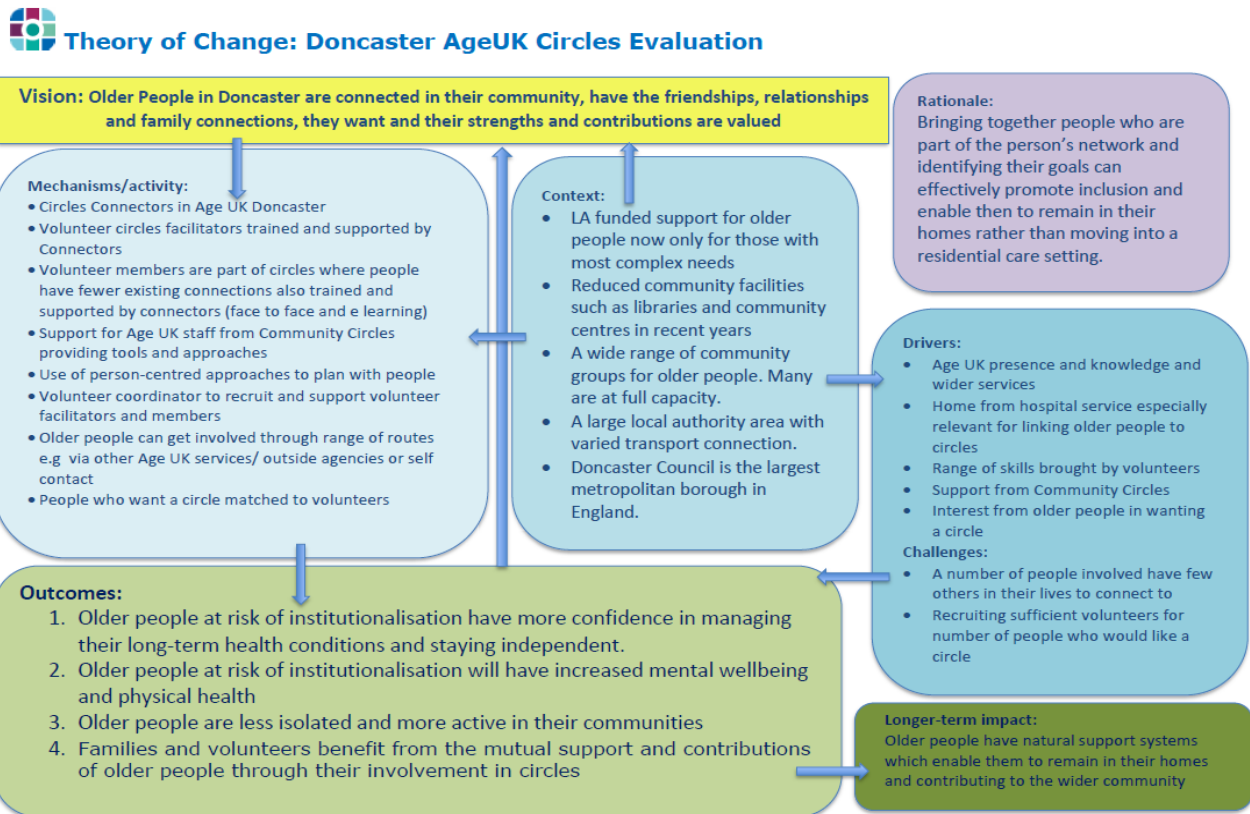


### 3. Approach to Evaluation

NDTi’s evaluation is based on realist methodologies and approaches where we seek to understand impact over time and explore change for a range of people and situations. This methodology is often used where the changes involved are complex and uncertain, and where progress towards outcomes is influenced by a number of different variables.

#### Theory of Change

A workshop was held in November 2017 to develop a Theory of Change with members of the Project Board, Community Circles staff, Age UK Doncaster staff and individuals with a circle and their volunteers. The Theory of Change encompasses: a vision for change (i.e. the aspirations for using Circles); the context of the work; the desired outcomes; the interventions (or mechanisms) for change; and the underlying assumptions about why and how change will occur. Figure 1. below depicts the Theory of Change, a larger version can be found in Appendix 1.



**Figure 1.** Circles Project Theory of Change

Once agreed, the Theory of Change was then used to develop an outcome data framework; a range of data collection sources and arrangements, building on Age UK Doncaster’s existing monitoring framework. It was agreed that information would be collected over the course of the evaluation period to reflect the journey and the learning about what is working and not working, and to show if change is happening, when and for whom. A mixed methods approach was used, which relies as



much on stories and people’s experiences over time as it does on any quantitative data that counts numbers of those involved and scales that indicate what happens to/for them.

## Data Collection

The outcomes and their indicators are described in Figure 2. below:

Outcome	Indicator identified
1. Older people at risk of institutionalisation have more confidence in managing LT health conditions and staying independent	The number of older people supported by the project who report that they feel better able to manage their long-term health
	The number of older people supported by the project who report that they feel more confident about staying in their home
	The number of older people supported by the project who report that they have a stronger support network to help them stay independent
2. Older people at risk of institutionalisation have increased mental wellbeing and improved physical health	The number of older people supported by the project who have measurably improved wellbeing
	The number of older people supported by the project who report that their physical health has improved.
	The number of older people supported by the project who report that they need fewer emergency health appointments at hospital or with their GP.
3. Older people at risk of institutionalisation are less isolated and more active in their communities	The number of people supported by the project report that they feel closer to others
	The number of people supported by the project report that they leave their house more often.
	The number of older people supported by the project report that they are participating in more social or healthy living activities
4. Families and volunteers benefit from the mutual support and contributions of older people through their involvement in circles	People’s family members and supporting volunteers will describe how they have benefitted from involvement in circles

**Figure 2.** Circles Project Outcomes and Indicators

Age UK Doncaster Circles Connectors collect baseline data in relation to each of the above as part of their initial visit with the older person. Follow up visits and reviews are scheduled for 6 and 12 months and where relevant, scales are repeated, or other person-centred tools are used to guide conversations and identify what is changing for a person with a circle. However, this process has sometimes been disrupted by illness and availability of the person with a circle and their volunteer and project team capacity.



In addition to demographic data (gender, age, ethnicity) the Circles Connectors captured information using following the measures/scales:

### Scales

- **The Warwick Edinburgh Wellbeing Scale (WEMWBS)**<sup>5</sup> - 14 item version  
The Warwick-Edinburgh Mental Well-being scale enables the monitoring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing. It is a 14 item scale with 5 response categories, summed to provide a single score ranging from 14-70. This scale is positively worded, and participants are able to score a maximum of 70. The higher the participant scores, the better their mental well-being in the past two weeks is interpreted to be.

- **The Campaign to End Loneliness (CtEL) Scale**<sup>6</sup>.  
This tool measures the change that happens as a result of an intervention to address loneliness. It asks respondents to give one of the following answers (with scores): Strongly Disagree (4) / Disagree (3)/ Neutral (2)/ Agree (1)/ Strongly Agree (0) / Don't Know to the following statements:

1. I am content with my friendships and relationships
2. I have enough people I feel comfortable asking for help at any time
3. My relationships are as satisfying as I would want them to be

The scores for each individual question need to be added together. This gives a possible range of scores from 0 to 12. Someone with a score of 0 or 3 can be said to be unlikely to be experiencing any sense of loneliness, anyone with a score of 10 or 12 is likely to be experiencing the most intense degree of loneliness.

- **Purpose Score**  
This is a goal-based measure developed by Community Circles which is a simple reflection tool and Likert scale to capture outcome attainment. The outcomes (or goals) are personal to the individual and not specified within any framework.

### Person-centred tools

The person-centred tools are used by Circles Connectors to guide and support conversations with people with a circle. As part of the outcome data framework, they captured additional information to help provide some insight into older people's lives and the changes that people with a circle have experienced over the course of the project. These include:

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<sup>5</sup> <https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs>

<sup>6</sup> <https://www.campaigntoendloneliness.org/measuring-loneliness/>



- **What's Working/Not Working:** this asks questions about what's working or not working in someone's life from different perspectives (the person, family etc.). It is used to help to identify what's important in someone's life, if it's happening and if the person is getting the support that makes sense to them. When participants first become involved in the project they are asked what is working and what's not working in their lives. Once matched with a volunteer and/or have a circle in place they are sometimes (but not always) asked these questions again.
- **Four Plus One (4+1):** this tool asks four questions: What have you tried? What have you learned? What are you pleased about? What are you concerned about? The answers to these questions then lead to the 'plus 1' question that asserts, based on what we know, what should we do next? It is used to help people to think about a particular situation or challenge and help them plan for change. Like the other person-centred tools, only some participants are asked the '4+1' questions and not at set intervals.
- **Relationship Circles:** this tool records the number of people/relationships in a person's life, and how these relationships can support a person to live the life they choose. It helps identify who the important individuals/people are in the person's life, what those relationships mean and whether they can be strengthened or supported. Most people complete a Relationship Circle at the start of the project and this is repeated with a small sample of people at various intervals during the project.

### Volunteer Activity Log

The Circles Project Team have also recorded data on volunteers including: how many were recruited, when they were matched with an older person, and the duration and types of activities they are engaged with by using a Volunteer Activity Log (VAL). The aim of the VAL was to capture data that would provide more information about what people with a circle and their volunteers were doing and for how long. This would provide evidence towards Outcome 3. This data has been recorded by 19 volunteers since June 2018.

### Fieldwork

Two rounds of fieldwork were conducted over the course of the evaluation, in February 2018 and again in July 2018. The NDTi Evaluator worked with the Circles Connectors to identify individuals with a circle and family members or carers of those with a circle to take part in the evaluation. Apart from one, all had been matched with a volunteer for 3 months or more and had established relationships (the other one had been matched for 2 months). They were then invited to take part in a one to one interview. Interviews were also conducted with the Circles Project Team at Age UK Doncaster. Volunteers were identified and invited to join a focus group on each occasion. The schedule of interviews for each field work visit is provided in Figure 3. The Topic Guides for each cohort are provided in Appendix 2. All people interviewed were provided with an Information Sheet and Consent Form and after May 2018, a Privacy Notice in compliance of General Data Protection Regulation (GDPR). Interviews were recorded through written notes and audio recordings and later typed up.



	February	July
Individual with a Circle	4	6 +1 revisit
Carer/family member of a person with a circle	1	0
Volunteer	4	4 + 1 revisit
Circles Project Team member	2	1 + 2 revisit
<b>Total</b>	<b>11</b>	<b>15</b>

**Figure 3.** Number of people interviewed/re-interviewed and taking part in focus groups.

### Community Evaluators

In addition to a member of the Evaluation Team, NDTi worked with Age UK Doncaster to recruit local people as community evaluators, to support with the fieldwork and analysis phases. Whilst two people attended the Community Evaluator Induction in February 2018, only one person wanted to be involved. Unfortunately, in the end, they were unable to support with the evaluation.

### Data Analysis

All data presented in this analysis is from the latest data provided by the Circles Project Team in July 2018. Where data has been collected within a different time frame (due to being collected by the NDTi team) this is stated. The data collected by the Circles Connectors is different for everyone. So, measures/scales have captured data at the start of someone joining the project along with person-centred tools used to support some conversations, and the follow up data and tools is different for each individual and conducted at different time intervals, for the reasons provided above.

The data captured by Circles Connectors was anonymised and shared with NDTi. This was later analysed by the NDTi Evaluation Team. Microsoft Excel was used to provide a detailed picture of participant demographics and a statistical exploration of programme impact. Data captured for participants at two or more time points (baseline and follow up) for the Warwick Edinburgh Mental Well-Being Scale (WEMWBS), Campaign to End Loneliness Measurement Tool and the Purpose Score of how participants felt about achieving their chosen outcomes, were tested for statistical significance using a Paired Sample T-Test. This test allows data captured for one participant to be compared across time points to measure the impact of the programme. Due to the small amount of data available in this evaluation, the results of this analysis do not have statistical power across the whole data set but provide a measure of significance for the individuals whose data has been analysed.

Finally, information available for those people with a circle who engaged in conversations using the different person-centred tools was reviewed and themed as part of the evaluation, to add to the qualitative data collected via interviews and focus groups.



## 4. The Circles Project: Reach and Activity

As of July 2018, 112 individuals have been involved in the project. Of these, 76 are actively engaged, 32 declined being part of the project and 4 have discontinued.

There are a number of reasons why people declined being part of the Circles Project, including:

- The individual is happy with their life as it is – a number of these individuals state that they will be in touch with the project again if this situation changes.
- Individual has found alternative day time support that they are happy with (day centres etc.)
- Individual has support from family and neighbours.
- The individual is not well enough to be involved or has been moved into hospital/long term care due to a deterioration of their health
- Individual is not responding to correspondence from the project
- Individual is moving away from the area.
- Individual simply feels that circles is not for them
- The individual has passed away.

Similarly, the reasons that 4 circles have been discontinued include:

- The individual's carers are now taking them out and about (i.e. acting as their circle)
- The individual has got back in touch with their family and now spending time with them
- The individual requires support that the circle was not intended for.
- The individual has not responded to correspondence from the team on their discharge from hospital.

The remainder of the analysis in this report is based upon the **76 individuals** who were **actively engaged** in the programme as at July 2018. 'Actively engaged' refers to individuals who have expressed an interest in the project, have had a meeting with a Circles Connector and are wanting to take things forward. When a person has been matched to a volunteer this is referred to as having 'an active circle'.

### Age

Of the 76 participants actively engaged with the project, 68 have provided details of their age. The age of these individuals ranged from 51 to 97 years old, with the average age being 81.

### Gender

Of the 76 participants actively engaged with the project 51 individuals identify as female and 25 identify as male.

### Ethnicity

Of the 76 participants actively engaged with the project 74 participants identify as White British, 1 participant identifies as White Other and 1 identifies as Mixed heritage.



## Location of people who are actively engaged in the project.

Ward	Number of people with active circles living in the ward
Balby	9
Thorne	5
Intake	5
Sprotborough	4
Cantley	4
Armthorpe	3
Bessacarr	3
Tollbar	3
Carcroft	3
Scawsby, Moorends, Cusworth, Wheatly Hills, Bawtry, Skellow, Wheatley, Kirk Sandall, Edenthorpe, Bentley (2 per ward)	20
Hatfield, Town Moor, Owston, Doncaster, Branton, Dunsville, High Melton, Duncroft, New Rossington, Mexborough, Braithwaite, Adwick Le Street, Warmsworth, Conisbrough, Barnby Dun, Scawthorpe, Arksey (1 per ward)	17

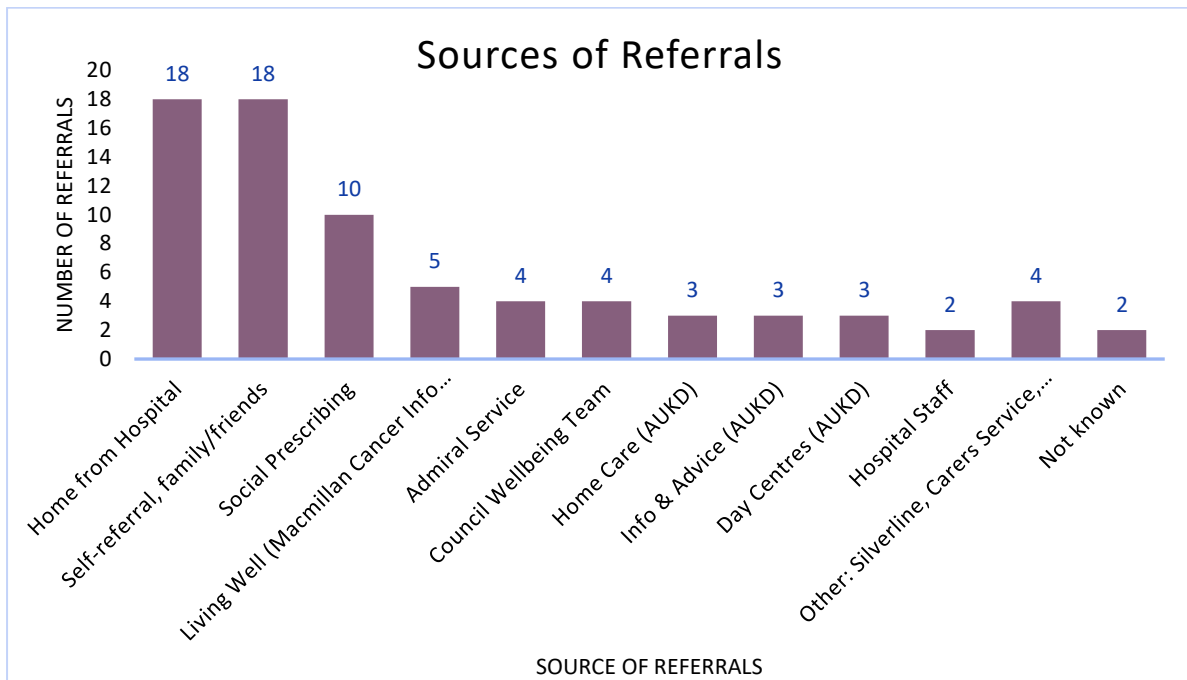
## Referrals

Individuals have been referred into the Circles Project through a variety of routes. Figure 4. (and corresponding graph overleaf) indicates the sources of the referrals and the number of people they have referred to the project. Most referrals come through the Age UK Home from Hospital Service and self-referrals. The Social Prescribing service has provided the next highest number of referrals.

Referred by	Number of participants
Home from Hospital	18
Self-referral/family/friends	18
Social Prescribing	10
Living Well (Macmillan Cancer Info Service)	5
Admiral Service	4
Council Wellbeing Team	4
Home Care (AUKD)	3
Info & Advice (AUKD)	3
Day Centres (AUKD)	3
Hospital Staff	2
Other: Silverline, Carers Service, British Legion, Practice Nurse at GP	4
Not known	2
<b>Total</b>	<b>76</b>

**Figure 4.** Sources of referrals to Circles Project





**Graph 1.** Source of referrals.

### Purpose for becoming involved

There are a number of reasons why participants have become actively involved in the project. Some of these reasons are quite general, including:

- To get out and meet/see people
- To extend circle of friends
- To have new conversations with new people
- To help regain confidence in going out and about
- To learn a new craft or skill.

Whilst others were quite specific:

- To join a knitting group
- To visit sites of historical interest
- To go to sporting events
- To get help using tablet.

Some individuals also became involved in the project to help them get back to the life they used to have, doing activities they used to; whilst others wanted the circle to help them share the knowledge they have about certain things (such as gardening) with other people.



## Matched with Volunteers

Forty of the 76 people actively engaged with the project have been matched with a volunteer (have an active circle); 7 have been assigned a volunteer but this volunteer has left so the individual's circle is not active or has ceased, but the individual wants to carry on so are awaiting to be matched again; 3 have received support to join activities but have not been matched to a volunteer; and the remaining 26 are not yet matched to a volunteer, but want to be involved so are 'actively engaged' in the process until they are matched.

The time it took for individuals to be matched with a volunteer ranged from 0 days (where the participant was matched on the same day) to 273 days, with a match taking an average of 61 days to take place. The length of time taken to match a volunteer was attributed to the geographical location and common interests for both the person with a circle and the volunteer to ensure a good match. Delays in obtaining references and Disclosure and Barring Service (DBS) checks for the volunteers were also reported to take time for some volunteers. Figure 5. shows the wards where people have been matched to a volunteer and where they are still waiting to be matched.

Ward	Number of people who have been matched with a volunteer	Number of people who have not been matched
Balby	4	5
Thorne	1	4
Intake	3	2
Sprotborough	2	2
Cantley	4	0
Armthorpe	2	1
Bessacarr	1	2
Tollbar	2	1
Carcroft	1	2
Scawsby, Moorends, Cusworth, Wheatly Hills, Bawtry, Skellow, Wheatley, Kirk Sandall, Edenthorpe, Bentley (2 per ward)	12	8
Hatfield, Town Moor, Owston, Doncaster, Branton, Dunsville, High Melton, Duncroft, New Rossington, Mexborough, Braithwaite, Adwick Le Street, Warmsworth, Conisbrough, Barnby Dun, Scawthorpe, Arksey (1 per ward)	5	12

**Figure 5.** Locations where participants have been matched and not matched with a volunteer

## What people do with their volunteer

One of the volunteers worked with the Circles Project Team to create an online Volunteer Activity Log (VAL) to record what they have been doing with the person with a circle and for how long. The VAL was designed to capture information about Outcome 3:



- The number of people being supported by the project that report they leave their house more often
- The number of people being supported by the project that report they are participating in more social or healthy living activities.

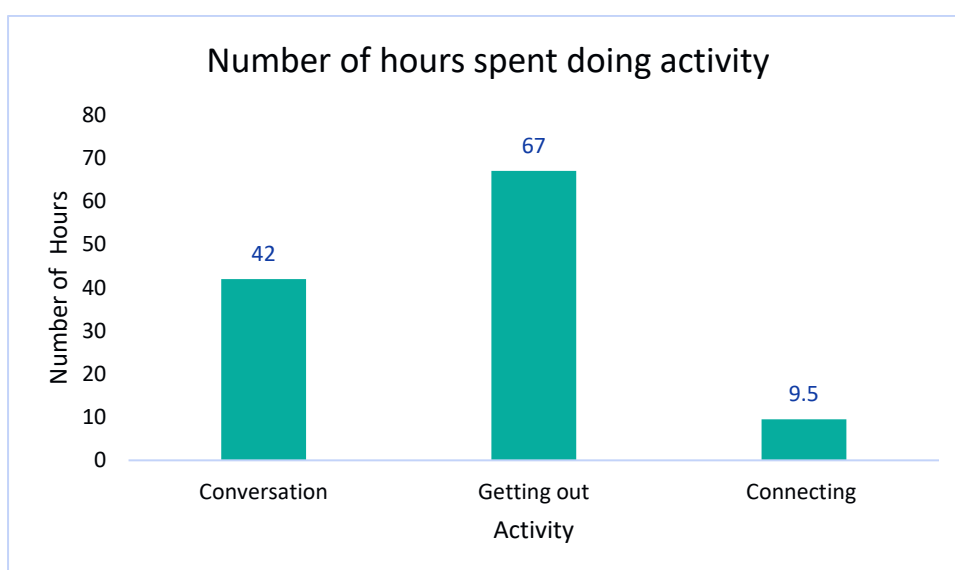
Volunteers logged the approximate time spent with person with a circle (e.g. 30 minutes, 1 hour, 2 hours, 3 hours, and 4 hours and 5+ hours) against 3 simple categories:

- **Conversation:** where the volunteer has telephoned the person for a chat or popped around to their house for a chat and a cup of tea.
- **Getting Out:** where the volunteer has taken the person out in the car somewhere, or been for a walk together, or out for a coffee to the garden centre etc.
- **Connecting:** where the volunteer has gone somewhere with the person they support so they could meet other people. For example, a group setting, meeting the volunteer’s family or Circles Project events etc.

In June and July 2018, 19 Volunteers recorded their activity on VAL (note, not every volunteer entered data). This equated to a total of 118.5 hours of volunteer time doing 58 activities across the 3 categories. Twenty-eight occasions logged under conversations included planning the person with a circle’s 90<sup>th</sup> birthday party, planning trips out or telephone support. Twenty-six occasions logged under getting out included visiting a wildlife park, going to a doctor’s appointment and attending an art group. The 4 activities logged as connecting included visiting the person with a circle’s friend in a residential home. Figure 6. and Graph 2 shows the breakdown of this data:

Purpose	Number of hours of volunteer time spent on activity	Number of occasions engaged in activities
Conversation	42	28
Getting Out	67	26
Connecting	9.5	4
<b>Total</b>	<b>118.5</b>	<b>58</b>

**Figure 6.** Number of hours and occasions volunteers have been engaged in activities.



**Graph 2.** Number of hours spent doing activities with volunteers.



### Summary

- Since the start of the project (up to July 2018) 112 people have been involved. 76 of these are actively engaged so have had contact with a Circles Connector at Age UK Doncaster, 40 have been matched with a volunteer.
- The average age of a person actively engaged in the project is 81years. There are twice as many women (n=51) actively engaged than men (n=25).
- The reason or purpose people cite for seeking support from the Circles Project is either something general around getting out and meeting new people or relates to a specific activity like visiting sites of historical interest.
- Most of the referrals for the project are from the Home from Hospital Team and self-referrals.
- Of the data that was collected between June and July 2018 by 19 volunteers, a total of 118.5 hours have been spent with the person with a circle on 58 different occasions, participating in various activities.
- The main activities people with a circle are engaging in are having conversations based on mutual interests and getting out of the house for example to visit local places or to go for lunch.



## 5. Progress Towards Project Outcomes

In this section we explore progress towards the four project outcomes. Information presented here is based on analysis of data collected by the Circles Project Team and qualitative data gathered during fieldwork interviews. Follow up interviews in July 2018 were conducted with one individual with a circle, one volunteer and two members of staff. The remaining people interviewed had, as in the first round, been identified for having had an active circle or been volunteering for more than 2 months and had an established relationship. Where it has been possible to identify progress or changes for these individuals, this will be highlighted in the appropriate sections. No other carers or family members could be identified for the July 2018 fieldwork interviews. The reason for this was because either many of the people with circles do not have any carers or family members, or that they do not want to involve family members or carers in their circle.

All of the original three outcomes relate to older people 'at risk of institutionalisation'. Research indicates that in studies of older adults, predictors of institutional care/nursing home placement include: age, low self-rated health, underlying cognitive and or functional impairment<sup>7</sup>, dementia, and associated lack of support and assistance in daily living. For people living with dementia, the predictors are caregiver burden and dependence in activities of daily living (ADL) as well as poorer cognitive function and behavioural and psychological symptoms of dementia<sup>8</sup>. This project has therefore had an interest in people who have already been hospitalised (n= 18), are over 85 years of age living alone (n= 31) and those with dementia (n=20), although the project criteria is broader, to include anyone over 50 years of age.

Further analysis of this data shows: 67 people out of the 76 (88%) actively engaged live alone, 33 (43%) are over 85 years. Furthermore, of these 76 people actively engaged in the project 29% of people aged over 85 that live alone have a diagnosis of dementia.

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<sup>7</sup> Prediction of institutionalization in the elderly. A systematic review. [Melanie Luppa Tobias Luck Siegfried, Weyerer Hans-Helmut König Elmar Brähler Steffi G. Riedel-Heller](#) *Age and Ageing*, Volume 39, Issue 1, 1 January 2010, Pages 31–38

<sup>8</sup> Predicting discharge to institutional long-term care following acute hospitalisation: a systematic review and meta-analysis [Jennifer Kirsty Harrison, Katherine E Walesby, Lorna Hamilton, Carolyn Armstrong, John M Starr, Emma L Reynish, Alasdair M J MacLulich, Terry J Quinn, and Susan D Shenkin](#) *Age Ageing*. 2017 Jul; 46(4): 547–558.



### **Outcome 1: Older people at risk of institutionalisation have more confidence in managing their long-term health conditions and staying independent.**

Circles Connectors used the 'What's Working/Not Working' tool to guide and support conversations in the initial and future visits. Some people with a circle described a number of things under 'what works' for them, that would suggest that some are managing to stay independent (or are 'in control' as one person described). Some people described being able to use public transport, or that they have their own transport. For others however, it was a different story. When asked about 'what's not working', people with circles reported poor mobility, not being able to get to medical appointments, lacking in confidence to go out and poor transport, indicating the challenges people are facing to meet this outcome. The themes captured by Circles Connectors using this tool after a period of time gave an indication that things were changing. For example, people reported being able to get to appointments, regaining confidence, gaining additional support at home, going out shopping, getting a blue badge, getting a taxi to the library. There was also a general reduction in the number of items reported under 'what's not working' at the follow-up visits. People reported wanting to get out more, that they were not seeing family because the family were unwell. Poor memory and low confidence were also reported.

The 4+1 tool was used for some people at different points in the project, to guide conversations around what individuals were pleased about. Responses included an increase in confidence and having more people to ask for help from. Under 'what have we learnt?', someone reported having always done things for themselves but they now found themselves in a new position, and for someone else they didn't want to rely on people too much. This indicates a desire to retain independence. It was also clear, that what concerned people with a circle was declining physical and mental health and not being able to manage house maintenance.

There was limited direct feedback from the fieldwork interviews to suggest either way, that being involved in the Circles Project had or hadn't had an impact on people's confidence to manage their long-term health conditions. There was an indication that, people were taking small steps towards becoming more independent through the project. So, through the support of the volunteer and their new connections, they are finding ways of managing certain activities. One gentleman reported that having been helped by the Circles Connector to acquire a scooter he was now getting around his estate and going up to the post office. One lady talked about how she had wanted to be able to go to the shops and that she was doing that now with her volunteer. One lady reported that she's finding out information from other people with circles at the organised group events, that has helped her:

*When you hear them talking you can tune in for what you want.*

She has now got the contact for a cleaner from one of the other people attending one of these events. Another lady is now being asked to support other older people in the community, has become a volunteer meet and greeter for the library and supports Age UK in promoting the Circles Project at events.

During one of the focus groups, volunteers described how they would take the person with the circle to their doctor's appointments to save them getting a taxi, or to support with applying for benefits.



Another volunteer talks about how being another point of contact for the person they support is working well:

*Telling him that if he couldn't get hold of his granddaughter, there was another phone number that he could ring, and he has rung it a few times. That's very important.*

Members of the Circles Project Team also shared stories about how the project was supporting people to become more independent, with some initial support from their volunteer. This included supporting someone to get the bus to a group at the library, building confidence to get out of the house to go shopping, when in the last 10 months the only time they have gone out was for hospital appointments. This lady was also now being picked up to go to church, not by the volunteer but by someone else. They felt that the lady had been in the habit of saying no to things for so long that now they had started to say yes, things were changing – like going to church. In addition, Circles Connectors reported people saying that they have a reason to go out. They are walking in the park, being more active, feeling better because they were achieving things. They wouldn't be confident to go on their own but do with a volunteer.

In July 2018, interviews with Circles Connectors revealed that they have identified a number of people with circles that don't need or want long-term support, they just need some short-term input from a volunteer to build confidence and get them started on a new activity. For example, one volunteer, having spent a few weeks getting to know the person with the circle, found out how much he liked gardening. They would go to the garden centre together regularly. The volunteer started to look at other opportunities around gardening and found a gardening project that is run by the mental health service (although not exclusively for people with mental health conditions) where people help out gardening and then sell their produce. This is something that he is hoping to pursue with the person with a circle.

In another example, the Circles Connector matched a volunteer with a lady who wanted to do more exercise having had a fall and been in hospital with a broken hip. By the time the Circles Connector called the volunteer back to see how things were going, the volunteer had found a chair-based exercise group locally and was taking the lady with a circle to the next session. The volunteer said she would accompany the lady for the first few sessions with a view to her then going on her own.

Whilst inconclusive, there is some evidence that people are getting support to manage health conditions (through lifts to medical appointments) and maintain independence (getting financial support, use of a scooter, getting to an exercise class). It suggests that that for older people the road back to or maintaining independence is long and full of obstacles but with the support of a volunteer, people with a circle are taking the first important steps to achieve this and it is something that is important to them. For some with visual impairments, dementia or long-term mobility problems however, they will always need some level of support. This is an outcome that needs further exploration particularly to understand the mechanisms by which people can manage their long-term health, stay independent and how the project can have a longer-term or sustained impact.



## **Outcome 2: Older people at risk of institutionalisation have increased mental wellbeing and improved physical health**

The 14-point Warwick Edinburgh Mental Well-Being Scale (WEMWBS) is administered with all participants upon their entry to the project. This scale measures an individual's mental well-being based upon their responses to a series of statements about how they have been feeling in the two weeks prior to completing the scale.

Entry level data is available for 67 individuals involved in the project. Scores for these individuals ranged from 10 to 59, with an average score of 40.

Participants were not asked to complete this scale each time the Circles Connectors collected data about how things were going. However, 8 individuals completed this scale again at 6 months, with scores ranging from 51 to 64, with an average score of 53. For these 8 individuals, being involved in the project has significantly improved their mental well-being ( $p < 0.05$ ) ( $p = 0.000473755$ ).

Four individuals completed that scale again after 12 months. Two of these individuals had completed the scale at 6 months, 2 had not. These individuals scores ranged from 48 to 64, with an average score of 57. Two of these people saw an improvement over the year, one had scored the same as they had at 6 months and 12 months, but this was an improvement on their baseline score. For the other person there was a decrease in score from the baseline. For these 4 individuals there has not been a significant increase in their mental well-being in their first year of being involved in the project ( $p > 0.05$ ) ( $p = 0.0109995071$ ).

For the people with a circle who were interviewed, it was very clear that this project was having a positive impact on their mental and emotional wellbeing and health:

*Well they were shocked because how quick I've got myself from rock bottom to right up and I'm not crying no more.*

One person reflects on what has helped in terms of their physical and emotional wellbeing. They go out walking with their volunteer and enjoy talking:

*It helps mentally, because my brain works, sat here it doesn't, I talk to myself.*

They go on to say:

*I feel better because it gives me something to think about in between, it's increased my mental wellbeing I suppose.*





Almost everyone interviewed in February 2018 and July 2018 explicitly said that being involved has made them feel better.

When one person was asked what has helped with their emotional wellbeing, they simply said “*it has brought light to it*”. People talk about having contact with people, particularly people who are in the same situation or position as them, it’s having friends and people to talk to that helps. This was also noted in the 4+1 tool when asked what people have learnt, people said that lots of other people feel the same way. Indeed, one lady interviewed reported that the project was working well for her because, having recently become disabled, she is finding a new circle of friends who are in similar circumstances to her. When asked what has worked well by being part of the project, another person with a circle replied:

***It’s just somebody who’s like in my situation, that’s you know, single, and going to take me out, care for me, it’s nice you know. So, I like that, I like to chat about things, she tells me about her life experiences and I say about mine. Having someone to listen, you know.***

Several people talk about the visits or outings with the volunteers as being something to look forward to:

***If someone can get out it means a lot.***

***I’m pleased for [volunteer] to come because it’s something to look forward to, [volunteer] will be coming, oh yes, I’ll bring that point up.***

The Circles Connectors have also made similar observations throughout the evaluation period. One Circles Connector recalled how they could see, for a gentleman with dementia who had not seen anyone for weeks, being around people had made a difference to his language and speech. He had even noted this and said that it ‘perked him up.’ This social contact or stimulation for people with dementia who have circles was thought by the Circles Connector to be improving mental wellbeing.

The impact on physical health is less evident. Whilst people are feeling better they were qualifying that this is emotionally or mentally rather than physically. In fact, for many people interviewed their physical health has not changed/improved and for the majority there has not been any change in how much they see health care professionals. They say it’s about the same. Only one lady reported “*not going to the doctor as much*”. In the 4+1 tool, an increase in physical strength was something that one person had said that they were pleased about.

It is clear that people involved with the Circles Project are experiencing improvements in emotional and mental wellbeing. For those interviewed, they are directly attributing this improvement to being involved with the project. Getting out, stimulating the brain, making friends and having something to look forward to are some of the reasons why people with a circle are feeling better.



### **Outcome 3: Older people at risk of institutionalisation are less isolated and more active in their communities.**

The baseline information gathered about 'what's not working' showed that older people were feeling lonely, isolated, being stuck inside 4 walls, not seeing family, not being able to talk about shared passions, experiencing bereavement for partners and friends and not having an objective. Their purpose for having a circle also provides an overwhelming message about what is important to, and missing from, older people's lives. They want to get out, meet/see people, make friends and have conversations with new people. For some there was a more specific purpose around developing a particular skill or doing an activity.

Two people with circles describe their experiences:

*It's hard to describe how empty the world is, I listen to a CD, I listen to the radio, but it's personal contact. You coming today helps. You might say why? a load of questions. You're breaking the day up that is the thing, you're interested, you're interested in me.*

*From working, you know, all the time and then sitting at home, it was just lonely and everyone I know working, so it was really hard for me, with winter how depressing it is. So, [Circles Connector] said we have some volunteers, they can be a friend to me, they can take me out. She said, 'what do I want', I said 'look I'm just fed up of going into town having a coffee by myself or having lunch by myself I just need somebody to talk to'.*

Knowing that many older people in the Circles Project have identified social isolation and loneliness as something they experience and actively want to change makes this third outcome especially significant.

When participants first become involved in the project they are asked to rank on a scale of 1-10 where they would position themselves in relation to achieving the purpose of their becoming involved in the project (with 1 not being at all and 10 being completely). Data is available for 55 individuals at entry to the programme, with the average score given being 4.

When participants had been involved in the project for 12 months they are asked the same question again. Data is available for 7 individuals at this time point, with the average score given rising to 8. This increase in scores is statistically significant ( $p < 0.05$ ) ( $p = 0.000153396$ ). Therefore, for these 7 participants, being involved in the Circles project has significantly increased their ability to achieve the purpose, which for all of them was around the theme of meeting new people, having conversations and going out.

A total of 49 participants were asked to complete a 'relationships map'. At baseline the number of relationships participants state they have with other people ranged from 2 to 18, with an average number of relationships being held with 6 people.

Eight participants were asked to complete a relationship map again at different time points during their involvement in the project. For 6 out of these 8, the number of people in their relationship



maps doubled (for example over a 10 month period, from 3 to 7 to 11 people) in one case it went from 4 to 16 people in 8 months. The two that saw their relationships decrease was by one person i.e. from 7 to 6 people. It is not clear why this happened but it is noted that this again is a tool to support conversations and reflects a moment in time when the conversation is happening.

The follow up to the What's Working, Not Working tool also indicates that changes are happening for people with a circle, in terms of making connections. For example, responses to the follow up question of what's working include: reconnecting with family, having company, getting out of the house and seeing people, doing more than just existing, meeting new and more people and enjoying trips out with volunteers. However, in the follow up question to what's not working, being lonely was still reported.

The interview data supports the evidence collected through the various person-centred tools. The project is clearly increasing people's connections, but the types of relationships behind these connections need further exploration. Some people interviewed report making new friends, others say that they have met new people but not made friends (other than their volunteer or the Circles Connector).

The distinction between meeting new people and having new friends could be based on people's interpretation of what a friendship means, and the time it takes to invest in getting to know someone to this level. It may also be a reason why matching people is so important. The Circles Project Team note that some people may not have been introduced to someone new for a long time, so this can add to the time it takes to build that connection into a friendship. This is also reflected in one volunteer's comments about the changes they have started to see in the person they support:

***The more you get to know somebody, you sort of see changes in them, so he's more talkative now, I think that's probably something you get with familiarity.***

There have been opportunities (and are increasingly so) for people with circles and their volunteers to join events and group outings organised by the Circles Project Team, in order for people to create more connections/ friendships. The Circles Project Team are aware of some people having contact with each other via telephone or visiting each other's homes outside of these. Very few people have reported making connections or friendships through other community groups/activities (with or without the support of their volunteer).

For the majority of people interviewed, the main connection that has been created is between the person with a circle and their volunteer. Over the period of the fieldwork it has become evident that through this project the relationships they have made with their volunteers is getting stronger, to the point that the role of a volunteer is morphing into more of a close friend. Here one lady with a circle describes her volunteer:

***She's a lovely girl, she really is a lovely girl, in fact I sort of forget she comes from Age Concern [Age UK], you know what I mean, it's like, she got to be almost like one of the family, when I think about her.***



Some people with circles recounted how they have gone out with their volunteers for a meal or to the theatre and been joined by the volunteer's partner or parents, which shows how these friendships are developing. This relationship is not however, one-sided. Here, two volunteers report feeling the same:

*I don't think I'll ever step back away from him now because he has become a friend but eventually it may be that he's a friend and I can say let me have a look at somebody else.*

*You become friends rather than an Age UK volunteer and a focus person.*

In February, Circles Connectors were noticing this, commenting on how some volunteers don't see the role as formal volunteering anymore. With the introductions to volunteer's families, natural friendships were developing.

Promising approaches to reducing loneliness and isolation in later life<sup>9</sup>, by Age UK and the Campaign to End Loneliness state: "It is clear the vast majority of loneliness interventions currently available seek to reduce loneliness by increasing the quantity and quality of relationships, and most do this by supporting individuals to develop new relationships". The Circles Project is therefore one such example. However, whilst the project is increasing people's social connections and alleviating feelings of isolation for many people with circles, some people are still experiencing feelings of loneliness. One of the Circles Connectors acknowledges that there are limitations to eradicating it all together:

*I think the more people you visit, you just think, it's not something that 'oh you're lonely we'll do this', you know, it's going to be eradicated; not at all. And the more times you meet people, who are bereaved, and they've lost their wives and they've been together since they were 14, you just think, what actually can help you? But I think what it does is it gives people something to look forward to and it gives them something that says when they meet, there is other people out there like me, who are in a similar position to me and there's a volunteer or someone going to be visiting and we're going to go to this group or we're going to go out. So, I think it helps in addition to someone's week, yeah I'm sure it helps slightly in reducing the loneliness for that day but then I guess it's always like some people say; 'you go out and then you're still going back to an empty house'.*

<sup>9</sup> <https://www.campaigntoendloneliness.org/wp-content/uploads/Promising-approaches-to-reducing-loneliness-and-isolation-in-later-life.pdf>



Making these connections and reducing feelings of loneliness and isolation was also connected to people needing to be wanted. Here two people describe why the Circles Project is so important:

***I think a feeling of being wanted because being in my position, which many will be, you get the feeling of isolation, of not being wanted.***

***Someone taking notice for a change.***

In terms of people being more active in their communities, the What's Working, Not Working and the 4+1 tools show that people with circles are going out and doing lots of different activities. For example, going to the cinema, theatre, shops, cemetery, tea parties and the library. This was also captured in the Volunteer Activity Log, where in June and July 2018, 19 volunteers recorded participating in 26 activities over 67 hours, that involved getting out. This included visiting a wildlife park, a museum, attending an art group and going out for lunch. This message was supported in the interviews by a number of people:

***I'm getting on with different things more than I used to.... I just used to do nothing really, I'm doing a lot of things now. I'm going to the [centre], the library and going to all different things.***

An added benefit of being out and active in the community for some people with a circle was that they reconnected with old friends. One volunteer recalled:

***I took my lady to a community café, it's a local one but of course she didn't know anyone but then a friend of hers from years ago walked in you know and it was, she got chatting to her and she says 'Oh if you ever want to go to [the theatre]', you know to theatre, 'I'll come, I'll come with you'.***

It is interesting to note that during the interviews people were asked if they had been more engaged in their own community, for example doing something that they couldn't do before in their neighbourhood or helping other people out. Many said that they hadn't or that they couldn't because of an impairment or poor health or lack of transport. One of the Circles Project Team noted that it takes a lot of time to integrate someone into the community, that it can't be forced and that it requires building trusting relationships. Further evaluation could explore the relationships between being engaged in or active in the community, the different experiences and impact of each on the person with a circle, and barriers to inclusion that could be addressed either through this



project or through raising these issues with partners to ensure that (for example) poor health or transport barriers are dismantled.

#### **Outcome 4: Families and volunteers benefit from the mutual support and contributions of older people through their involvement in Circles.**

This evaluation indicates that the project is having a positive impact on all 3 of the original project outcomes agreed with the Big Lottery. This fourth outcome was added following the Theory Change Workshop in November 2017. People attending this workshop concluded that whilst the overarching focus was on improving the lives and outcomes for older people, the volunteers and carer/family members also stand to gain from being involved. In addition, there was a recognition that to improve lives, older people should be able to say and believe ‘I count’. The importance of feeling wanted by those people involved in the project has been highlighted in this report. This fourth outcome therefore seeks to identify the contributions that people with a circle bring to the project and the benefit these and their mutual support have on the volunteers and their family members or carers.

The biggest lesson for the Circles Project Team was in fact how many people with circles do not have any family members or carers, and where they do very few want them to be involved with the project. Therefore, it was only possible to identify and interview one carer whose partner was supported by a volunteer who subsequently left the project. It was not possible to return to speak to the carer again. A total of 8 people attended two focus groups held in February 2018 and July 2018 (one person attended twice).

The motivations for being involved in the project were different for the two cohorts. For the carer of a person with dementia, the project provided an opportunity for the person with a circle to take part in an activity that was a very important part of his life. For the carer, who was not getting enough sleep and was exhausted, it gave her a chance to have time to do “other stuff”. Through the Circles Project the person with dementia was able to go to the gym with a volunteer. The carer recalls the smile on her partner’s face having been active saying *that’s what you do it for*. She went on to explain that her partner having a happy experience makes a difference to her wellbeing: *If [person with circle] sleeps, I sleep*. She also valued someone having a positive experience with her partner.

In this situation, the person with the circle having a positive experience and feeling better has in turn made the carer feel better. When asked if the project had made a difference to her personally, she replied:

***Yes, it gave us a purpose.***



Only one person with a circle talked (unprompted) about the impact the project was having on her family member. She acknowledged that her family, who live abroad, were happy to know that there's someone with her.

Circles Connectors offered, that despite many families not directly being involved in the project, the fact the person with a circle is doing something and going out takes the pressure off them doing it.

Volunteers have reported multiple benefits from the mutual support and contributions of the person with a circle:

***I've got a new friend and some of the discussions we have reignite old memories for me. So, it's not one way it is a two-way thing.***

Many other people concur with this idea of getting out of it as much as the person who has the circle. Another volunteer recalls the reward she felt seeing the person with the circle that she supports arriving at the library:

***But then one day the weather was really bad and I waited for her for over half an hour and I thought, she's not coming, you know, so I walked into the library and I wasn't in the library five minutes when [person with a circle] come walking in the door, there was a bus off and she waited for the next bus and that was how determined she was to be in the company. I felt as if I won a medal that day, because she came, she came on her own and she never misses it.***

Another volunteer who supported someone to do exercise shared how he felt good interacting with the person but also benefited from doing the exercise himself - so it has had benefits to both their physical and mental health.

Volunteers talked about the positive psychological effects 'on both sides', a feel-good factor. Just as the people with a circle want to feel wanted, volunteers have echoed the same feelings:

***The thing I get out of it is I feel needed.***

They also talk about having more connections themselves and enjoying going to the Circles Project outings/events as well.



Volunteers have also talked about enjoying the company of the person they support: *“There’s never a dull moment”*. Volunteers value the rich life stories and sharing similar interests, and in some cases, despite a 50-year age gap, having similar personalities as well.

Although there is less information about the benefits of mutual support and contributions of older people on family members or carers, volunteers have reported benefiting from having the connection or friendship.

In addition to the contributions that people with a circle are making in their relationships with volunteers, the evaluation noted that some of these individuals are contributing in other ways to the project. Circles Connectors have been asking people to be involved in sharing their stories and experiences in the media, on the radio to publicise the project. One person who was involved talks about being involved and highlighted the need to be seen for a person with needs not for their age:

***I was pleased that I’m looked upon not as an elderly person but as someone that needs help, not looking down upon because of my age, my age is there I can’t get away from it.***

Another lady who has a circle but is now also volunteering for Age UK, handing out leaflets about the project at events said:

***I’m giving back what they’ve done for me.***

The following Change Story describes the impact the Circle Project has had on this lady:

Susan is a 70 year old woman who lives alone in a bungalow in Central Doncaster. Twice bereaved, she mourns the loss of her latest partner and is extremely teary when she tries to hold any conversation. She would often go days without seeing anyone and this, coupled with various disabilities and health problems and living on benefits, made life extremely hard.

In January 2017 a local Social Prescribing initiative passed on Susan’s information to the Circles Team at Age UK Doncaster. “They informed us that the lady has expressed she feels extremely lonely, she only gets out of the house to go to appointment and is very low on money”. Circles was felt to be a good match in supporting Susan to get out of the house and make new connections. Susan said she wanted to meet new people but she didn’t know where to start and lacked the confidence to go on her own. She also felt limited as she did not have much money and could only walk short distances.

The role of Circle Connectors’ is to support people to make new connections in their community with the support of a volunteer, by finding out about a person’s life (what they did in the past, what they miss doing, how they would like their week to be different). *“We ask what is working and not working in their life and find out the risk factors for their loneliness (e.g. lack of public transport, low*





*income, loss of mobility). The person then decides what they want to purpose of their Circle to be, for Susan this was to join a group and meet new people.*

*From talking to Susan we found out that she used to work as a catering assistant in a hospital and was always around people. She likes bingo, word searches and loves country and western music. She wanted to learn how to use a computer and enjoys being with groups and chatting with new people”.*

The Circles team showed Susan a one page profile of one of their volunteers, Jane. They thought Jane would be a good match for Susan as she only lived 5 minutes away, she had also been bereaved, she volunteered at the local library (so knew a lot about groups in the area) and she had a wicked sense of humour - like Susan. Susan read Janes profile and agreed to be introduced to her.

Jane encouraged Susan to try a social group at the library where she volunteers. Jane met Susan off the bus once a week and walked with her to the group.

Susan often felt overwhelmed during appointments so Jane also accompanied her to doctors, social services and benefits appointments, until she felt on top of everything.

Age UK’s Information and Advice Team maximised Susan’s benefits which increased her income. This allowed Susan to pay for some carers twice a week.

Susan also started attending a weekly bereavement counselling session, started computer classes at the library, and has signed up with the door to door bus service to help her get out and about a bit more. She attends the monthly pub meet up and been out on day trips with the Circles team, helped at events and now volunteers herself.

*In a nutshell, Susan feels like her life has changed for the better as a result of being part of Circles. When we first met Susan she said that one of the only things that what was working in her life was that she was ‘still living’ and that she needed ‘a miracle’ for things to get better.*

*In just a matter of months Susan is feeling a lot better. ‘I’m surprised how quickly I feel better in myself’. Susan now has a new circle of friends who she meets every week at the library. She told us that she missed a week due to poor health so the ladies phoned her to see if she was ok, the following week they said ‘Oh we have missed you’.*

Susan’s confidence has improved since being matched with her volunteer Jane. Jane used to meet Susan off the bus, walk with her to the library group and stay with her. Now Susan attends the group independently. Susan still has a great relationship with her volunteer Jane; they still see each other on a weekly basis and keep in touch via phone. Susan feels that their relationship has made a huge difference to the way she feels.

Susan wanted to support other people to make connections in their community so has started volunteering for the Circles project herself. ‘I’m doing things I never thought I could do’ Susan tells us. She has so far introduced 3 new people to the library group, attended every ‘get together’ Circles has hosted and attends promotional events on behalf for the project. ‘I’m meeting lots of new people and I’m finding that people are really kind’.

Jane states that ‘Susan’s positive attitude is the key to the change in her life’. ‘She has settled in well with everyone at the library’



Susan is giving back to the project by volunteering and is now the face of Age UK. She has been filmed and interviewed for newspaper publications which she has loved being a part of.

Susan said she feels 'Happy as Larry' since joining Circles. Her social Circle has grown, along with her confidence.

### Summary

- The Circles project is having a positive impact on the 4 outcomes set out in the Theory of Change.
- Whilst there is less conclusive evidence to indicate if and how people are managing their long-term health conditions there is an indication that with the support of the Circles Connectors and volunteers, people with a circle are finding ways to manage different aspects of their day to day activities.
- WEMWBS data for 8 people, collected after 6 months has indicated that being involved with the project has significantly improved their mental wellbeing ( $p < 0.05$ ). This was supported by people with a circle describing feeling better and experiencing improvements in their emotional and mental wellbeing by being involved with the project.
- The impact on physical health is less evident. Many people interviewed had seen no change in their physical health and were not seeing health professionals less, it was about the same.
- The project is increasing people's social connections and alleviating feelings of isolation for many people with a circle, giving them something to look forward to. Eradicating experiences and feelings of loneliness is proving harder to do.
- For the data available, being involved in the Circles Project has significantly increased their ability to achieve their purpose, for many people this was about wanting to get out, meet more people, have conversations and learn a new skill/do an activity. This is also reflected in the Volunteer Activity Log.
- People with circles are active in a range of activities in their community but people did not feel engaged in their community. This is an area that requires further exploration.
- Volunteers are benefiting from the contribution and support of the people with circles, reporting that the friendships are two way. People with a circle are also contributing to the project in other ways.



## 6. Conclusions about Project Delivery: what's working, what are the challenges and lessons?

This section explores how the Circles Project is being delivered reflecting on what is working, where the challenges are and what is being learnt about the people and processes to support successful delivery through to 2021.

### What's working?

#### Adapting the Community Circles Model

The introduction to this report provides an overview of the Community Circles model on which this project is based. Whilst the aims of the project still align to those of Community Circles, the Circles Connectors at Age UK Doncaster have had to adapt this approach in order for it to work for older people, in Doncaster whilst meeting the project's targets.

The new approach has reversed the model so that rather than gather everyone around a person at the start and discuss their needs, this approach matches someone with a volunteer and then increases their social circle through creating more natural friendships based on the individual's passions and interests. There are a number of factors that have required this different approach:

- 1) Many older people referred to the project have no one in their social network. For those that did/do have family or friends, most did not want them to be included.
- 2) Without people in the circle, the role of the volunteer is different. They have shifted from being a facilitator to a supporter/enabler and this requires a different level of support.
- 3) It was difficult to see how the traditional model, with the staff capacity available could be scaled to the size/reach of this project. It needed to be more efficient, whilst delivering outcomes.

In February the Circles Project Team reported that their contact at Community Circles was supportive of the adapted approach. In July, a member of the team explained:

***We've now got the confidence to make the model what it needs to be rather than be wedded to the Community Circles model.***

In addition to reviewing the Community Circles model, the Circles Project Team have also reviewed the roles within the team. As such there are now two, rather than three, Circles Connectors. Their role is to work with the people with a circle, conducting initial visits, identifying the changes they want to make and supporting them through the process. In place of a third Circles Connector a Volunteer Development Officer has been assigned to recruit, manage and support the volunteers. The Circles Connectors see having this dedicated resource as a huge step forward in investing time to recruit and manage volunteers which are critical to the success of the project.



Circles Connectors have valued the freedom and flexibility to be able to adapt the model to one that meets the needs of the older people with circles, their volunteers and the project.

### **Focus on the person**

A factor in enabling people to fulfil their purpose has been attributed to the way the Circles Project Team have been creative in how they bring people together. In one case the Circles Connector describes how, through conversations and finding out about people's experiences and interests, she reconnected two people who had lost contact with each other. The Circles Project staff are intent that this project is about building the connections for people in any way they can, rather than be restricted in their approach by adhering to the process. One of the team referred to the project not being like a traditional 'commissioned' service, reflecting that through Big Lottery Funding they have the ability to be responsive and flexible in their approach to deliver outcomes.

One person with a circle describes how they can see that the Circles project is different from other groups/services they attend:

***[The groups] they're orientated in this way; at a table, you're always in the same position and always got the same person either side. Now Circles is slightly different, your personal contact and also [Circles Connectors] organise certain get togethers. And so instead of just being round a table we will talk together.. we've been to a café, large café in the centre of Doncaster, the group was there, we've been all together.***

When asked why the Circles Project was important for people living in this area they added:

***Well it's breaking down the barrier of isolation. That is the big stumbling block with elderly people they feel isolated. And as I say other groups which I've gone in haven't really broken it down, we're still told to be, we go, we say 'hello', 'goodbye', have a cup of tea and we are very nice to each other at the time, but we don't integrate. It's this integration which is essential, which I think Circles is, has the objective to integrate people together.***

When probed further to try and understand what the specific mechanisms were for this integration, the person was unable to say. This feels an important area to continue to explore as the project continues into its next phase.

Another aspect of the model, although this is common to the traditional Community Circles approach, is that it is person-centred. This is something that was talked about by people involved in different ways and roles across the project. The Circles Project Team explain that the project focuses on the person and the choice people have and how having that choice can have such a big impact on someone's life. Volunteers also talked about needing to respond to the person. The importance of really getting to know them and that activities have got to be what they want to do. They don't assume what older people want to do but let them talk and get a feel for what they want. People



with a circle have also explained how they have been asked about what their likes and dislikes were and what they wanted from the project:

*They asked: 'what do I need, what do I want?' what was suitable for me?*

Another person said:

*When you're a little bit younger people treat you in equal standard, but as an elderly person you're treated almost like, well not an imbecile but without any interest, and you have interests, you have feelings. Well an elderly person does want to be talked to.*

### **Volunteer recruitment, matching and support**

One of the successes reported by the project team in July was having a critical mass of very strong volunteers. They have credited this with drawing people into the project, and sense that there's a real drive by volunteers to make a difference.

Whilst the scale of recruitment that is needed for this project has been reported by the Circles Project Team as a huge challenge, they have been successful in recruiting and matching 40 people with volunteers. They have found that most volunteers have come through online enquiries and that social media is an effective tool for promoting the opportunities, although they recognise that more resource needs to be put into this. They have noted that attending events to promote the project can also lead to people volunteering, but this is less reliable. The Circles Project Team have found that what works in volunteer recruitment is making the recruitment process as easy as possible, for example meeting potential volunteers after hours if they work. These lessons have been shared with colleagues across Age UK in Doncaster to support recruitment of volunteers for other services.

The Circles Project Team have identified the importance of supporting and keeping in contact with volunteers throughout their time on the project. It is critical to make contact with a potential volunteer as soon as they have made the initial enquiry. The next critical time for maintaining contact is whilst they are waiting to be matched. The team have created a set of postcards that can be used to keep in contact with people as well as value their contribution. All volunteers receive training as well as requiring necessary DBS checks. Ongoing support and engagement with volunteers happens through regular meetings, a Whatsapp group and Circles events or outings, so volunteers are also making connections with and getting support from each other.

Volunteers reflected on the support that they received from the Circles Project Team:

*Quite simply if I had a question I know there's a phone number and I can ring here [Age UK Office] and I can ask for a bit of advice.*



*The support here [Age UK] is great though because I wasn't feeling particularly great last week and [staff member] said well come and meet me at this café nearby and we'll talk and it was hilarious because there was so many loud noises going on, it was just so funny.... You just feel so supported because you know that somebody's there to talk to.*

The matching process takes place between all members of the team. A one-page profile which provides information about the volunteer, interests, availability etc. is shared with the person with a circle to decide if they would be a suitable match. One of the biggest learning points for the Circles Project Team was about the importance of the match:

*The main thing is that the match has got to be right, so even if there's someone in the area, you know, it doesn't mean, I think that they get on is key. I mean, we're all human, just because someone lives in the same area, doesn't mean they're going to get on so I think getting that right, making sure we have enough information off the volunteer and the person to think, you know is that going to be a good match?*

It's important that volunteers feel confident and comfortable with who they are matched with, highlighting the importance of the initial interview process to find out these details. Once people are matched, both parties are asked if they 'gel' and if they don't they can be re-matched. This has happened a few times. The Circles Connectors have observed that a match is not about age, some of the best matches are between older and younger people. It's about looking at people's time and commitment (flexibility and times available, e.g. evening, days, weekend etc.) and whether they can be available on a regular or more ad hoc basis. Common interests or hobbies are important. They also note that if volunteers over commit, circles can fail.

### **What are the challenges and lessons?**

With over a year into delivery of the project the Circles Project Team have highlighted a number of challenges they face as the project progresses, and what they have learnt about how to manage or overcome them.

#### **Increasing numbers of circles**

There are 76 people who are engaged in the project, and forty of these are matched with volunteers. The report has already highlighted the mismatch between supply and demand for volunteers as a challenge recognized by the Circles Project Team. They are exploring and learning to manage this in a number of ways:

- They have made a conscious decision not to advertise the project until they are able to recruit more volunteers. This means that older people's expectations aren't raised and they are not having to wait for months before they can have an active circle (be matched with a



volunteer). The current average waiting time to be matched is 61 days. Instead they rely on receiving referrals from a number of agencies/organisations (see Figure 4.) that, with time, have come to understand the focus and purpose of the project and therefore are making appropriate referrals (i.e. older people who want to make a change in their lives). Whilst self-referrals (along with the Home from Hospital Service) are the main source of referral, the Circles Project Team believe that this is because people are being given information by health care professionals to contact Age UK Doncaster or people are contacting the organisation to seek information or support and are being told about the project.

- They have created strong working partnerships with two other organisations with a befriending brief in Doncaster (MHA Live at Home Scheme and bFriend). These befriending services work in different ways to Community Circles. Befriending offers a volunteer to go and spend time with a person. The Community Circles philosophy is about enabling people, with the support of a volunteer to make a change in their life and do this through the connections they make. Through conversations between these organisations they are finding that agencies are referring the same people to the different services. So, some people in Doncaster are having support from multiple volunteers whilst others have none. With the finite resource of volunteers, these organisations have agreed to work together and identify the best fit for the individual and support them accordingly through one of the projects. They feel that this provides equity across the borough and maximises the resource they do have in volunteers.
- The Circles Project Team have identified that some individuals have fairly straightforward needs and are just looking for some short-term support from a volunteer. This is often to help (re)build their confidence and in turn enable them to connect with groups/activities, which they can continue with independently. The Circles Project Team talked about developing a two-tiered system to maximise the support volunteers can offer. This recognises volunteers as supporters and/or enablers. Enablers would support people who only want or need input for a short period and then can move on to support someone else. Supporters build long-term relationships with individuals who want or need ongoing support or contact.
- The Circles Project Team have started to introduce more organised events to build the connections between people with circles. They have learnt that people seem happier to go to events with a purpose and structure. They are also starting to set up social groups that they intend to step away from once established. This is based on the premise that once people get to know people better, they may be comfortable attending without the Circles Connectors or indeed their matched volunteer (although some people will always need support with transport).

As more people are referred and more volunteers are recruited and matched, it becomes increasingly difficult to be able to invest the same level of time for each circle. Whilst in the early stages of the project staff had the time to get to know the person with a circle and their volunteers well, with 76 people actively engaged and 40 volunteers, it is more difficult to instantly recall an individual's circumstance. They recognize that whilst getting the project established, this level of investment afforded them the time to really get to know the individuals. They now need to manage this in order to support more people but whilst retaining the essential, person centred





philosophy. Using the person-centred tools and keeping records will be the mechanism by which they can.

### **Circles after a year**

Time has had a significant impact on the project on a number of levels. The Circles Project Team have noted that recruiting, training and matching volunteers takes time. There is also a recognition from both the project team and volunteers about the time it takes to develop relationships with the people with a circle:

*It's like any friend though isn't it? You know, you meet somebody you don't gel straight away, or you don't, discuss things, personal things, but as friendships develop, normal friendships rather than you know, that happens anyway so it's just the same with circles.*

Finally, for people with a circle it can take time for them to be confident or comfortable to try new things or meet new people. For example, it's taken a year for a volunteer to encourage and enable one lady to join a group she had identified she was interested in. In all situations the investment in time is essential to the longevity of the relationships and therefore, success of the project.

As the project has reached the one year mark (of 'active delivery'), there are some circles which are still going. Whilst it is positive that friendships between the person with a circle and their volunteer are wanting to continue, this is posing a new challenge for the Circles Project Team. They question, based on the competing demands of the role and their capacity, what is their on-going involvement with both parties in the circle? They are currently exploring this but have suggested that whilst the volunteer will get ongoing support through the project from the Volunteer Development Co-ordinator, the Circles Connector will cease visits and reviews with the person with a circle unless anything changes or issues arise. The team also question if the relationship has become a friendship, whether the volunteer would have the time, or interest to support someone new, which again would help with the supply-demand issues with volunteers. Currently there is no time cap on the circles for people, some naturally come to an end as others continue. Although volunteers are asked for a 12- month commitment when they sign up, it is not stipulated that it has to be with the same person so they have the opportunity to support someone else in that time. As more circles extend beyond a year, the project team will be able to observe what happens with circles, friendships and volunteers, as well as explore and learn about what happens with other Community Circles projects, to ensure sustainability of the project.

### **Barriers to making and growing connections**

The fundamental criteria for the Community Circle to work is the desire for the older person to want to make a change (and get support to help them to make a change) in their life. This is something that has been explained to agencies who make referrals and then is ascertained and discussed with the older person wanting to get involved with the project.

The Circles Project Team has become increasingly aware that motivation is a prerequisite for a circle to work. A circle has fallen down where people have had a volunteer but the person isn't motivated or otherwise able to make changes. They are finding that people are saying that they really want to





do something but when they are presented with the opportunity they are putting barriers up, saying that they 'can't do it today, no we'll do it next week'. Other barriers for people taking part in groups or activities include ill health, poor mobility and not wanting to be a burden if mobility is poor, not having the courage to do something on their own, not having a car being able to drive or use public transport due to an impairment or the cost.

This narrative was captured during some of the interviews with people with a circle:

*Well it keeps you in the flow, doesn't it? Makes you realise that there are things out there that you can do, my problem is every time I decide I'm going to do something, something happens.*

*I want to do it and I always say yes but when the time comes I just can't do it. The last time was last Sunday and I said yes, I'm going to go. Friday evening, I fell.*

As life events happen there is a consideration around how circles can help cope with these changes and interruptions.

Exploring factors around people's motivation and capacity to make changes, and the barriers to this happening is something that the Circles Project Team are keen to pursue. They are keen to factor this into the volunteer training, to help volunteers find ways to both motivate people and help them overcome other barriers or obstacles that can arise.

The evaluation has also learnt something about the ways and extent to which people want to increase their connections. There appears to be a divide between people who enjoy going to groups and activities and those who prefer one to one contact and connections. One volunteer said:

*I can't seem to get my lady involved with other people.*

Another volunteer replied:

*My lady says 'oh I want to go to that swing night'.*

Circles Connectors have been encouraging people to meet more people but some are naturally reluctant to join groups, which they understand and accept. It is clear that, as with other aspects of the project, what will work for one person may not necessarily work for another, attesting the need for a personalised approach, providing choice to individuals to suit what they want and need and doing things which matter to them. For many this might be the desire for meaningful connections, so this is about small numbers of deeper connections. People with a circle have corroborated this. Here



two people say how they are not interested in joining groups or attending events, but prefer one to one contact:

*I mean, other times they have recommended things to go to like concerts or whatever but that's just not me, I don't want to do that.*

*If I wanted to go out for teas I could but it's not my thing*

Through the interviews with the Circles Project Team the question about what building connections means to different people was raised. Is it lots of interactions with lots of different people or the quality and depth of one single relationship? This project has the potential to explore this further.

### **Sustainability**

Despite the five-year project period, sustainability is an on-going consideration for the Circles Project Team, one which they describe as 'a learning curve'. Where challenges have been identified, the Circles Project Team are thinking of and trying to address them.

Volunteers are essential to the delivery of the Circle Project. This report has already noted how the project is working to recruit, match and support volunteers. In addition, the team recognize the need and are working to keep volunteers motivated by encouraging them and recognizing and appreciating the contribution they are making to the project and people with a circle.

Connections have already been created and extended for over a year within some circles so it is anticipated where people are well matched friendships will endure beyond the project period but having other opportunities for people to connect in the community is key. The Circles Project Team and volunteers are already finding out about what's available in the community and sharing this with older people, signposting them to opportunities where appropriate. They are also looking to create self-sustaining, social groups for people involved with the project that will hopefully continue beyond the project period.

Transport is a barrier for many people to get out and access support and wider opportunities in the community. For many people with a circle they rely on their volunteer for transport. This is an issue which needs further consideration.

To support the growing population of older people in Doncaster, the Circles Project Team recognize the need to monitor and evidence the impact of the project which will be important for any future funding applications and partnerships with local agencies and networks to broaden the reach for more people.



## Summary and Conclusions

- The adapted Community Circles model caters for older people who have no family or friends or don't want them to be part of the circle. This adaptation requires volunteers to be a supporter rather than a facilitator.
- Person-centred approaches and tools are used to help people to make a change.
- Volunteer recruitment and management takes time and needs investments to ensure the sustainability of the project.
- Challenges have been highlighted. This includes the number of volunteers that are needed to be recruited, the time it takes for people to build relationships and support people to make changes. The Circles Project Team are finding ways of addressing each challenge.
- Motivation and changing circumstances through major life events have been identified as the biggest barriers for people making a change. This is an area that the project team wish to develop with the volunteers. Other barriers include poor health, lack of confidence, poor mobility and lack of transport.
- People with circles are divided in terms of the types of opportunities and relationships they are seeking. Some enjoy groups and activities to meet new people. Other prefer very individualised, one to one contact and connection.

As the project continues to grow, more people will be referred, and more volunteers will need to be recruited. NDTi has put forward a number of questions to consider when thinking about the future of the project and its impact on older people. Some of which have already been identified by the Circles Project Team. These include:

- What's important about the type of connections people make? Is it the depth of the relationship or the variety and number of people or friends that they meet? Do these different connections bring different benefits to people and how does this impact on people's experiences of isolation and loneliness?
- Understanding and developing work on what motivates people to change. Are there triggers, and what can the project team and volunteers do to help motivate people? Are there measures that can indicate where a person is on the behaviour change journey?
- Can anything be learnt from where volunteers are recruited (or not recruited) and where people who are wanting circles live, that can help direct either recruitment campaigns or opportunities to find activities that people can build connections through?
- Consider how reviewing project monitoring data more regularly and consistently can provide stronger evidence to demonstrate the impact and support the case for the project going forwards. This could include understanding the value of the number of hours volunteers are providing to support people with a circle.



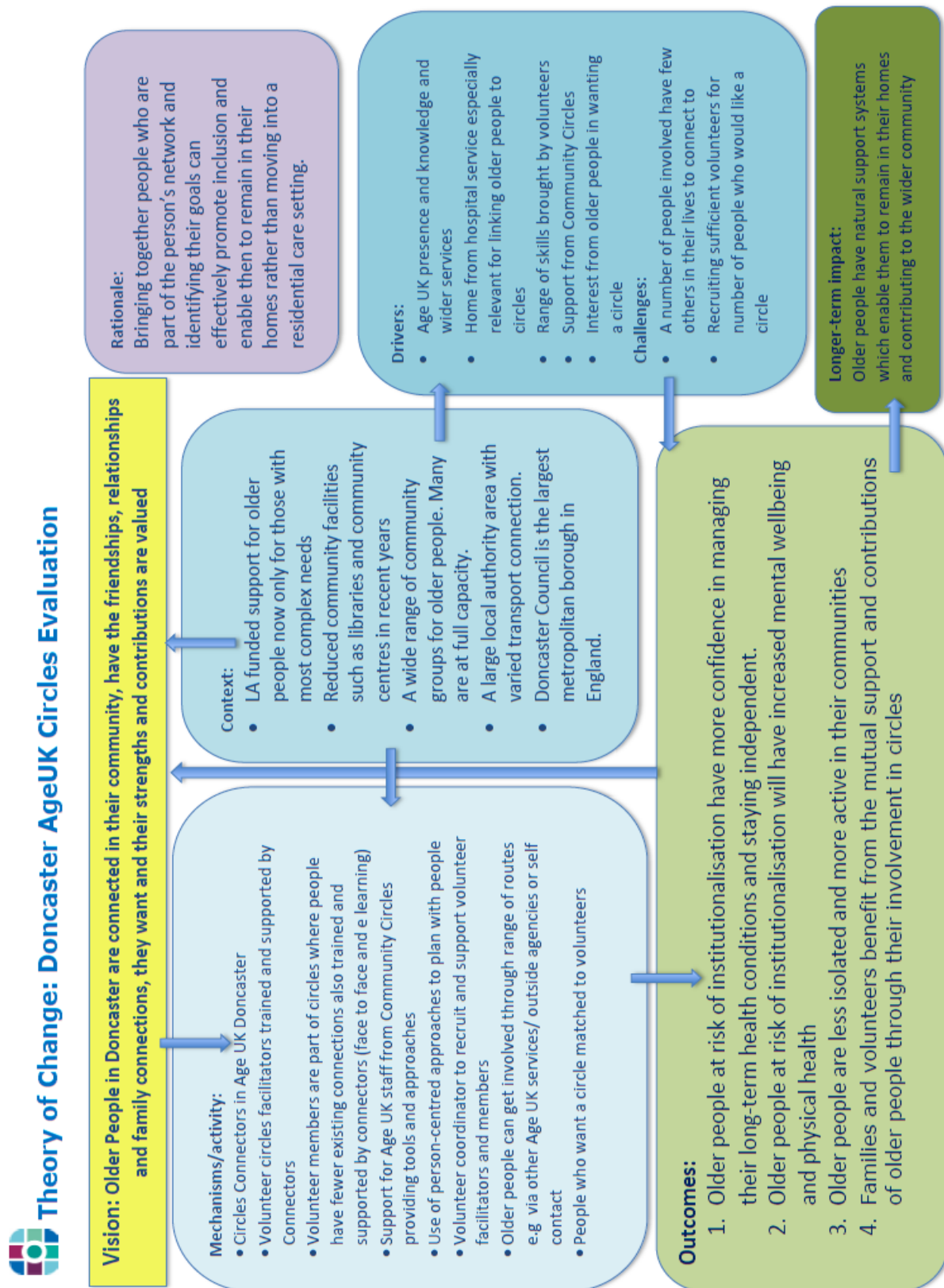
## Appendices

Appendix 1: Theory of Change

Appendix 2: Topic Guides for Fieldwork



## Appendix 1. Theory of Change





## Appendix 2. Topic Guides for Fieldwork

Topic Guide - Person with a circle:

**1. Can you tell us a bit about yourself and how you got involved in this project?**

Notes and Quotes

**2. What have your experiences been so far?** (What have you done, with whom? What have the most important things been? What has worked well, or what has not worked for you?)

Notes and Quotes:

**3. Has being involved, or doing different things helped you feel better than before- physically or emotionally?** (What has helped or not? What was most important in helping these changes for you? Have you been able to see less of health professionals?)

Notes and Quotes:

**4. Have you been more engaged in your own community?** (Have you had the chance to help out other people, do something you couldn't do before in your neighbourhood?)

Notes and Quotes:

**5. Have you met new people or made new friends?** (How has this happened, who are they? Where have you met them? What helped this come about? Are they involved in the circles project or not?)

Notes and Quotes:

**6. What do you think is the most important thing about Community Circles for people in this area? Would you recommend it to others and why?**

Notes and Quotes:

**7. If you could change one thing about the Community Circles Project what would it be and why?**

Notes and Quotes:



## Topic Guide - Carers of person with a circle

### 1. Can you tell us a bit about yourself and how you got involved in this project?

Notes and Quotes

### 2. What have your experiences been so far? (What have the most important things been? What has worked well, or what has not worked for you?)

Notes and Quotes:

### 3. How have you been involved in your loved ones/ family members/ partners circle? (Have you had meetings, helped to plan, helped share what is important to them?)

Notes and Quotes:

### 4. Has the project made a difference to you personally? (What has changed? Have you felt supported/ better/ healthier/more connected in any way? What has made the difference?)

Notes and Quotes:

### 5. Has the project made a difference to your loved one/ family member who has a circle? (What has it done for them, and how has that happened.)

Notes and Quotes:

### 6. If there was one thing about the project you could change what would it be?

Notes and Quotes:

### 7. What do you think is the most important thing about Community Circles? (And why do you think this)

Notes and Quotes:



## Topic Guide - Volunteers

### 1. Can you tell us a bit about yourself and how you got involved in this project?

Notes and Quotes

### 2. What were your reasons for volunteering? And why this project in particular?

Notes and Quotes

### 3. What kind of things have you been doing so far? (What have you done, with whom? What has worked well, or what has not worked for you?)

Notes and Quotes:

### 4. How would you describe a Community Circle to someone who didn't know about it?

Notes and Quotes:

### 5. What has the best thing been about volunteering with Circles?

Notes and Quotes:

### 6. What has been the most challenging thing about this volunteer role? If you could change something what would it be?

Notes and Quotes:

### 7. Has volunteering in this project made a difference to you personally in your life? (What kind of difference, e.g. feeling better, more connected, healthier?)

Notes and Quotes:





## Topic Guide - Community Circles Project Team

### 1. Can you tell us a bit about your role in the Community Circles project?

Notes and Quotes

### 2. What do you feel have been the biggest successes so far?

Notes and Quotes

### 3. What are the challenges? And what have you learned about these or about what would help address these challenges?

Notes and Quotes

### 4. What kind of changes have you seen in the lives of those involved? e.g. of people with a circle, carers, or volunteers. Give real examples- referring to the different outcomes. This might be about improved health, better emotional wellbeing or more friendships and connections.

Notes and Quotes

### 5. How is the project helping people be part of their own communities? (local, or communities of interest). Is it changing the perceptions of people around them about what older people have to offer?

Notes and Quotes

### 6. What other partners have you worked with locally to enable the project to work well? (e.g. GPs, community groups, universal services). And what has been their role?

Notes and Quotes

### 7. What has been your biggest learning point so far?

Notes and Quotes

### 8. What do you think is most important about the future for sustaining Community Circles for people?