

Building community capacity: the economic case in adult social care in England

Research findings

KEY POINTS FROM THE RESEARCH

- Third-sector projects are seen by many in central and local government as important both for the delivery of adult social care and for developing community capacity for support to people who would otherwise require more formal social care.
- Our evaluation of four diverse projects operating in this area suggests that the third sector does have potential for delivering services that prevent or delay the need for formal social care.
- However, the current context of commissioning services in adult social care presents substantial challenges and risks to third sector organisations seeking to provide state-funded services.
- In particular, funding uncertainties pose questions about the third sector's stability and capacity to take on more substantial roles. These tend to encourage organisations to focus on meeting established commissioning priorities, rather than to develop innovative community-based services.
- There are significant practical methodological challenges to undertaking evaluation of these projects. To a large extent, existing third sector infrastructures are not currently geared towards meeting the public sector's growing requirements for targeted, evidence-based investments.

KEY RESEARCH AIMS

Establish the costs, outputs and outcomes of a number of apparently 'best practice' community capacity-building projects, especially in relation to their potential for alleviating pressures on adult social care budgets and in the context of current policy interests.

Draw together such data to assess the nature and robustness of the economic case for investing in projects of this kind in terms of the pay-offs which might be secured for the resources invested.

Develop methods of data collection and analysis which might assist local commissioners and providers to develop both an approach and an evidence base which will assist investment decisions.

BACKGROUND TO THE SCHEME

Successive governments in England have emphasised the potential for using community resources to improve social outcomes and fill gaps between needs and resources. The 2010-15 Coalition Government's policies in this field included its Localism and Big Society initiatives which aimed both to move more decision-making to a local level and to empower communities of active citizens to co-design and co-produce care and support services. In addition, and against a background of sustained fiscal austerity, there is a growing emphasis on identifying all the resources potentially available to help meet local adult social care needs and target them as effectively as possible (e.g. the Neighbourhood Community Budget pilots www.gov.uk/government/publications/neighbourhood-community-budget-pilot-programme).

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These aspirations are based on a set of assumptions about the resources available at a community level, the investments needed to mobilise those and the outcomes that can be achieved, in particular compared with existing service provision. Such considerations are often expressed in terms of how far approaches based on community capacity can help reduce pressures on public spending, especially by preventing or delaying the demand for more expensive services. For example, in its core policy statement on adult social care, the Coalition emphasised the importance of preventing, postponing and minimising people's need for formal care and support by "promoting people's independence and wellbeing" (DH 2010). Volunteering and support within communities were specifically highlighted as key instruments.

However, evidence about the costs and effectiveness of developing and deploying community resources remains limited. The central focus of this study was to begin to strengthen the knowledge base available to commissioners considering investment in community capacity-building through projects designed both to harness the resources of local communities and to use them to achieve positive outcomes for individuals in those communities.

METHODS

Community capacity-building projects were defined as those with the potential to develop and harness resources available in communities to promote greater social inclusion and improve the wellbeing of people who have (or are at risk of developing) health and social care needs. The study was conducted in two stages: an exploratory, profiling stage and more detailed economic analysis.

Two Learning Exchange events led to a list of 15 candidate projects. These projects seemed to meet the following criteria:

- potential capacity to prevent or reduce need for adult social care
- interest in establishing the economic value of their activities
- ability and willingness to collect data necessary to meet our evaluation objectives.

All projects were based in England and predominantly in the third sector. They included befriending schemes, peer-support schemes, community health champions, Circles of Support and time banks. The research aimed to cover a mix of delivery models targeted at different groups of people and 'needs'.

We visited each project to gain a detailed understanding of their aims and objectives, their intended beneficiaries, the ways they operated and their funding base. In addition, we organised local workshops for key stakeholders to explore their capacity to participate in the second stage of economic evaluation.

Seven projects appeared able to move into the second stage of the research. We worked with the sites to assess the costs, outputs and outcomes of project activities, including their relationship to adult social care and health services. Four projects were ultimately able to provide us with some evaluative data (see Box).

- [Circles of Support.](#)
- [AgeUK Help-at-home Scheme](#)
- [Altogether Better Hull](#)
- [Bromley Mind](#)

FINDINGS: STAGE 1

In addition to determining which sites were able to participate in the economic analysis phase of our study, data collected during the first stage provided valuable insights into the operation of a diverse group of community-based projects in their then financial and wider policy environments during 2013 and 2014. The projects are likely to constitute an extremely small proportion of all such initiatives and were not intended to be representative of them. Thus, we make no claims for the generalisability of our findings. However, two observations may be worth further investigation since they are apparently central to relationships between the statutory and third sectors in the current policy environment:

- (1) All projects were working in contexts of high uncertainty, particularly financial.

Pressures on their funders/commissioners resulted in a number of projects either being unable to secure continuity of funding for their activities (in part or in total) or being required to shift the focus of their work to obtain funding renewals. While such re-focussing was understandable in the financial climate, it poses questions about the third sector's capacity to take on more substantial roles. It also potentially challenges the extent to which the third sector had space to pursue innovation rather than meet established commissioning priorities. Some projects felt that the scale of the challenges to public spending created more opportunities for innovation by the third sector but, in general, there seemed to be more concern about the negative consequences of austerity.

(2) The financial challenges faced by public sector funders were resulting in more active performance and contract management, including closer specifications of third sector activity and demands for evidence of the impact of investment in the community sector pre- and post-funding agreements. Indeed, this study and the data demands it made on projects was itself a reflection of those pressures. Some of the difficulties that projects experienced in contributing to our economic evaluation of their work drove home to us the poor fit between existing third sector infrastructures and the public sector's growing requirements for targeted, evidence-based investments. These pressures also meant that we were unable to develop generalised data collection and analysis tools to support future commissioning decisions.

FINDINGS: STAGE 2

We summarise here findings from our more detailed economic analyses conducted in the four participating sites.

1 Circles of Support

Circles of Support aim to support a person with disabilities (often profound) to have as good a quality of life as possible (Neill and Sanderson, 2012). We looked at five Circles in North West England. Members of these Circles were supporting adults with moderate to profound disabilities, and included close family, friends and individuals with specialist knowledge in the field. Each Circle had a

facilitator to guide their activities. Economic 'pen pictures' of the Circles, based on best available information from interviewees, were drawn, identifying the costs of care, support and benefits received (ranging from £29,000 to £107,000 per year). We also made qualitative descriptions of substantial perceived/claimed gains in ability to live more independent lives and improved social care outcome gains, based on the assessment of the primary carer.

Circles had developed and harnessed community resources which promoted social inclusion and improved wellbeing. This very small scale study can only offer tentative evidence, but the Circles offered effective and personalised ways of supporting people with disabilities and have the potential to offer a more cost-effective way of providing support to people with disabilities than the alternative, which in most cases would have been a long-term residential care placement.

2 Age UK Help-at-Home Scheme

This service aims to enable older people to live more independently in their homes for longer, reduce loneliness and isolation, and improve their physical and mental health. It provides a befriending programme, a practical support service (for which individuals pay a fee) and a benefits advice programme.

We found that participants involved in the scheme achieved a number of positive outcomes, such as better physical and mental health, reduced social isolation, better wellbeing, and the meeting of some social care needs. Some volunteers also felt that their involvement had helped them find paid employment. One consequence of these improvements is that the scheme appeared to generate substantial economic benefits, both from the perspective of local public agencies (NHS and council) and from the perspective of participating older people. Total costs of running the scheme were a little over £1,000 per person per year, of which about 70% fell to the local authority (the funding to Age UK) and the remainder to individuals using the service (paying fees). But the scheme appeared to generate savings to the local authority through reduced use of social care services. Among the other economic benefits, the scheme helped many older people to access

welfare benefits to which they entitled but which had not previously been claimed.

3 Altogether Better Hull

This third scheme was developed and funded as part of the North East initiative of health champion schemes originally funded with a grant from Big Lottery. This particular scheme ran in a disadvantaged community and targeted adults aged 18 to 65 years who were considered particularly vulnerable. A core element was a comprehensive training programme, attended by 310 people over a 3-year period, 77 of whom went on to complete the next level and 18 of whom went on to further 'train the trainers' qualifications. This particular project had stopped running by the time of our research, and we were reliant on telephone interviews with a relatively small number of former participants for our evidence. Our tentative conclusion was that there was only a small economic benefit associated with the project, and only when a wider societal perspective was taken; for government there was a net loss.

4 Bromley Mind

This peer-support scheme was for people with enduring and often severe mental health problems; peer-support workers were recruited from existing service users or from the wider community. They were supported through a wide range of training and development opportunities to provide services and support to other people with mental health problems within the project as well as in the wider community.

Again it was hard to get the evidence we needed for our evaluation. Although difficult to quantify, the estimated costs for running a peer-support scheme were calculated at just over £1,000 per volunteer. However, there appeared to be economic benefits to government that were considerably larger, mainly due to savings from reduced use of mental health services and reduced need for professional input to run the organisation's open sessions. From a wider societal perspective, the net benefits were greater, and included quality of life gains to peer-support workers and productivity gains for those who moved from their peer-support role into employment.

ABOUT THE STUDY

The study was conducted between June 2012 and April 2014. It was conducted by Annette Bauer, Martin Knapp, Margaret Perkins and Gerald Wistow, Personal Social Services Research Unit, London School of Economics and Political Science.

Further findings from the individual projects will be available soon.

Ethical approval for the study was granted by the Social Care Research Ethics Committee.

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CONCLUSIONS

Our work suggests that third sector-based projects may be able to meet needs in ways that are innovative and responsive. They may be able to prevent or delay the need for formal social care support, with positive economic impacts. Further work is needed to provide robust findings, not least because we were unable to gather evidence on some of the 'softer' outcomes (such as increasing community participation) which projects often saw as important aspects of their work. However, the environment within which the community projects we studied were operating was constrained by ever-present funding issues, with increasing pressures to make a 'business case' to commissioners, which was not always acceptable within projects' values and philosophy. Smaller projects with minimal infrastructure may be unable to compete in a seemingly ever-tougher economic environment. In addition, organisational change and the often small scale of operations, few paid staff, fluid workforce and minimal infrastructural support made it difficult for projects to engage actively with the research demands for data.

REFERENCES

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- Neill M and Sanderson H (2012) *Circles of Support and Personalisation*. www.helensandersonassociates.co.uk/media/75948/Circlesofsupportandpersonalisation.pdf