Think Digital Programme

Evaluation of Phase 1 (2020)

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Acknowledgements

1. Introduction

1.1. The Think Digital Programme

Age UK, with funding provided by Santander, supported five local partners: three Age UK areas (Blackburn & Darwen, Leicestershire, South Lakeland), and two Age Cymru areas (Dyfed, Gwent) (referred to as 'partners/areas' hereafter) to run the Think Digital programme. The programme aimed to engage, inspire and support people over 50 years old to develop their digital skills through individually tailored support. Each area employed a Digital Coordinator to offer training and support to staff and volunteer Digital Champions, as well as overseeing the programme.

Roles within Think Digital

Project Leads: manage the project in their area, ensuring key deliverables and objectives are met. They recruit, manage and support staff and volunteers to run the programme.

Digital Coordinators (employed): To motivate, inspire and train volunteer Digital Champions to equip them with the skills required for their role. Some coordinators directly support older people to develop essential digital skills.

Digital Champions (volunteers/some employed): To motivate and inspire older people to make the most of digital technology and to support them to develop their basic and financial digital skills.

Think Digital builds on Age UK's earlier One Digital Programme which ran between 2015 and 2016[1]. The One Digital Programme identified that empowering, supporting and inspiring trusted intermediaries to be Digital Champions is a highly effective and sustainable way of delivering digital skills.

The local partner delivery of the Think Digital programme began in early March 2020 but was soon paused due to the COVID-19 pandemic. The local delivery restarted on 1st June 2020 and ran until 30th November 2020. While the overarching aims of the programme remained the same following COVID-19 restrictions, delivery changed from a face-to-face to a mainly remote model, though socially distanced face-to-face contact took place on a few occasions. In addition, Digital Champions were trained by e-learning, as opposed to face-to-face as initially planned.

Proven models[2] that support older people to use digital include: peer support, co-design and empowerment, flexibility, the right language, appropriate regard for accessibility, time to build trust, the right pace, and ongoing support. These components are just as relevant when delivering virtual models, though the delivery mechanisms are likely to be different.

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[1] https://www.onedigitaluk.com/our-activity/evaluation-reports/age-uk-evaluation-reports/

[2] Based on the findings of the evaluation team's previous (unpublished) evidence review on this topic for Good Things Foundation, which they briefly updated at the outset of the Think Digital evaluation.

The project recruited and trained 59 Digital Champions, delivered awareness raising activity to 25,874 people, and ultimately supported 696 older people to develop their digital confidence and skills.

At the time of writing, Santander has confirmed extension funding for a second phase of the programme, which began on 1st December 2020 and will continue until 31st May 2021.

1.2. The Evaluation

Age UK commissioned the social research consultancy, Imogen Blood & Associates to conduct an independent evaluation of the programme, which was led by Dr Sarah Alden and Dr Ilona Haslewood.

1.2.1. Objectives

Since this was the first time that remote digital-related support had been funded by Age UK, the evaluation extended its original focus on outcomes for older people to incorporate more understanding of the processes, the roles and experiences of the Digital Champions and the Digital Coordinators. The evaluation aimed to assess the effectiveness of the revised delivery model and capture learning from how the projects adapted to COVID-19. This report unpicks the ways in which a remote delivery model is run in practice and identifies the factors that lead to good outcomes, for whom and how.

The fieldwork was carried out from August 2020 to November 2020 and aimed to answer two key questions:

- How effective is the programme e-learning in preparing Digital Champions for their role? Specifically, does it provide Digital Champions with the skills, confidence and the adequate support that they need to successfully deliver their role?

- How effective is the programme in supporting older people to develop their digital skills? Specifically, how helpful do older people find the telephone support provided, and how do they think it can be improved to be more effective?

The primary purpose of this was to inform learning for local Age UK and Age Cymru partners across England and Wales.

1.2.2. Methods

The evaluation began with a rapid evidence review and a face-to-face workshop (held prior to the pandemic) with local partners at the Age UK national office in London. It used a method of data collection which offers an 'in the moment' assessment of change over time, using a semi structured interview format. By the end of Phase 1, we interviewed:

- 5 Digital Coordinators and 1 Service Manager
- 7 Digital Champions (including 5 volunteers, 1 Age UK local partner staff member and 1 Santander staff member, one of the volunteers was also recruited through Santander)

- 21 participants (older people) across the 5 areas, which included 18 follow ups.

Some participants were interviewed prior to a session taking place; and some were interviewed for the first time after sessions had started running. The three participants that did not receive a follow-up had been engaged at later stages of the evaluation.

Interviews with older people accessing Think Digital support were conducted over the phone and in one case, via video conference. Interviews with project staff and volunteers were conducted by either video conference or phone. Recordings were made, with participants' consent, to support the production of accurate notes. The research team met to identify key themes and practical learning points from the data.

1.2.3. The structure of the report

The findings from the evaluation are presented in three core sections:

Section 2 describes how local areas have adapted their implementation of the programme to a remote delivery model in response to the pandemic, and reflects on learning from this.

Section 3 focuses on the feedback from Digital Champions on the training and ongoing support they received, and their motivations and experiences of remote delivery.

Section 4 presents evidence from the evaluation relating to how older people experienced the adapted service delivery models and the impact of the programme on them.

In the concluding section, we summarise the key practical implications from the evaluation for Age UK, both nationally and locally.

2. Delivering Think Digital: local Age UK and Age Cymru partners

All bar one local area had previously run externally funded digital training and support initiatives. Adapting existing services to fit with a remote delivery model undoubtedly presented challenges, especially as some juggled this with the need to deliver wider support related to COVID-19. Areas had also started to set up Think Digital based on the original model, including staff and Digital Champion (DC) recruitment and the planning of promotional events and activities. All of this needed a rethink, and in this section we consider some of these changes, particularly in relation to recruiting DCs. Nevertheless, partners acknowledged that the pandemic had also provided a unique opportunity to test how digital support could be offered in a different way, with all intending to incorporate at least some remote elements moving forward.

2.1. Working with Digital Champions

2.1.1. Recruitment

Effective recruitment and retention of volunteers is essential for a Digital Champion support model to run effectively and sustainably. As highlighted in the introduction, DCs were successfully recruited across a range of ages, circumstances and volunteering experience.

Though the volunteer recruitment process generally followed pre-COVID-19 procedures, in some cases this took longer due to staffing issues or delays in DBS checks or references.

Shifting delivery to a remote model had a significant impact on recruitment, both positively and negatively. All areas reported losing at least some DCs and in one area, all of the volunteers chose not to continue. This was due to a mix of challenges: lack of confidence, concerns around client safety (e.g. being unsure if instructions were being followed correctly), additional time pressures, not feeling comfortable talking on the phone, and for older volunteers particularly, a belief that they could not provide the additional predicted emotional support due to shielding themselves. However, and as discussed later, the flexibility offered by remote DC opportunities suited some volunteers well.

The Think Digital Toolkit produced at the outset of the programme by Age UK's national Project Team, contained a role description for DCs, both employed and voluntary. Regardless of how support is delivered, it is essential for DCs to be good communicators who are enthusiastic about digital and willing to help.

In the box below, we summarise those DC qualities which proved particularly suited to *remote* digital support, as referred to by staff and volunteers during the evaluation.

Desirable DC qualities

Personal qualities

- Patient and calm: more repetition and longer sessions often required when working remotely. It may also take more time to identify 'that hook' during initial sessions where practical issues related to set-up or other pressing problems are more likely to come to the fore.
- Empathetic: participants were viewed as more likely to open up about non-digital issues and reveal personal information when being supported remotely, leading to a need for support more akin to befriending.
- Able to talk confidently through problems without necessarily having sight of someone's device.
- Working in a goal-orientated/solution-focused way, and able to think creatively. Although this applies in any setting, it was felt to be particularly important when working remotely, both to ensure that sessions stayed on trac (with the primary focus being on digital issues) and in order to overcome frequent practical challenges.

Skills and Knowledge

- Communication: ability to articulate using everyday language and via a range of devices, particularly the telephone. DCs referred to digital being 'riddled with terminology' which takes longer to explain remotely (e.g. what is meant by an 'Icon' or 'App' or 'Google').
- Having a working knowledge of various digital devices; though projects discovered workarounds, such as matching DCs with participants who use the same devices.
- Knowledge of local services, since participants often presented with more non-digital needs.
- Background in teaching or training was felt to be particularly valuable when working remotely.

2.2. Provision of digital resources

Partners provided a range of technology-based resources to support remote delivery, generally driven by the ongoing needs of DCs and participants, including:

- Setting up digital platforms and tools, such as MS Teams, Zoom and WhatsApp to host in-house training and as a vehicle for DCs to meet, support and learn from each other.

- Lending tablets with the same configuration to DCs and participants. Some expressed that without having mirrored devices, a remote model would not have worked.

- Downloading Remote Viewer/social platform facilities on tablets lent out to older people.

- Setting up easy to follow guides and screenshots.

- Providing mobile Wi-Fi units to support the set-up of devices.

- Developing a list of useful Apps that DCs could share with participants.

Partners are looking to increase their offer moving forwards, such as supplying smart speakers and additional tablets. They also plan to continue the development of online group meetings and easy to read documents. Another partner aims to download shared screen facilities on loaned tablets at the outset, as it had proved time-consuming and difficult to set up once given to the older person.

Each partner assessed the risk of adopting particular tools, and also listened to the preferences of DCs. For example, some DCs found remote sharing invaluable, as they could use gestures and see the participant's screen; others were uncomfortable using screen sharing tools and preferred to use a telephone, supplemented by posting out screenshots. One local partner chose not to use Remote Viewer due to a concern that an older person may be more likely to be scammed by others once they had become familiar with using it. This highlights the importance of local areas taking account of the needs of *their* volunteers and older people, and being able to respond flexibly to support them to deliver remote sessions.

Finally, one Digital Coordinator who set up a WhatsApp group, felt it was important to monitor the use of digital resources to ensure they are used appropriately. They gave the example of jokes being shared amongst DCs who did not all know each other well, and which some might have found inappropriate.

2.3.   Working with older people

2.3.1. Promotion and recruitment

Ensuring wide reach was one of the key aims of Think Digital, and face to face awareness-raising events were originally planned by partners to accommodate this. Due to COVID-19, some interviewees reported fewer opportunities to promote the project, as digital support drop-ins and other services were either closed or had limited operation.

"A lot of [older people] are shielding – some are not even going out to buy a paper so you think 'how do I get to them?'" (Digital Coordinator)

The local areas reported needing to dedicate more time to raising awareness as a result, and using a range of approaches to do this. These activities targeted a mix of new recruits and current or former service users, and included:

- Delivering leaflets door to door;

- Advertising in free local newspapers or magazines, or via posters in public areas;

- Visiting/ contacting local services to ask them to promote the service and setting up mutually beneficial partnerships where appropriate;

- Promoting the service via an email distribution list;

- Advertising through social media, though the experience of this was mixed. A partner which held its own social media account had received significantly more interest during lockdown restrictions, especially from family members. However, a partner which promoted through Age UK national social media reported delays in this process, due to the need to book and wait for a slot.

- Wellbeing telephone calls/packs sent out at the beginning of the pandemic;

- Including information in quarterly newsletters; and

- Promotion of the service across other internal services.

While one partner focused primarily on promotion across other internal services, others reported recruiting participants who would probably not have previously approached their service, and/or for whom a more traditional digital offer would not have been suitable. Such new referrals included:

- A younger demographic, including people in their early fifties and upwards, who were introduced to Think Digital because the services they usually used, such as the Jobcentre or library, were closed;

- People who would find it difficult to access drop-in services due to caring responsibilities, poor physical health or mental health issues such as extreme anxiety and agoraphobia; and

- Those who faced practical barriers, including a lack of transport for those living in rural areas.

One DC suggested that for those who are reluctant to seek support in a social environment, building trust through first providing remote support might encourage them to then visit a drop-in service, once COVID-19 restrictions have been lifted.

2.3.2. Ongoing support

Digital Coordinators mainly got involved with participants at the beginning, to find out about their needs, to enable matching to a volunteer, and for safeguarding and administrative purposes. In some cases, Digital Coordinators also provided DC support, meaning contact would be ongoing.

For some older people, remote support was only felt to be possible due to the lending and installation of equipment. This included a tablet lending scheme, offering advice on the most reasonably priced Wi-Fi options, installation of Remote Viewer and giving out accessibility tools, such as a digital pen for someone who struggled to use touchscreen due to arthritis. The trust achieved by partners in their respective local areas was particularly important for tools such as Remote Viewer, which as highlighted above, had been linked to online scams. This was supported by the perception of Age UK as a trusted organisation.

2.4.   Setting up the sessions

Specific safeguarding procedures for participants included sessions on internet safety for new users and an offer to set a password when first connected to a DC, to reassure the participant that the call was genuine. Safeguarding concerns were sometimes anticipated at the outset, through wellbeing calls or existing records, though this was more difficult for people who had not accessed Age UK services previously.

With regard to matching a DC with a participant, Digital Coordinators applied the usual criteria of age or gender where possible; though most placed more emphasis on matching to a DC who is accustomed to the devices and Apps which the older person has or wants to use:

"We quickly realised that if the Digital Champion is working remotely, they need to know what the [participant] is seeing. When a person comes to a group clutching a Windows 97 laptop, 5 minutes later [the DC] remembers what to do. Now, if they can't see it, it takes so much longer" (Digital Coordinator)

One partner had developed a chart containing all volunteers, and the devices and platforms they are familiar with so as to facilitate this process. This also included information relating to DC capacity and the areas where they felt most confident. This is an example of good practice which would benefit from inclusion in future national resources to support other partner areas.

2.5.   Building capacity

A principal aim of Think Digital is to support local partners to integrate digital inclusion into their wider service offer. Some Digital Coordinators felt that offering remote digital support in a climate where other local services had either reduced or stopped provided a unique 'selling point'. One explained that the remote delivery model had '*put our service on the map'* through developing new partnerships and referral routes, and attracting potential future funding. This was achieved through generating interest via social media and a mail-out to organisations across their catchment area.

While developing referral routes with new partners was viewed positively, an identified challenge was that those referred by outside agencies, such as pharmacies or health-based charities, tended to present with greater levels of non-digital related needs, compared to those referred internally, and this had time and resource implications.

One local partner highlighted that the wider infrastructure of their organisation was becoming more digitalised in response to restrictions, including services such as advice, support and befriending. Some Digital Coordinators gave examples of supporting older people to access other services digitally, e.g. a befriending group zoom session. This received positive feedback from DCs who said they felt part of a community, with some going on to join the group themselves. In another area, a linked service had lent tablets to older people, and required help to support their use.

2.6. Working with Age UK national and local partners

While local partners are well versed in providing KPIs and attending progress meetings, an identified pressure was that remote support required more work with individual participants to ensure longevity. Digital Coordinators responded positively to a relaxion of the specific targets relating to the number of participants engaged and duration of support. One DC also felt this had taken away pressure for older people, who may have been dissuaded to give it a try if sessions were limited. However, one DC felt there should be an 'end-goal', which could evolve as the participant's skills and confidence increased.

Monthly meetings were arranged with Age UK national and the local partners running the project. Though these were assessed as a useful way to hear about what other areas are doing, one Digital Coordinator realised early on that different local contexts and assets meant it was not always realistic to apply this to their own settings:

"You hear another area is doing something that sounds good, you can wonder what you have done wrong. But then you talk to them and they have facilities in place, such as a partnership that we don't have. So actually, we can't do this now, though we can work toward this moving forward" (Digital Coordinator)

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3. Learning in relation to the Volunteer Digital Champions

This section focuses on DCs' motivations, experiences and the perceived effectiveness of the training and ongoing support provided to them. However, there are some limitations of the data in this respect, since the majority of the DCs interviewed were existing volunteers, many of whom did not access training for reasons discussed in section 3.2.

3.1. Profile and motivation

The DCs included a mix of new recruits, existing volunteers and Santander staff. To effectively deliver and sustain a personalised service such as Think Digital, it is necessary to consider the preferences and needs of DCs. As with participants, volunteers have specific needs and motivations, with the remote nature of the service impacting on this. Volunteer DCs explained that they wanted to support their community, share skills and knowledge, and make a difference (digitally and emotionally). Some interviewees referred to the social aspect as a key driver, especially for those who are retired:

"I know our [DCs] well, some want to get out of the home, they are retired, they want to come out and meet people, have a laugh and a chat, go for a meal or bowling after a meeting" (Digital Coordinator)

One DC said she missed working with colleagues at a drop-in session, where they would go for lunch or drinks afterwards.

Moving forward, Digital Coordinators felt it may become more difficult to recruit remote DCs, due to a combination of people having less time once restrictions are eased and a perception that it offers less opportunity to socialise with others. However, a few Digital Coordinators identified ways in which a remote offer could potentially *increase* their pool of volunteers, by reducing barriers related to location, work, education or caring responsibilities, availability of transport or disability:

"One [DC] wanted to volunteer last year but he can't drive and wouldn't feel comfortable with group work. But when we offered remote delivery, he contacted us straight away…it has built his confidence…When we come out of the pandemic and go back to face to face, he will be the remote support worker" (Digital Coordinator)

In another case, remote support had increased volunteer capacity through a participant with a hearing impairment looking to use what she had learned to volunteer herself and show the benefits of digital to others with hearing impairment.

3.2. Training and resources

Age UK's national Project Team initially supplied partners with a Train-the-Trainer Toolkit, offered in both digital and hard copy format. In response to the remodelling of the programme, a Digital Champion e-learning training resource was also developed and shared with partners in early June 2020. Induction training across local partners consisted of a mix of e-learning, webinars and group sessions via digital platforms; this was offered in different ways across local areas, including:

- A 45-60-minute telephone call, which included an email link to the e-learning resources (this was in place of a full day induction).

- In-house training via Microsoft (MS) Teams to DCs as a group.

- To supplement in-house training, two Digital Coordinators had signposted DCs to free training and resources provided by local and national organisations.

- Re-designing local guidance to support remote delivery, including 'how to' guides designed to ensure participants could be more self-sufficient between digital sessions.

One of the Coordinators reported that group online training was viewed positively, as it offered a convenient way to get people together without the need to travel. Though the three newly recruited DCs interviewed did not distinguish between e-learning resources and in-house training, one reported that the training overall had increased their confidence and all felt it had increased their ability to provide remote support.

The four experienced DCs (one of whom was employed) we spoke to had not accessed the e-learning resources, for two main reasons:

- Lack of availability at the right time: one Digital Coordinator reported that their volunteers had already started delivering the service.

- A number of DCs were recruited from former or existing Digital Champion programmes run by partners, and some felt at the outset that additional training was not required.

Although all of the experienced DCs interviewed said they did not feel they needed formal training, most felt on reflection that they would have benefitted from **training specifically around the skills needed to deliver remote support**, and this is a key point which we pick up in our conclusions and recommendations. One DC reported that having extensive experience of providing face to face digital training had given her a *'false sense of security'* and she had not fully considered the challenges of delivering support without visual cues to help pace the sessions. This was particularly so where older people faced additional barriers resulting from visual or other impairments.

3.3. Ongoing support

Alongside providing more formal training, Digital Coordinators had regular ongoing contact with DCs, including light touch 'check-ins', being available flexibly for queries and connecting volunteers to each other.

One partner had started to bring volunteers together regularly via MS Teams for peer support and social contact, which was well received. The need for peer support and social contact had been mentioned by a DC from another area too, who remembered the times when it had been possible for volunteers to come together.

One Digital Coordinator viewed it as her role to make sure DCs felt listened to when things did not go to plan:

"the amount of time [DCs] have to spend planning and organising a meeting, setting things up. Then they call and the participant says they are not very well. The volunteer has to remain calm and respectful, but then they phone me and have a blast."

Since remote sessions had often entailed supporting people with more complex issues, sometimes more akin to befriending, it was felt to be crucial to ensure that DCs felt they had someone to listen to *them*. There were also reports of DCs working outside normal volunteer hours and supporting more participants than they normally would. Though this flexibility was viewed positively, one Digital Coordinator raised concerns about the potential impact of this on volunteer wellbeing and retention.

There is also a need to assess working conditions in a home environment and set out clear guidelines on this. A few DCs had reportedly provided personal details as a way to effectively communicate remotely and in one case, a participant contacted the DC between sessions, and sometimes late in the evening. While one Digital Coordinator viewed that the ideal would be to provide mobile phones, the resources were not available to provide this. Again, this differed across areas, with another partner supplying all volunteer Digital Champions with a phone and a tablet, thereby reducing some of the issues around boundaries.

3.4.   Delivering support remotely

While all DCs found remote delivery challenging at times, most viewed it as rewarding and felt they had learned more about the multiple barriers that some people face. Some DCs referred to an increase in confidence and employability, others enjoyed the flexibility, with one saying it fitted more easily with their work responsibilities and others appreciated that they did not need to get dressed up, travel or visit unfamiliar places. As highlighted earlier, it also removed barriers for those who feel unable to volunteer face to face.

It is also worth noting that a few DCs reported that they had enjoyed developing a social relationship with participants, alongside a digital focused one, sharing stories about their respective families and introducing participants to their pets. This suggests that the social aspect of volunteering that people enjoy can be satisfied remotely to a certain extent.

Opportunities to learn from other DCs through a remote model was perceived as less effective by some, with one DC feeling they had less 'back up'. A Digital Coordinator reported that DCs would email any questions across the local DC network, though it could take time to get a response. A few partners have set up online meetings via digital platforms, which were assessed positively.

While most volunteers interviewed said they had achieved some level of job satisfaction working remotely; some looked forward to going back to face to face, whereas others felt remote delivery particularly suited their needs. Partners also acknowledged that for some, face to face options would be re-opened once restrictions are lifted. This latter point opened up additional challenges, with Digital Coordinators in some areas acknowledging

that where older people had expressed a preference to wait until face to face can be offered, waiting lists are extending into several months as restrictions continue.

3.5.   Supporting older people

DCs supported a wide range of participants, including those with very basic skills, lapsed users or those who wished to expand or develop their digital skills. Sessions ranged from regular weekly calls, fortnightly 'check and chat' sessions and ad hoc communication. Participants were encouraged to take notes if helpful, and some DCs would forward written resources to supplement the sessions. In a few cases, volunteers had socially distanced face to face contact with participants, particularly at the beginning where there was a need to set up remote access or support the older person to set up and use equipment.

While some DCs reported positive experiences of delivering support remotely, a number of challenges were reported, mainly around complexity, time, technology and lack of visual cues; these are now explored in turn.

3.5.1. Increased complexity

Most DCs reported that they – quite naturally - supported the wellbeing of participants during sessions alongside providing digital support. However, DCs reported that they were working with some participants with more complex needs (including physical and mental health issues, substance misuse, those isolated due to shielding).

One DC viewed that when people receive sessions in their home environment, other problems tend to come to the fore, whereas when older people visited a location, the specific purpose would be to work on digital skills. A telephone conversation at home (where the DC was also in their home environment) was perceived as feeling more informal, leading to the older person sharing information about other things that are going on in their lives. This was assessed as being exacerbated during COVID restrictions, where participants may be isolating or struggling to identify support for other needs.

One DC explained that they felt unsure about the specific processes in place to tackle safeguarding concerns when a participant had been referred through an external service and non-digital issues had not been picked up prior to referral.

There were also a number of instances reported where participants would say they felt too unwell when a DC rang in for a session. This caused frustration for some DCs, as it would take time to prepare for the call; however, one DC explained it was important to '*go with the flow*'. The interviewee in question was experienced in providing customer support over the telephone, which perhaps contributed to this more relaxed attitude. This draws attention to the ways in which DCs' own skills and experience will impact on perceptions around carrying out remote support.

DCs generally felt able to discuss concerns with Digital Coordinators as they arose, with one suggesting that trained volunteers were familiar with the need to adopt a holistic approach and signpost to other services where a need was identified. On a related note, it was

pointed out that recruiting at least some DCs with local knowledge was useful, as they could more easily identify suitable referral routes beyond the local partners' services.

3.5.2. Time resources

As referred to earlier, there were some time savings for staff and volunteers as a result of not being required to travel. One Digital Coordinator also referred to not expecting volunteers to fill in timesheets as expected previously, but rather, to send a quick overview email, which was then logged into the system, which was assessed as saving time.

On the other hand, sessions tended to run for significantly longer when run remotely, especially where participants had more limited digital skills (in one example, a DC was on the telephone for a 4 hour block supporting someone to use a digital platform). In some cases, there was a higher number of shorter sessions, which took longer overall. Additional time was also required to post out screenshots and written materials (though this became quicker once the participant was on email, could 'google' an instruction manual themselves, or if the information could be emailed to a relative or friend).

3.5.3. Technological based

All DCs provided examples of technological focused barriers, including issues linking participants to hardware, downloading Apps and tools, and setting up broadband. This was a particular issue if the DC was not familiar with the device being used, or did not have remote access. In some cases, DCs came up with creative solutions, which included:

- Working initially with a carer, health professional or family member to set up equipment or provide initial training sessions, particularly for older people with accessibility issues.

- Providing initial remote support to an older person, until they felt more confident to further develop their digital skills with the support of a carer, health professional or family member.

- Adopting a socially distanced face to face meeting to support the set-up of equipment, then providing remote support thereafter (this included working on a DC's porch, sitting in a participant's garden, and meeting outside at a local Tesco, see Vignette 1 in the box below).

- Utilising written resources, such as sending out Age UK booklets, sending write ups and screenshots so participants could practice in between sessions. One DC remarked that participants appreciated instructions that mirrored exactly what had been discussed in the session. In one area, DCs were in the process of building a bank of written resources:

"One of the volunteers is particularly experienced in writing stuff – so is developing a central resource which we can all tap into" (Digital Champion)

3.5.4. Lack of visual cues

Alongside technological based challenges, and as highlighted earlier, some DCs struggled with the lack of visual cues, not feeling confident that the sessions were paced right or if information was being used in the correct way.

"When you look at body language, you can see if someone [hasn't understood] … you need to explain in a different way. All this is lost if you can't see them" (Digital Champion)

DCs also reported that it could be more difficult to capture someone's interest or identify that all important 'hook' during early sessions conducted remotely. Though setting up a platform so the participant and DC could see each other was viewed as helping, this was generally not set up for the first session, and in some cases, not at all. For this reason, and as highlighted earlier, training and support around telephone support skills are assessed as particularly important.

Related to a lack of visual cues, the benefits of peer volunteers can also be lost, with one reporting how people would respond positively to them when they saw they were of a similar age: "*they see me with my white hair and they will say 'she is one of us, she is going to understand'"*. This was viewed as being mitigated to some extent if the volunteer had previously met the older person or once a digital platform was set up.

Vignette 1

"We sat outside local Tesco…so we could use Wi-Fi from the building and sit at a social distance on a bench. [it was] her first experience of handling a tablet, we made a lot of progress. By end of the session, we were exchanging email messages and had started a zoom session…I have been in touch with her [virtually] since. If anyone had taken a photograph of us as Tesco, both wearing masks. The lady in question had an intimidating mask with a breathing centre piece, it was a bit out of this world (laughs)"

While DCs developed creative solutions, which led to several examples of positive impact for people with a range of needs, the consensus was that a remote learning model is less suitable for some. This included people with limited digital skills, even if they presented with no specific issues. Non-visual contact was also viewed as a barrier for those with limited English language skills, those who may struggle to get out of bed due to a health issue (e.g. where setting up digital equipment, or navigating a remote telephone call may prove difficult), a learning difficulty, sensory or cognitive impairment. This could be mitigated to some extent if the older person had access to additional support.

4. Experience and outcomes for older people

The five partners running services as part of Think Digital engaged with a diverse range of older people who could be very different in age, work status, health, disability, material circumstances and degree of social connectedness.

Older people were similarly diverse in the digital skills they had possessed: some had never used digital before, whereas at the other end of the scale, others might have been using digital for decades, or had advanced IT skills in the past, but needed new skills to use a new device or software, or to carry out a new function online. The equipment people had access to also varied: some had just tried their first ever tablet loaned to them, others had equipment in the house that they never used or was getting old, yet others had modern smartphones, tablets and laptops, or a combination of these.

4.1. Why did older people participate?

The diversity of older learners and their circumstances were reflected in the reasons why they decided to participate, both in terms of what motivated people to embark upon using the support service and what they wanted to achieve.

4.1.1. Responding to the impact of Covid-19

The lockdowns and other restrictions associated with the pandemic played a major role in many people finding themselves in situations where they were severed from other people and services, or access became more difficult, and this led them to seek digital solutions. These solutions could have already been on their radar but Covid-19 added a new urgency to get to grips with them.

Examples included older people wanting:

- To be able to do grocery shopping or banking online because of having to shield or self-isolate, or being otherwise unable to carry on as before (for example due to distance, transport, opening hours).

- To access live or recorded church services online.

- To be better able to keep in touch with friends, family and other social groups via video conferencing or messaging.

"I was quite happy [before the pandemic] because you could just jump in the car and visit friends, and of course, you don't appreciate what you've got until you miss it."

- Coordinators and digital champions spoke of people who needed to refresh their skills or learn a new one for finding new work.

The Covid-19 crisis brought about a more general realisation among some participants that as business, social and cultural life moved online, they had to start using or engaging more

with digital. This was sometimes also mediated through the person feeling isolated or lonely, or having mental health issues. For example:

- An older person wanted to learn how to use digital because of the recent death of her digitally literate partner and another person was fearful that if her partner should die before her, she would not know how to deal with business online, for example utility bills.

- Older people who felt lonely were willing to try loaned tablets for entertainment, keeping their brains active, connecting with other people and shopping.

- An older person with visual impairment felt increasingly 'squeezed' by businesses to do as much as possible online.

- Some older people who stopped using digital for a while because of illness or other life events now felt they needed guidance, reassurance and motivation to re-engage and practise regularly.

4.1.2. Keeping on top of digital

Having to update oneself about digital technology was frequently cited by older people. The tipping point often came when Covid-19 restrictions pushed them towards using digital more. These participants were already familiar with digital at least to some degree, yet having to do this felt like a burden to some (*"I don't want to have to keep up with the youngsters"*).

These issues might manifest for participants in a number of ways:

- Obsolete equipment that stopped working, had problems, or would not connect;

- Needing help to transfer between old and new equipment (e.g. iPads), different types of equipment (e.g. desktop and laptop), or different platforms (e.g. Android and iOS);

- Accessing advanced features, for example Wallet, that would enable, for example, buying train tickets online;

- Concerns about spotting newer, more sophisticated email scams.

4.2. Factors affecting participation and success

4.2.1. Fears, nervousness and suspicion

Fears, lack of confidence and suspicion associated with digital technology (and more generally, with being approached by strangers digitally or on the phone), came into play for many older people when engaging with the service and more broadly when learning about digital. For some, these were the most fundamental barriers that curbed their motivation to engage with digital.

In search of the root of the fear and suspicion, older people sometimes pointed to the digital generational gap that meant younger people who had grown up with digital technology had a natural confidence and speed that they themselves were lacking.

These feelings also shaped the support required from Digital Champions, in that reassurance was one of the most important elements when delivering sessions. As discussed earlier, Digital Champions were conscious of having to balance between delivering online safety information and counselling people to be cautious, yet encouraging a sense of confidence, discovery and self-efficacy.

Manifestations of fear and suspicion were evident throughout people's digital journeys:

- The fear of tapping or pressing the wrong thing, making a mistake with payment, or losing apps. Those with little familiarity with digital were sometimes afraid of breaking the equipment, or that it might 'blow up'. Some said they panicked when something did not work.

- Nervousness and frustrations could be caused by things not working as expected, unfamiliar technical language and slow progress.

- Sometimes people described their aversion to digital as having 'technophobia', not being very 'technically minded', having a 'mental block' or 'a mountain to climb'. These self-identities most often came with being nervous about digital and reluctant to venture beyond certain limits.

- Several interviewees said that they would not go on Facebook, because 'there are some nasty people on there', or because people were posting every minutia of their lives. Those who had not tried it often felt uncomfortable with making themselves 'visible to everyone'.

- Privacy concerns were prevalent also among those more digitally competent, for example getting an automated message from Goodreads as soon as finishing a book.

- The fear of scams was strong among many in the sample. For example, online banking was rejected by many, even among those who were otherwise willing to shop online (although on a couple of occasions this was because branch or telephone banking was accessible and familiar). Similarly, some participants were reluctant to use their card online, mostly because of safety concerns.

"… it's dodgy, putting the card through, I don't like that idea... you don't know who you're trusting…. there are that many scams going on, you've got to be really wary in life now."

- Suspicion might filter into the initial telephone contact between the older person and the Digital Champion too, the frequent experience of nuisance calls resulting in an automatic response of 'not buying anything'.

4.2.2. Health conditions and disability

One of the successes of the flexible one-to-one remote delivery was the diverse range of older people it was able to reach and support, including those in good health, some who worked, but also the large proportion of people with many and varied health conditions who would have found it difficult to access face-to-face sessions at partners' premises. Some of these participants had long-term conditions such as arthritis, lung and cardiovascular disease, stroke, musculoskeletal problems, others had limited mobility (including in the hands), and a few had hearing and visual impairments. People with mental health conditions (and in several cases, with both physical and mental health conditions) were also supported by the service; most frequently they had depression and anxiety, but some of the learners suffered from agoraphobia, sociophobia, memory problems and absence seizures.

The supported older people were invariably positive about the accessibility of the remote sessions and found it helpful to be able to postpone sessions, or have shorter sessions, when they felt unwell. Likewise, they commented positively on being able to slow down the pace when they had problems with concentration.

"But there have been a couple of times when I had to say 'can we leave it this week because I'm having a bad week' and she's been very-very flexible and very compassionate too. Understanding, I think, is the word."

Participants with visual impairments were very appreciative of the help received in these extraordinary times but found the sessions hard work: they spoke of the painstaking effort that had to go into practising every tap on the tablet with the Digital Champion and the high possibility of something going wrong. One of the visually impaired participants achieved his learning goal but noted that without the ability to recognise colours, it would have been a struggle. The other participant thought a keyboard with physical keys would have aided his learning better and was still waiting for a decision on a support grant (from an external organisation) to help him purchase specialist assistive software. Local areas and Digital Champion/ participant pairs were finding person-centred ways through these significant challenges for the first time.

4.2.3. Dealing with other issues

Issues other than those to do with health could also have a significant bearing on participants' ability to engage with the service, carry on with the sessions, or use the skills learned.

The local areas deliver a wide range of services to solve problems. As one staff member observed, when people were distracted by other problems (for example financial worries), it could be difficult to focus on learning about digital: *"if you can signpost people to help with that problem and they come back stronger"*.

In the sample of older people interviewed, there were relatively few examples of other problems, but one person who was waiting to move house during the first lockdown, and then eventually moved, lost contact with the Digital Coordinator as her landline had not

been reconnected. A staff member and a DC also spoke of alcohol misuse among some of the participants, and described serious mental health problems in a couple of people that gave rise to safeguarding concerns. Similarly, a supported person had experienced romance fraud, which again resulted in safeguarding procedures.

4.2.4. Technology

Access, suitability and problems with technology had a large impact on people's ability to participate. As discussed before, in many cases the service itself was part of the solution, as much of the support work was about helping with technology. When problems occurred, the impact of these tended to be larger on beginner learners.

Examples included:
- Lending tablets to older people who had little familiarity with digital: this was generally a positive experience which made remote learning easier when the Digital Champion and the older person could see the same thing on the screen.

"… if this has to go back to [the coordinator], I shall have to buy another one, because I can't do without one now, because it's like a lifeline"

- The success of tablet lending depended on areas' ability to support older people with using them – where this could not happen, for example because of Covid-19 restrictions, or because the learner would have benefited from face-to-face demonstration, they often struggled, unless relatives were able to help.

- Access to the internet was a significant factor: as discussed earlier, DCs' work sometimes started with trying to detect if people had access to broadband or mobile data at all. Sometimes participants did not know if their deal with their provider included any data; other times they knew they had access but had problems with their routers or firewalls, or the deal they had did not suit their needs.

- Equipment obsolescence, key features that stopped working (e.g. the cursor becoming stuck), or a setting that had gone wrong and people were unable to sort this by themselves (e.g. in one case the language setting changed to Dutch) also affected the learning journey. Those with little knowledge of digital were more easily stalled in their progress by basic issues (in one case at the very beginning, with the person not knowing how to charge the equipment).

- Issues with accessing accounts and software, for example email accounts becoming locked, passwords getting lost, or software subscriptions expiring, tended to affect those more often who already had some degree of digital knowledge. Helping to resolve these was often part of the support sessions.

4.2.5. Familiarity with digital

In a remote delivery model, user journeys were fundamentally affected by how familiar participants had already been with digital.

- Experienced users were more likely to have sought out the service with a particular goal in mind and had a good chance of achieving it.

"...once I've got the hang of [online banking] I'm fine to be honest, I've done really well… and transferring money, which would take me half a day… it's like a whole new world."

- Lapsed users also tended to regain confidence and learn useful new things quickly, provided that the problems that had disrupted their use of digital, for example illness, or financial concerns, had been resolved.

- The journeys of participants who had very little or no familiarity with digital varied the most: they could make the biggest progress (for example those who had never tried a tablet before but were now using it daily), but sometimes their progress was very slow. Generally, they found it hardest to learn through remote instruction. It could take several sessions just to set up an email account, or the same steps needed to be practised over and over again. In some cases sessions, stalled altogether when a technical issue cropped up.

4.2.6. Availability of other support

In some cases, the named project participant was not on her or his own on their digital journey. Additional people (professionals, other workers, friends, volunteers) could be helpful in supporting and reinforcing the learning. This circle could also include members of the person's family, though families' roles were more mixed (see below). Distance and Covid-19 restrictions could also prevent families from supporting the learner.

- Older people sometimes reported that they thought it was better to learn with the DC because they were patient and did not mind repeating the same information, whereas their relative was impatient or would want to 'get the task done'. Sometimes older people recalled asking a younger relative for help, but feeling they went too fast.

- Some of the relatives played a supportive role, for example helping with setting up and running a loaned tablet, downloading apps, or just encouraging the participant (for example when they were sceptical about the benefits of learning).

- Couple dynamics could also come into play, for example when learners' partners were more digitally literate than themselves and this motivated them to achieve independence. In some cases, the participant was the digitally more literate and was actively trying to help their partner.

- In some cases, particularly where the older person had significant confidence and/or health issues, a supportive person (e.g. domestic help or live-in friend) would sit in on the session. This would help with recalling the information and practising.

"And [domestic help and friend] has been doing it with me as well, because she's not very… she's better than I am, of course, and she can use her mobile, but [the DC] has been helping us both."

- An older person with complex needs was linked up with her occupational therapist (OT) by a Digital Champion in a three-way video call: in this way the OT could further

contribute to the digital support which the DC was offering; the support from the DC also opened up the possibility of future video consultations between the person and the OT.

- Some of the older people who lived alone reported receiving regular social calls from another Age UK/ Age Cymru volunteer. In at least one example it was this volunteer who linked up the participant with digital support. Social calls helped with generally supporting the older person and this way the digital sessions could also focus more on digital. In some areas, participants were linked up with online social groups via the digital team once they were able to use video conferencing.

4.3. The learning experience

4.3.1. Overall feedback

The majority of the 21 older people who participated in the evaluation said they had a positive learning journey. In a small number of cases where the experience was less conclusively positive, it was due to specific issues, for example a technical problem with the participant's laptop that needed a visit, or delays with accessing specialist assistive software. In these cases, participants were still appreciative of the support they had received.

Some of the interviewees highlighted that the remote delivery suited them better than face-to-face would have done. This was because of difficulties attending a specific venue due to transport, health and mobility issues, or because health conditions (such as agoraphobia, sociophobia or anxiety) made it difficult to handle groups, or individuals at close range.

Only a minority of interviewees had participated in an organised digital skills course previously. They reported varied outcomes; the people who had not recalled their earlier course as a success recounted travel problems, or lack of interest and focus. All of them said they were nervous about digital. The people who had found their previous course helpful were more confident users by the time they started their sessions with a DC.
A lapsed user was adamant that an organised course would not have suited them:

"If you had offered an IT course I would have been frightened to death – felt like an idiot, with the DCs you don't feel like that at all… it is just a normal person from the public – it does make you feel more at ease..."

Older people most often praised the aspects of the support that were about staff and volunteers connecting with them and trying their best to be helpful. In comparison, the digital skills of staff and volunteers were perhaps taken for granted, but as some of the DCs remarked, the bar for the level of technical skills required for the role was not very high.

Older people often mentioned how grateful they were for the support they received; the positive aspects of the support most often mentioned included:

- The patience and tenacity of DCs and Digital Coordinators, not minding going over the same ground repeatedly - participants found this helpful and liberating;

"the [DC] I spoke to was very patient and he explained the process and I was grateful for that service."

- Being spoken to as a 'human being' with a personality, history, circumstances and talents, even if not necessarily good at digital;

- DCs' and Digital Coordinators' willingness to help (including volunteer DCs giving up their time to help out) and giving encouragement;

- Linked with the above, their willingness to investigate and come back with a suggestion if they did not know the answer;

- Following up with further information after a session, including specific written instructions;

"I've had a very good teacher, very young, nice young man, and the [Digital Coordinator] has been sending printouts, because obviously I can't take in the information all at once, but that has been very helpful."

- The flexibility of the support, fitting in with daily and weekly routines, commitments and changing circumstances; going with how people felt and what they had to contend with that day;

- Participants found it reassuring to have access to a trustworthy, helpful and knowledgeable person who they could contact if they had a question, or if they got stuck.

4.3.2. Suggested improvements

There were not many suggestions, perhaps partly because people received tailored, one-to-one support that focused on individual needs and specific learning goals, as well as allowing space for building rapport and going beyond discussing digital. The other factor is that participants recognised that the service had to adapt to the circumstances of Covid-19, which placed limitations on staff and volunteer DCs.

Some of the interviewees thought that, had it been possible, face-to-face instruction would have worked better for them: as already discussed, people sometimes found following telephone instructions difficult, particularly those with limited digital skills or impairments.

The interviewed older people mentioned a couple of instances with regret when they were unable to let DCs know that they could not keep an appointment, for example when the local office was closed and they could not ring and ask for a message to be passed on, and/or when they did not have (or were unable to use) an email address for the DC. This happened when DCs did not have a dedicated phone number they were able to share with the person they supported.

4.4.   Examples of impact

Some of the participants reported a positive impact, sometimes already after a small number of sessions. For others it took longer to achieve what they wanted and there might have been pauses and setbacks.

A participant who was an active user of digital but needed help with setting up her new smartphone summed up the impact the support had for her:

"For me it was such a lifesaver... won't pretend it solved all my problems – it takes time to get used to machines – but I feel much further along."

The difference that the interviewee perceived the support had made to his or her life could be very significant, even when there would have been obvious potential to learn more. Further, perceived impact is not necessarily focused on a particular achievement, but how a person feels towards using digital, or more broadly how they feel about themselves.

Vignette 2: 'Barbara'

Barbara is in her eighties; she was at first reluctant to engage with digital skills support, her family encouraged her to change her mind.

She has a laptop which she mainly uses for emails and for making greetings cards for family. In the phone sessions with the DC she has learnt about folders, as well as cutting, pasting and saving text and images. After four sessions she started to enjoy learning and exploring.

"I think previously I was frightened of clicking on anything on the computer, in case I did something wrong and couldn't get back to where I was…. Now I'm getting more adventurous... It's obviously a big improvement."

"… previously, I could [type] a verse, but then I'd dismissed it, you know, it comes on and says 'do you want to save this?' and I would say no, because having saved it I wouldn't know what to do with it. Now I know… and so this Christmas, for example, I [typed] the verse for the Christmas cards, the 30 of them… I was able to print all the 30 verses at the same time."

"I don't feel as frightened of [the computer]. I don't think, in my own mind, I want to learn anything further at the moment, I can't think of anything else."

Many interviewees highlighted that the biggest difference the support had made to them was in gaining confidence around using digital.

"Just feeling more confident about switching my phone on…. I've got a lot to learn, and maybe I'll need to look to do a course, I don't know. But at the moment just using my phone, going into my emails and this Zoom, I'm definitely going to be using it for different church things."

As discussed before, people also found it valuable and reassuring to know a trustworthy and helpful person whom they could approach if they encountered a problem in the future. This in turn helped to bolster their confidence.

Others pointed out feeling more connected and feeling useful again.

Vignette 3: "Clive"

Clive is visually impaired and registered blind. He is in his late seventies. He is passionate about helping others: he is a trustee of a number of organisations and sits on a panel for a social care organisation. Once lockdown started, the meetings of these organisations moved online and he was no longer able to participate, as this would not have been possible via his desktop computer. The Digital Champion organised the loan of an iPad to Clive and had eight sessions with him over email, telephone and then Zoom to help him learn how to use Zoom and Microsoft Teams.

"Lots of people have come to me [from the organisations I work with], or I've been put in touch with, because they have been depressed, and over the weeks and months you see them getting better and better... "

Being able to do the Zoom meetings means that he can at least do some of those things again... *"consequently, my self-esteem is higher… and I'm still able to carry on with a useful life."*

Learning how to work with digital gave some of the interviewees a sense of achievement and self-sufficiency.

"My friends started to laugh when I started [the digital sessions]... [Looking back to that time] apart from Facebook, I didn't know anything else and was quite happy with that, but more channels are available to me now…. [I said to the DC] 'I couldn't believe you taught me so much and I took it on board'."

4.4.1. Accomplishing specific tasks

Examples of tasks which interviewees had achieved, with the support of the DCs included:

- Basic tasks, such setting up email accounts, making and organising folders, carrying out internet searches;

- Learning how to do video conferencing and messaging via Zoom, Skype, FaceTime, Facebook, WhatsApp and MS Teams to contact friends and relatives, to watch and participate in church services, theatre performances, talks, meetings (e.g. of support groups, interest groups or trustee meetings),

- Pursuing interests such as playing games (e.g. online Scrabble), making greetings cards, learning about family history or local history,

- Carrying out personal business, such as online banking, grocery and clothes shopping, buying electronic train tickets.

"… then I needed a new passport, and I didn't know how to put a photo on an email so he showed me all that... it was brilliant as I have now ordered a Blue Badge."

- Solving technology issues, such as setting up a new iPad or a new smartphone, changing to a more suitable broadband supplier.

In several examples, wanting to learn about one specific app or task led to learning about others, for example a person who originally wanted to learn about online banking also learned about grocery shopping and then about accessing local church services on YouTube. Church services were important to her but she would not have accessed them without the contact with the DC.

The following visual shows the journeys of one DC and two of the individuals he supported, one of whom is 'Clive' from the short case study in section 4.4.
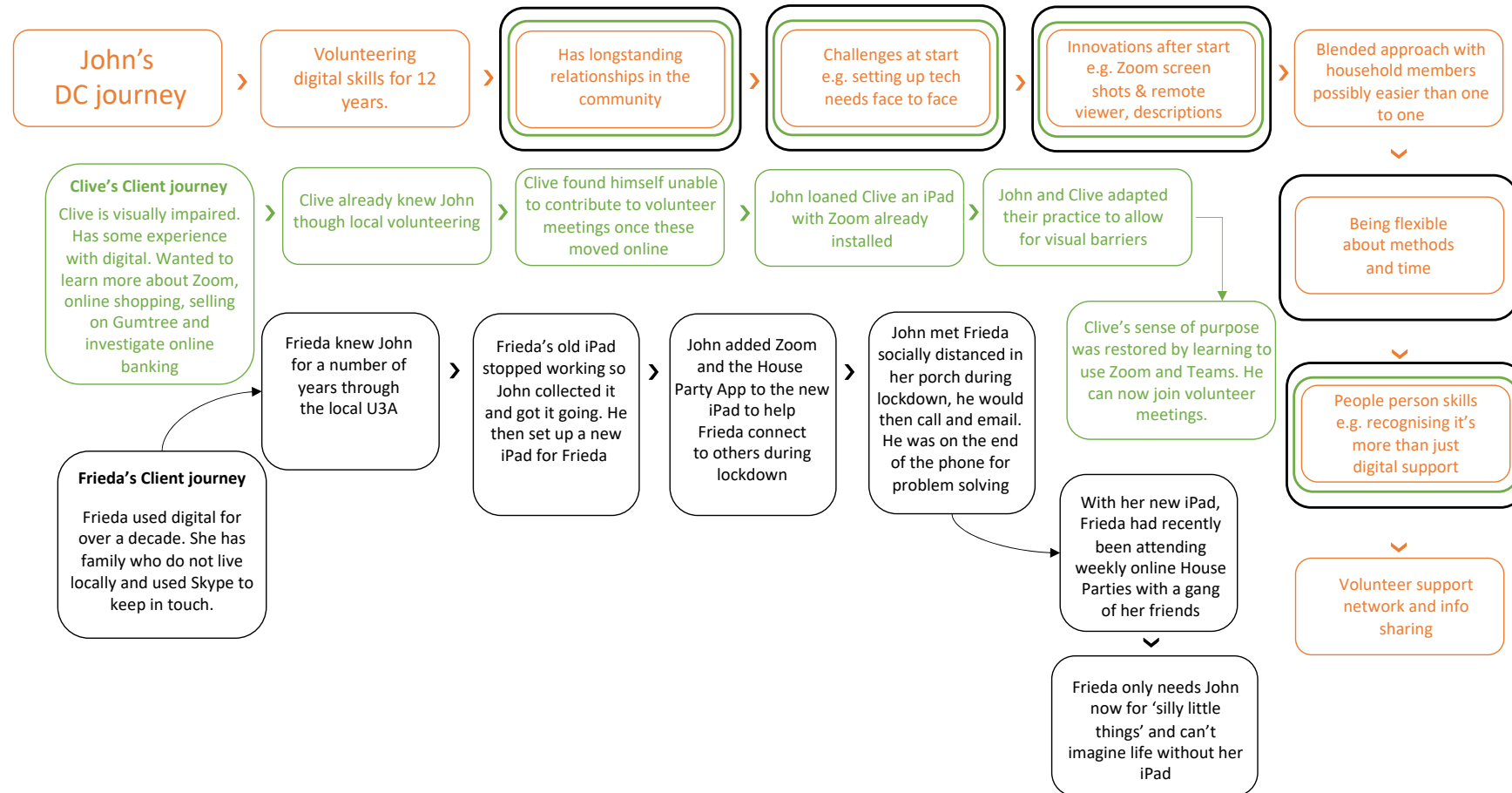
5. Reflections and recommendations to inform future development

The local partners have – with different resources and in varying ways – worked hard to adapt their delivery of the Think Digital Programme during the Covid-19 pandemic. This has generated emerging evidence of positive impacts for older people and a huge amount of practical learning regarding the delivery of digital support remotely.

Drawing on lived and volunteer experience
The programme has demonstrated the value of having a service model which allows space and permission for older people and DCs to generate new ideas for working together and to act on their own initiative. Many of the innovative ways of adapting the service model have come from the suggestions of DCs or from those accessing the service. The positive impact for volunteers' self-esteem through being able to deliver and influence provision also emerges as a theme. It will be important to find ways at both local and national levels to continue to include the lived experience of older people and volunteers in programme design (e.g. through an online advisory group, or as testers of resources), and to avoid the risks of losing flexibility through a more rigid or service-led way of working.

The value of a local approach
Overall, the evaluation has demonstrated the considerable benefits arising from the service model being delivered and flexed by local areas. Local volunteers were often keen to contribute to and build relationships within their local community, even if working remotely – and there were cases in which the opportunity for them to meet the people they were supporting for specific purposes (and within social distancing requirements) was extremely valuable. Local areas have partnerships with other local services which can also help to generate referrals and support effective signposting.

However, the local Digital Coordinators were clear that much is being done and can be further developed at a national level to support local delivery. This includes:

- Building partnerships with funders (such as the relationship with Santander) and national delivery partners (examples – suggested by the evaluation team - might include Good Things Foundation, U3A, etc);

- Having a national bank of volunteers (e.g. not necessarily limited to Santander) who can be drawn on to provide additional remote support; and

- Developing resources, both to train those delivering remote support and give further information to those receiving it (see further detail below).

The Age UK brand
The programme has confirmed that Age UK is well-placed to deliver digital support to older people, given how important it is for this age group to trust the help they receive, the widespread awareness of and confidence in the brand, and the extent of local and national partnerships. The fact that local areas provide such a range of services means that they are

well-placed to respond to non-digital support needs that arise within Think Digital sessions, and to identify digital support needs and make internal referrals into Think Digital. It is interesting and encouraging that the pandemic has brought a new and younger cohort of older people (e.g. those facing redundancy, those with long-term health conditions) to Age UK for digital support.

The future is blended

It seems clear from the interviews with local areas that the future of service delivery - if and when the world returns to post-Coronavirus normality - will be blended, incorporating elements of both remote and face-to-face delivery (albeit at differing levels across the local areas). This is echoed in other sectors, for example, a similar message emerges from a recent review of arts and cultural practice with older people during and beyond Coronavirus[3]. The key driver for retaining some element of remote delivery is the recognition that it can remove barriers for some cohorts of older people who could or would not access traditional groups or volunteering opportunities. The environmental benefits of reducing travel were also mentioned.

"I would be tempted to go back to how we did it before but I would then feel that I wasn't doing my job properly if couldn't offer some kind of support to those who couldn't get to the drop-in and can't go out – why should they suffer and not receive a service – but see pendulum swinging back to the groups – not least for sense of satisfaction for volunteers."

(Digital Coordinator)

This evaluation has demonstrated the value of a flexible, person-centred and tailored approach to supporting individuals. In a context of 1:1 remote delivery and at a time of great uncertainty and stress, building rapport with the older person was even more important to support effective learning. More generally, the evaluation showed that older people wanted support to be relational rather than transactional; they repeatedly emphasised in the interviews how important it was to them to have a connection with someone who was understanding, empathetic and patient. This suggests that the effective assessment, segmentation and matching of individual older people with DCs will continue to be key, and is likely to become even more important if and when social distancing requirements are relaxed so that individuals can receive the right support for them - whether remote, face-to-face, or a mix.

Practical considerations

In the shorter-term, as Phase 2 of the programme commences within a further national lockdown, practical priorities emerge for both national Age UK and its local partners:

- **Additional training and learning resources focused on providing remote support** by a range of media would help to support further roll-out. There are clear merits in a national resource, but this should bring together and build on the existing learning from local areas; for example, some have started to compile their own collection of

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[3] Cutler, D. (2020) Key Workers: Creative Ageing in Lockdown and After, 15 October 2020, The Baring Foundation, accessed 06/01/21 from https://baringfoundation.org.uk/resource/key-workers-creative-ageing-in-lockdown-and-after/

resources, and have identified useful resources external to Age UK which should be referenced, such as Learn My Way[4], which is hosted by Good Things Foundation and brings together free online courses to help people develop their digital skills. A national resource should also recognise that delivery has to flex to the local context, and the needs and assets of individual DCs and those they are supporting.

- The evaluation has highlighted the fact that **remote delivery tends to take longer** (though there are a number of ways in which time and other resources can potentially be saved through this model). It will be vital to retain flexibility in performance management in relation to the duration of interventions, the number of sessions and the number of people supported. A clear finding was that older people particularly valued the availability of on-going, low-key support 'as and when needed'; and that the relatively small investment of time in providing this can remove unpredictable obstacles to a person's ongoing digital development.

- The importance of **continuing to invest in the wellbeing and ongoing support of DCs**, especially those who are volunteers, given the particular risks of isolation, stretched boundaries and the need for them to provide emotional as well as digital support. Online DC support groups show promise as an effective way of providing support. Effective assessment, signposting and joint working are also key to ensure that DCs are not left alone with non-digital issues and that safeguarding issues are picked up. It is also important to integrate volunteers from the national bank into the local organisational structures and support mechanisms so that they too know how to respond to any issues that arise and feel supported.

- The importance of **coordinating the provision of effective remote support with hardware lending or donation schemes** if the impact of both initiatives is to be maximised. It was clear from the qualitative interviews that, whilst having access to devices at home is essential to develop and use digital skills, many older people need significant assistance setting up and learning to use new devices, which can be accessed from family and friends for some, but not for all. This suggests there may be potential for partnerships between Think Digital and initiatives to gift or loan devices to older people during lockdown, e.g. housing providers such as Anchor Hanover[5] or Wales Cooperative Centre[6].

- The need to **test, share and develop approaches to supporting older people remotely who face additional access barriers**, resulting from disability, physical or mental health challenges, and/or language barriers. We have seen that for some older people remote delivery newly opened up the possibility of accessing support with digital, while for some others, not sitting in the same room threw up barriers. We heard many examples where DCs had developed innovative and person-centred

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[4] https://www.goodthingsfoundation.org/learn-my-way
[5] https://www.insidehousing.co.uk/insight/insight/how-the-pandemic-is-speeding-up-the-digital-transformation-of-housing-services-66314
[6] https://wales.coop/digital-devices-on-their-way-to-support-care-homes-during-the-coronavirus-pandemic/

solutions, and, whilst there is no one-size-fits-all approach, some partner areas recognised the need to develop models and resources to support future work.

The evaluation planned for phase 2 of the Think Digital programme will focus on gathering qualitative data to evidence and understand the longer term impact of the programme on participants. We hope to explore how personal and contextual circumstances interact with the way in which support has been delivered to enable – or get in the way of – older people continuing on their digital journeys.