

Evaluating Ageing Better Isle of Wight

The costs and the benefits



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Introduction

Ageing Better Isle of Wight is a 5 year (2015-2020) Ageing Better partnership funded by The National Lottery Community Fund (TNLCF) aiming to make the Isle of Wight a great place to grow older, encourage better relations between generations, and tackle social isolation and loneliness. The Programme is made up of a number of projects that are working to reduce social isolation and increase the health and wellbeing of older people in a range of ways. See www.agefriendlyisland.org/our-projects/ for more information about the projects.

Evaluation and monitoring over the last four years, has shown that the Programme is improving the lives of older people and making the Island a better place to age¹. While reducing costs to the public purse is not an explicit aim of Ageing Better Isle of Wight, with the Programme being delivered against a backdrop of austerity and funding cuts in the statutory sector, costs, benefits and value for money are inevitable considerations alongside the change to people's lives.

Due to the amount and detail of data needed and the resource required it has not been possible to conduct a full cost benefit analysis for each of the funded projects. Instead this report provides information on costs in order to reflect on the value for money of the work that has been delivered through Ageing Better funding, and provides an illustration of the benefits by looking at the potential costs avoided to the public purse through the work delivered by the projects. It does this through looking at:

- 1) Project unit costs:** An estimate of the cost per participant of each project
- 2) Costed case studies:** Four case studies that provide an illustration of the costs to the public purse that can be avoided through the work of the projects
- 3) Potential costs prevented:** A consideration of the costs to the public purse that would need to be avoided to match the costs of funding a number of the projects

Over the period of the Programme there have been some changes to the projects that have been funded for a range of reasons. The projects in this report are those that were funded in Year 4 of the Programme (2018-19).

¹ NDTi (2017), Age Friendly Island Local Evaluation: Annual Evaluation Report 16/17
www.ndti.org.uk/uploads/files/AFI_Evaluation_report_16-17_-_final_31.07.17.pdf

NDTi (2018), Age Friendly Island Local Evaluation: Annual Evaluation Report 17/18
www.ndti.org.uk/uploads/docs/AFI_Evaluation_report_17-18_final.pdf

NDTi (2019), Becoming an Age Friendly Island
www.ndti.org.uk/uploads/files/AFI_project_insight_June_2019_final.pdf



1. Project Unit Costs

The table below presents an estimate of the cost per participant of the 11 projects that were working with older people in the financial year 2018-19².

The unit costs have been calculated by dividing the amount of Ageing Better funding provided to deliver the project in 2018-19 by an estimate³ of the number of participants who experienced the project in the same period.

It should be highlighted that ‘participant’ means very different things in different projects, from one-off pieces of advice, to intensive one to one support over a number of months. The number of participants for the ‘Isle Find It’ project reflects the number of unique users to the website⁴. The unit costs presented here therefore are not intended to be used to make comparisons of value for money between the different projects.

The unit costs presented below (for Year 4 of the 5-year Programme) do not include set up costs to the project, or periods where the projects were becoming established. Because of this they are more indicative of the unit cost of sustaining or maintaining the projects as they are currently being delivered, rather than representing the cost of delivery over the whole Programme period.

In-kind costs that would usually be reflected in a cost-benefit analysis (such as free use of rooms and facilities and volunteers) have not been included in the costs. For some projects these in-kind costs can be significant. This ability to use community resources and mobilise volunteers is a strength of a number of the projects and enables them to provide value for money. The unit costs therefore provide an indication of the cost of continuing to deliver or sustain the project if the in-kind provision and volunteer contribution were to remain stable.

² The Age Friendly Island project has not been included as it focuses primarily on change to the Island as a whole, rather than individual older people.

³ As part of Programme monitoring, projects are required to report the number of ongoing participants and the number of new participants on a monthly basis. Because an individual who is a new participant one month will be counted as ongoing participant for subsequent months and an annual figure is not part of the reporting requirements, the actual number of participants per year is not known. The estimate here is based on the sum of the new participants each month and the number of ongoing participants reported in the first month. We have used this as an estimate as it avoids double counting of individuals. However, for some projects it is likely to *underestimate* the actual number, as ongoing participants who don’t participate in the first month but return in later months will not be counted. Due to data collection issues for the GNS project in 2018-19, the estimated number of participants is based on 2019-20 figures to date; this is a less reliable estimate than for the other projects. Some projects operate in a number of localities on the island. If an individual goes to more than one locality, they will be counted as a separate participant in each one. This does not affect the unit cost as they are ‘consuming’ more than one unit of the project.

⁴ Using Google Analytics definition.

Project	2018-19 Ageing Better funding	Estimated number of participants 2018-19	Estimated cost per participant 2018-19
Alzheimers café	£18,298	285	£64.20
Care for Carers	£75,731	297	£254.99
Care Navigators	£269,976 ⁵	1,176	£229.57
Community Navigators	£92,878	980	£94.77
Digital Inclusion	£26,397	403	£65.50
Employment Support	£55,986	85	£658.66
Good Neighbour Scheme	£113,322	567	£199.86
Isle Find It	£39,418	37,404	£1.05
Men in Sheds	£51,164	275	£186.05
Olderpreneurs	£83,667	102	£820.26
SingAbout	£50,810	589	£86.26

The table shows that some of the projects are delivering at very low unit costs. The Alzheimer Cafés, Digital Inclusion and SingAbout all have an estimated cost per participant in 2018-19 of £86 or less. The cost per unique user for the Isle Find it website is just over £1. The Care Navigators cost an estimated £230 per participant and the Community Navigators cost an estimated £95 per participant. Olderpreneurs and Employment Support have higher unit costs (£820 and £659 respectively) due to the in-depth one to one support they provide. However, they also have the potential to generate significant economic benefits through reductions in unemployment benefits and particularly in the case of Olderpreneurs, through contributing to the island's economy. Furthermore, both of these projects have younger participants on average and are working primarily at a preventative level, so can be seen as an investment for the future.

⁵ The Care Navigators project is match funded by the Clinical Commissioning Group, this figure is 50% Ageing Better funding and 50% CCG funding



2. Costed Case Studies

The Ageing Better Isle of Wight Programme aims to improve the lives of older people through tackling and preventing social isolation and poor health and wellbeing. In addition to the negative impact on an individual's quality of life, social isolation and poor health and wellbeing incur costs to health, social care, local and central governments.

In this section we present four costed case studies to illustrate the ways that the projects work to reduce and prevent costs to the public purse. The individuals and scenarios described here are based on evidence collected through the evaluation of the Programme to date (qualitative interviews with participants, participant 'change stories' and interviews with project leads). The cases described are not "real" individuals but they are made up of different elements of real people's stories. The projects unit costs calculated above have been included, and published unit costs from trusted sources have been applied⁶.

George's story

George, aged 67, has lived alone since separating from his wife in his early 50s. George worked as a painter and decorator for most of his life, enjoyed his work and loves to keep busy. After retiring he found he got very bored and lonely. He has two children and five grandchildren but as they live on the mainland, he only gets to see them a few times a year. A lot of his friends still work and his neighbours are not around during the day. In a conversation with his daughter on the phone about how low he was feeling, she suggested perhaps it was time for him to see his GP for help. George was reluctant to do this but knew he needed to do something.

While he was mulling over whether or not to go and see his GP, George happened to meet a Community Navigator when he was at the library returning some books. The Community Navigator asked George what he was interested in and talked to him about the different things going on locally. George felt that social groups, coffee mornings and singing groups weren't for him, but he liked the idea of Men in Sheds. He went along to his local shed and has never looked back. He now spends at least 1 or 2 days a week in the shed. He enjoys being able to use his painting and decorating skills and feeling useful

⁶ GMCA (2019), Unit Cost Database v.2.0 www.greatermanchester-ca.gov.uk/what-we-do/research/research-cost-benefit-analysis/

Curtis, L. and Burns, A. (2018), Unit Costs of Health & Social Care 2018, Kent: PSSRU www.pssru.ac.uk/project-pages/unit-costs/unit-costs-2018/

again and he likes the social element of the shed, chatting to the other men. He is feeling less lonely and much better in himself. So far, he has not felt the need to go to his GP.

Costs: The estimated cost of providing advice and support by a Community Navigator is £95. The estimated cost of someone participating in the Men in Sheds project for a year is £186.

Benefits: The costs saved as a result of someone suffering from depression avoiding service provision for a year are £1,004⁷.

Through George's use of Ageing Better funded projects costing £281, there is an estimated total saving of £1,004 to the public purse.

If the projects were funded by the statutory sector there would be a net saving of £723 to the public purse.

Bridget's story

Bridget, aged 73, and her husband moved to the Isle of Wight 8 years ago when her husband retired. Since moving her husband developed dementia and Bridget became his carer. As the dementia progressed, Bridget found her husband needed increasing amounts of her time and care until she felt she could no longer leave him on his own. Bridget and her husband have not had children and they haven't made really close friends since moving to the island. Bridget felt there was no-one she could call on for help and she felt isolated. She wasn't able to enjoy the social activities they had previously enjoyed as a couple and her husband could no longer drive. She was feeling physically and mentally exhausted and in desperation had started to think she would need to look into residential care for her husband.

Bridget heard about the Alzheimer Cafés through her GP and went with her husband to their local café. She appreciated being among other people who could relate to how she was feeling and found it a relief being somewhere where she didn't have to worry about her husband. At the first café they went to a worker from Care for Carers introduced herself and told Bridget about what they do. They visited Bridget, helped her apply for

⁷ GMCA (2019) Average cost of service provision for adults suffering from depression and/or anxiety disorders, per person per year 2018-19: £1,004

Attendance Allowance and supported her to apply for funding for respite day care. Bridget now goes to the monthly Carers Café and a weekly craft session run by Care for Carers, and her and her husband go to the Alzheimer Café every month. Having the extra income means they can take taxis to get to the groups and the cafes when they can't use public transport. Bridget has joined a local walking group and goes walking when her husband has respite care.

Having this bit of time for herself to do something she enjoys, having the opportunity to have a social life with her husband, as well as having people to talk to at both the Alzheimer Café and Care for Carers has made Bridget feel she is able to cope. She knows where to go to when things are hard and she is also aware of the different help she can get as her husband's dementia progresses, which she has found reassuring. She realises there may be a point in the future that her husband needs residential care, but for now she feels able to cope.

Costs: The estimated cost of two people attending an Alzheimer Café for a year is £128. The estimated cost of providing advice and support through Care for Carers is £255. The cost of Attendance Allowance for a year is £4,451⁸. The cost of respite care for a year is £5,148⁹.

Benefits: The costs saved as a result of someone with a memory or cognition support need avoiding residential care for a year is £30,524¹⁰.

Through Bridget's use of Ageing Better funded projects costing £383, there is an estimated cost of £9,599 to the public purse and an estimated saving of £30,524. This is a net saving to the public purse of £20,925.

If the projects were funded by the statutory sector there would be a net saving of £20,542 to the public purse.

⁸ Attendance Allowance higher rate 2018-19: £85.60

⁹ GMCA (2019) Average gross weekly cost of day care or day services for older people, England 2018-19: £99

¹⁰ GMCA (2019) Average gross weekly expenditure on supporting older adults (65+) with a memory or cognition support need in residential care, England 2018-19: £587

Joyce's story

Joyce, 87 is widowed and living in her own home, which is difficult to access by public transport. Over the last few years Joyce had relied on her friend to give her lifts to get out and about. When her friend died, she became lonely and isolated. The only place she went was to her local shop and her GP. Joyce's GP was concerned about her low mood and wellbeing and felt she was seeking appointments for the social contact, so referred her to the Care Navigators.

A Care Navigator came to visit Joyce and talked about her needs. The Care Navigator suggested she tried her local SingAbout group to address her isolation. Joyce was able to walk to her local SingAbout and found it to be friendly and welcoming. She finds the singing uplifting and feels the short walk keeps her active. Someone she met at SingAbout invited her to a coffee morning run by the local church. She now goes to SingAbout and the coffee morning every week and enjoys seeing people she knows through these groups to chat to when she goes to the shop. She is feeling less lonely and has stopped going to the GP for social contact.

Costs: The estimated cost of providing support and advice through a Care Navigator is £230. The estimated cost of someone participating in SingAbout for a year is £86.

Benefits: The costs saved as a result of someone avoiding 2 hours of GP time over a year are £408¹¹. The costs saved as a result of someone suffering from depression avoiding service provision for a year are £1,004¹².

Through Joyce's use of Ageing Better funded projects costing £316, there is an estimated total saving of £1,412 to the public purse.

If the projects were funded by the statutory sector there would be a net saving of £1,096 to the public purse.

¹¹ PSSRU (2018) GP cost per hour of patient contact 2018-19: £204

¹² GMCA (2019) Average cost of service provision for adults suffering from depression and/or anxiety disorders, per person per year 2018-19: £1,004

Mike's story

Mike was made redundant from his job as a factory operative when he was 59. He had enjoyed the social aspect of work and felt lonely and isolated without it. His self-esteem also took a knock as a result of being unemployed and he was feeling low. He found it difficult to look for work as he hadn't had to use IT at work before and felt intimidated and overwhelmed by computers. He felt his age was a barrier and that he couldn't compete with younger people. At an appointment at the Jobcentre Plus, he was given information about the Employment Support project and agreed to an appointment. He received one to one support from an adviser at Employment Support who supported him to write a CV and apply for jobs online. He used the drop-in sessions to get more confident with using computers and for the peer support from others in the same position as him. Mike was successful in getting a temporary Christmas job as a picker in a warehouse and the job was made permanent after the Christmas period. Now he is working and earning again, he feels better about himself and doesn't feel isolated and his low mood has lifted.

Costs: The estimated cost of providing advice and support from through the Employment Support project is £659.

Benefits: The costs saved as a result of a workless Jobseeker's Allowance claimant entering work for a year is £12,882¹³. The costs saved as a result of someone suffering from depression avoiding service provision for a year are £1,004¹⁴.

Through Mike's use of Ageing Better funded projects costing a total of £659, there is an estimated total saving of £13,886 to the public purse.

If the projects were funded by the statutory sector there would be a net saving of £13,227 to the public purse.

¹³ GMCA (2019) Fiscal benefit from a workless Jobseekers Allowance claimant entering work for a year 2018-19: £12,882

¹⁴ GMCA (2019) Average cost of service provision for adults suffering from depression and/or anxiety disorders, per person per year 2018-19: £1,004



3. Potential Costs Avoided

The case studies above provide an illustration of some of the ways in which the Ageing Better Isle of Wight projects can prevent costs to the public purse. The challenges of measuring or estimating the value of preventative interventions is well recognised and is one of the factors that made it difficult to conduct a full cost-benefit analysis for this Programme. In this section we use an approach which considers how many incidents (e.g. episodes of depression or anxiety, unemployment, use of residential care) would need to be prevented by the projects to match the financial costs of running them.

Currently the projects are funded by TNLCF through the Ageing Better Programme and the savings outlined are savings to the public purse. The purpose of this section and the case studies above is to illustrate the potential economic impact the Programme has had on the health and social care sectors on the Isle of Wight, and to inform decisions as the TNCLF funding for the Programme draws to an end and some projects are exploring other sources of funding.

There are a number of points to highlight in the calculation of potential costs avoided:

- The project costs and the number of participants are from the period April 2018 to March 2019 (Year 4 of the 5-year Programme) as set out in the table on page 6. As described above, the number of participants are estimates and may underestimate the true number of participants, therefore the numbers used in the calculations below are conservative.
- As described above, the costs used here are funded costs and do not include in-kind costs.
- Some of the ongoing participants will have incurred project costs before 2018-19, but equally some of the benefits will continue beyond the 12 months.
- The unit costs of prevented or avoided costs have been taken from trusted sources of unit costs for 2018-19¹⁵.
- The potential cost savings outlined here are not all cashable savings, meaning they may not result in a direct reduction in expenditure that can be released elsewhere.
- The examples below illustrate just one area of cost savings per project. In reality, many projects have the potential to avoid or prevent costs in several areas.

¹⁵ GMCA (2019), Unit Cost Database v.2.0 www.greatermanchester-ca.gov.uk/what-we-do/research/research-cost-benefit-analysis/

Curtis, L. and Burns, A. (2018), Unit Costs of Health & Social Care 2018, Kent: PSSRU www.pssru.ac.uk/project-pages/unit-costs/unit-costs-2018/

While this approach is a somewhat crude way to assess the economic value of the projects, in the absence of full cost benefit analyses it provides a way of considering the value of the projects by weighing up the potential costs avoided compared to cost of the intervention.

The cost of supporting an older adult with a memory or cognition support need in residential care for a year is £30,524¹⁶.

If the support and education provided through the Alzheimer Cafés resulted in 1 of the 285 people supported by the Alzheimer Cafés avoiding residential care for a year, the costs saved would match the costs of funding the project¹⁷.

The cost of residential care for an older person for a year is £21,320¹⁸.

If the support provided by Care for Carers resulted in 4 of the 297 people supported by Care for carers avoiding residential care for a year, the costs saved would match the costs of funding the project¹⁹.

The cost of GP time is £204 per hour²⁰.

If the support provided by Care Navigators resulted in 442 of the 1,176 people supported by the Care Navigators avoiding three hours of GP time, the costs saved would match the costs of funding the project²¹.

The cost to the public sector of someone being out of work for a year is £12,882²².

If the support provided by Employment Support resulted in 5 of the 85 people supported by Employment Support being in paid work for a year, the costs saved would match the costs of funding the project²³.

¹⁶ GMCA (2019) Average gross weekly expenditure on supporting older adults (65+) with a memory or cognition support need in residential care, England 2018-19: £587

¹⁷ £18,298/£30,524=0.60

¹⁸ GMCA (2019) Residential care for older people - average gross weekly expenditure per person, England 2018-19: £410

¹⁹ £75,731/£21,320 = 3.55

²⁰ PSSRU (2018) GP cost per hour of patient contact 2018-19: £204

²¹ £269,976/£612=441.14

²² GMCA (2019) Fiscal benefit from a workless Jobseekers Allowance claimant entering work for a year 2018-19: £12,882

²³ £55,986/£12,882=4.34

The cost of providing services for people suffering from depression and/or anxiety disorders for a year is £1,004²⁴.

If the support provided by the Community Navigators resulted in 93 of the 980 people supported by the Community Navigators avoiding receiving services for depression and/or anxiety for a year, the costs saved would match the costs of funding the project²⁵.

If involvement in the Men in Sheds project resulted in 51 of the 275 people involved in the Men in Sheds project avoiding receiving services for depression and/or anxiety for a year, the costs saved would match the costs of funding the project²⁶.

If participation in the SingAbout project resulted in 51 of the 589 people participating in SingAbout avoiding receiving services for depression and/or anxiety for a year, the costs saved would match the costs of funding the project²⁷.

²⁴ GMCA (2019) Average cost of service provision for adults suffering from depression and/or anxiety disorders, per person per year 2018-19: £1,004

²⁵ £92,878/£1,004=92.51

²⁶ £51,164/£1,004=50.96

²⁷ £50,810/£1,004=50.61



Summary

It is important to remember that reducing costs to the public purse is not the primary aim of Ageing Better Isle of Wight. The Programme's purpose is primarily to improve the lives of older people – and that can come at a cost. However, in the current economic climate, a consideration of whether something represents value for money is of inevitable interest, and where interventions both improve the lives of older people *and* potentially reduce costs to the public purse it is important to highlight this.

In the absence of sufficient data and resource to conduct full cost-effectiveness or cost-benefit analysis, the unit costs and consideration of potential costs prevented outlined here together provide an illustration of the value of the Programme. We can see that, in part due to good use of volunteers and community facilities, the projects are delivering support, advice and interventions at a low unit cost per project. Through preventative work, costs such as residential care, treatment for depression, GP use and unemployment benefits are being saved. For several of the projects, a low number of incidents of use of publicly funded services (by a small proportion of the projects' participants) would need to be prevented by the projects to match the financial costs of running them. Together this information suggests that the Ageing Better Isle of Wight Programme offers both value for money and has potentially saved significant costs, particularly to the health and social care sectors on the Isle of Wight.