



LIVING WELL NORTH YORKSHIRE

October 2018

- 4,507 referrals up until the 31st March 2018, similar volume and client profiles in year 1 and 2
- More one-off support and fewer full Living Well agreements in year 2 vs year 1
- Primary reason for referral to Living Well - more face-to-face IAG in year 2
- 91% of clients across the two years said the support received from Living Well was successful
- 72% of clients recorded a meaningful increase in well being scores (mean +8 points)
- Main short-term outcomes focus on information, advice and guidance, but there are longer term impacts on social, emotional and practical support
- Segmentation analysis suggests there may be more benefits for certain groups, but the evidence is not strong enough to suggest a more targeted service
- £1.7m saving due to delayed entry to social care
- £8.9m net social impact (ROI £3.84)

Similar referral volumes and demographics in year 2

4,507 referrals up until the 31st March 2018.

- 2,176 referrals in year 1
- 2,331 referrals in year 2
- 495 received more than one referral over the two years

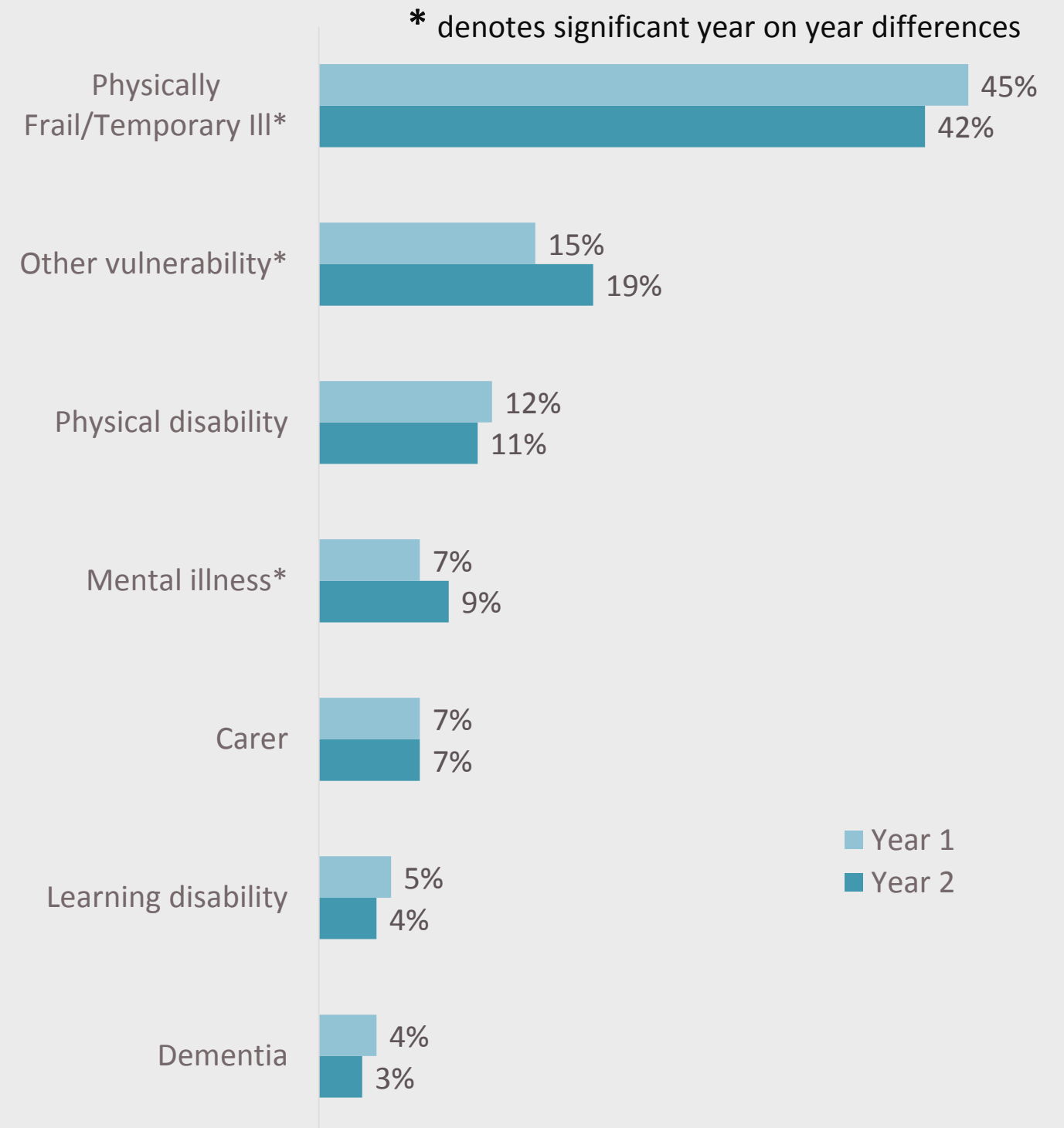
Demographic profile similar to year 1

- 60% female
- 44% aged 75 or older
- 31% single, 28% widowed, 28% married, co-habiting or partnered, 13% divorced or separated

The source of referral changed between years 1 and 2

- fewer referrals from planned care (13% vs 29% year 1)
- more from primary care (22% vs 14%) and independence (23% vs 8%)

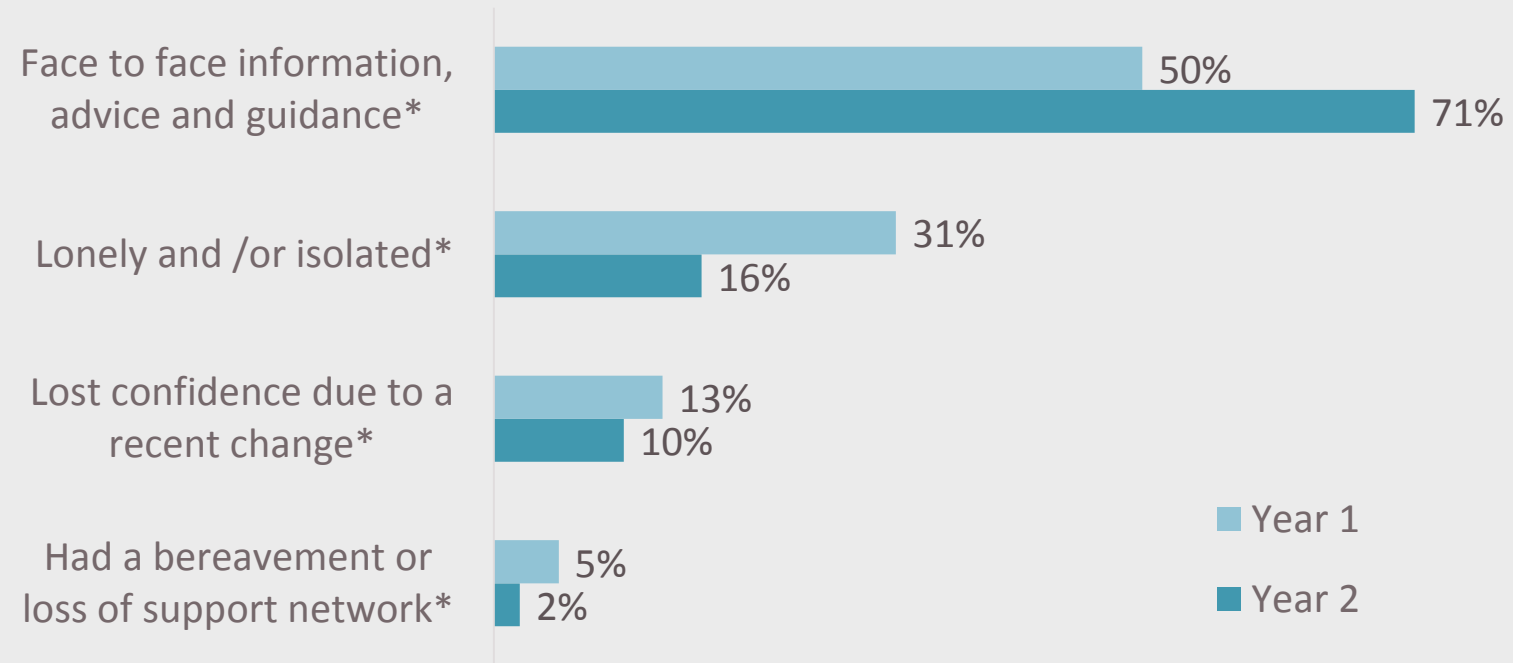
Health profile of clients referred to Living Well (base = 4,507)



More face to face and fewer full Living Well agreements

Primary reason for referral to Living Well (base = 4,004)

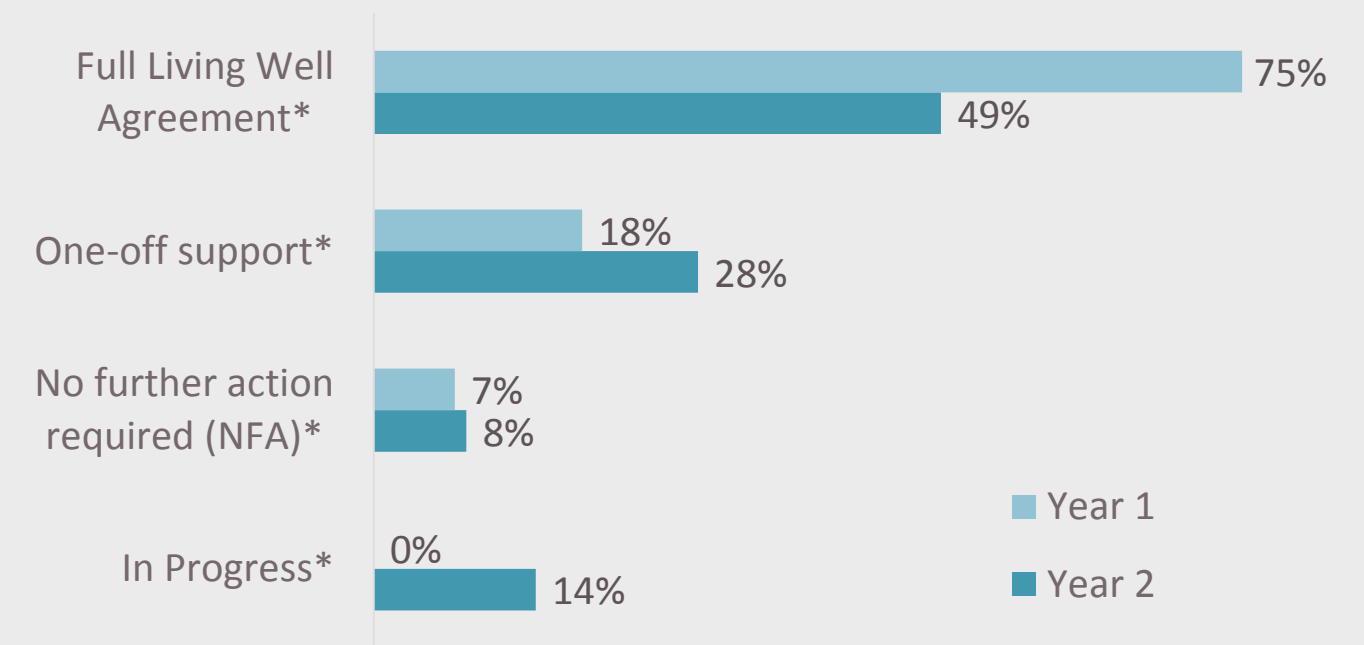
* denotes significant year on year differences



More face-to-face IAG in year 2, perhaps because other categories are much more tightly defined and the changes in the source of referral.

Type of Living Well support received (base = 4,507)

* denotes significant year on year differences

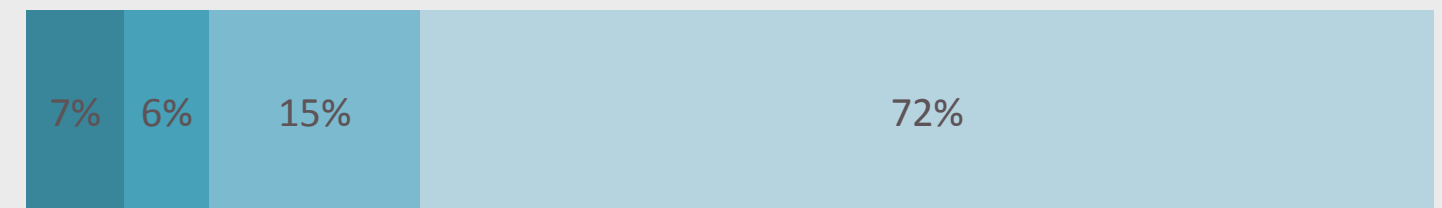


One-off support was more common in year 2: acknowledgement that one-off support is still a beneficial intervention and a full Living Well agreement not necessary for everyone.



- 93% in year 2, 87% in year 1
- A further 8% said 'partially' successful
- But low response (n=1,920) means it's possible that non-responders had a different view

Change in WEMWBS scores (base, all those with complete data = 1,224)



- Negative change
- No change
- Small change (1-2 points)
- Meaningful change (3+ points)

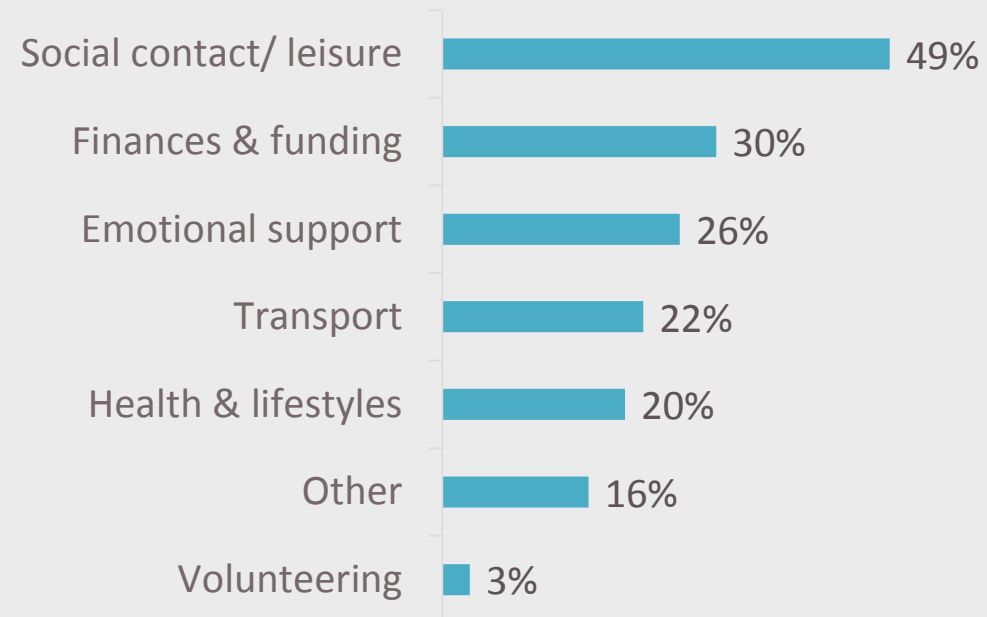
- The mean change in wellbeing before and after Living Well was 8 points
- No significant changes in well-being data between year 1 and 2
- Based on full WEMWBS data from around quarter of the total referrals

Outcomes of Living Well for those that received a full Living Well agreement (base = 2,758)



* denotes significant year on year differences

Outcomes of Living Well (base = 240, all those that received one-off support since December 2017)



Year 1 outcomes from client research

- Becoming connected with local community through engagement with support groups for socialising, managing health issues, pursuing leisure interests, developing work skills
- Taking on a volunteering role either within or outside the home
- Finding the confidence or ability to leave the house with someone or go out independently
- Improving financial wellbeing through access to income support via the income maximization team
- Receiving practical support to help better manage day to day activities, such as housing, banking or managing household expenses

- Segmentation was used to see whether the population could be broken down into smaller groups showing whether some groups had benefitted more than others.
- Four segments were identified and follow up interviews were held with Living Well Coordinators to find out why.
- Co-ordinators found it hard to say why LW works better for some than for others: most concluded that individual's motivation and readiness to accept help are important in them engaging in Living Well and experiencing a positive outcome
- Mental illness a possible factor influencing the poorer WEMWBS outcomes – possibly less likely to seek help from a service such as Living Well
- Client expectations may be a factor if they are too high

We can support, and we can hold hands, so to speak, but at the end of the day it's down to that person. And if that person decides for whatever reason not to continue with Living Well, then we've got to stop.

Living Well coordinator

It really is very individual. However, you can see the people who are ready to accept that support and ready to access further services, and then people who aren't quite there yet, and do need more of a friend, more of a long-term support than Living Well can offer. And it's getting to those people at the right time...it's not a specific age group or gender, I would say, it's when they're ready.

Living Well coordinator

Two main indicators used to assess the direct economic value of the Living Well service:

- savings associated with delays to the entry of service users to social care
- the economic value assigned of improved wellbeing amongst service users



Comparing the outcomes of Living Well service users, with those of a historical comparator cohort of similar individuals.

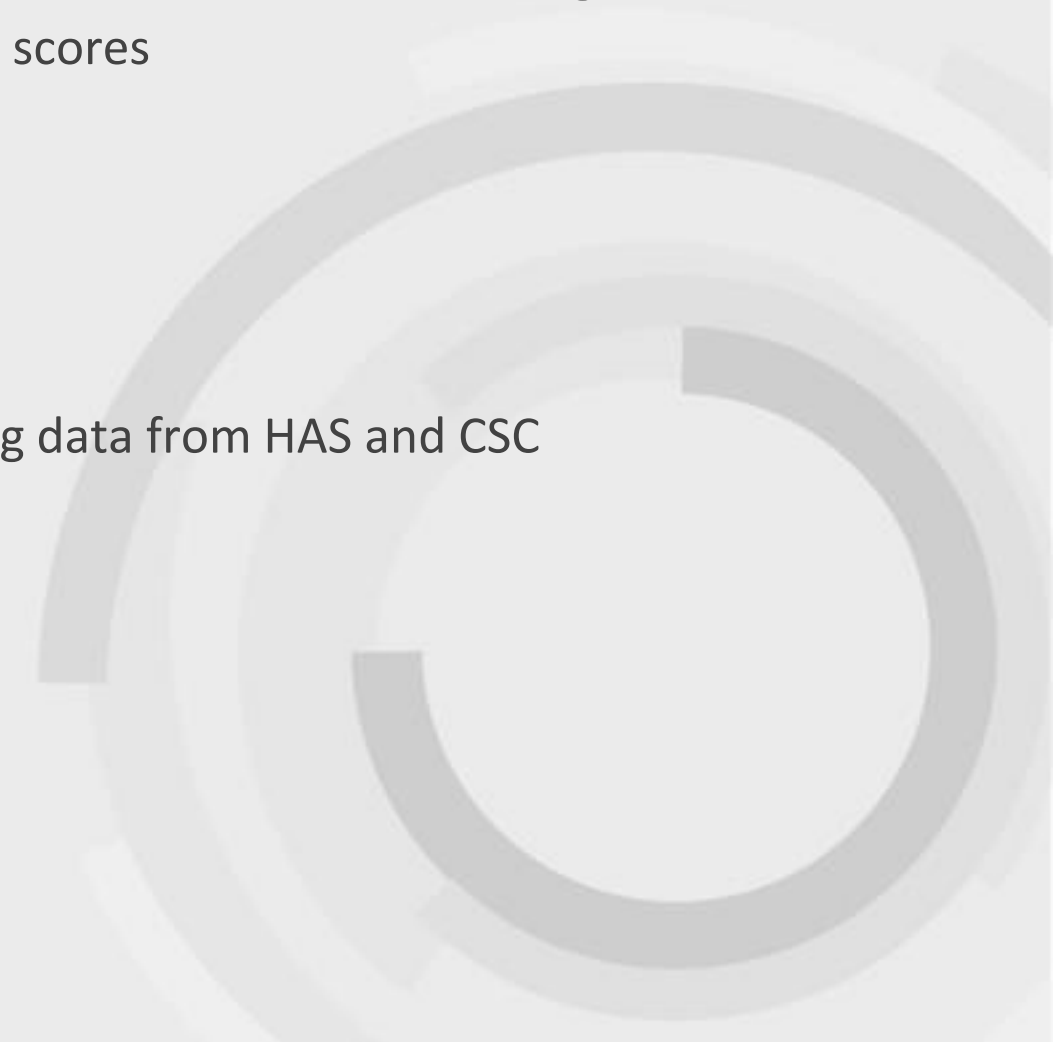
assigning an economic value to changes to user WEMWBS scores

Further measures:

- whether there has been a reduction in the proportion of older people within North Yorkshire open to social care over the lifetime of Living Well
- whether there has been a reduction in the proportion of people contacting the CSC being referred to social care within North Yorkshire, over the lifetime of Living Well



Monitoring data from HAS and CSC



Living Well delivers improved well being worth £3.84 per £1 spent



Assumption	WEMWBS gain	Deadweight	SROI ratio
Impact is only for cohort with 2 WEMWBS scores (1,244 clients)		0	£1.84
	£6,649,180	27%	£1.07
Impact applies to only half of those with no second score		65%	-£0.01
	£15,297,390	27%	£3.84
Impact is same for full cohort as those with 2 observed WEMWBS scores		65%	£1.32
	£24,052,500	0	£9.43
		27%	£6.61
		65%	£2.65

Based on

4,500 Living Well clients

- Individual gain per person £5,345
- Total costs of LW £2,306,000 up to March 2018

Positive impacts continue into year 2, despite changes to source of referral and changing profile of client needs

Net savings for health and social care services

- £1.7m saving due to delayed entry to social care
- £8.9m net social impact (ROI £3.84)

Success of Living Well for an individual depends on a combination of factors:

- Motivated clients and those in need of practical support appear to benefit most
- Possible that those with mental health issues are less likely to benefit as much
- However, the evidence is not clear and we would not recommend a targeted approach without substantial further evidence
- Consider introducing a follow up call or contact for the most vulnerable clients

Low proportion of re-referrals to the service, often reflect greater needs or change in circumstances and not a failure of the service

- Need to monitor re-referrals in terms of volume, need and outcomes

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Item 7