

advance brighter futures

a helping hand for people's mental wellbeing



SOCIAL RETURN ON INVESTMENT (SROI) EVALUATION REPORT OF THE BELIEVE YOU WILL PROJECT IN WREXHAM

Part of the Social Value Cymru project

"Before the service you feel you're in a bottomless pit and can't get out of it"



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Executive Summary

This report details the Social Return on Investment (SROI) evaluation conducted on the Believe You Will programme, managed by Advanced Brighter Futures service in Wrexham, North Wales. The results demonstrate that significant social value is created through the project's activities, with a **SROI result of £3.99:1 – meaning that for each £1 invested, £3.99 of value is created.**

Fundamental to the success of the service is the combination of support which includes working with Lifestyle Coaches who have themselves experienced some of the same experiences, the mentoring and the variety of activities. The activities helped them to increase their self-confidence over time and helped them to re-connect with their communities.

Many felt that they needed such supported after receiving acute and secondary mental health care. This service supported them to take small steps to recovery by supported them through everyday tasks that cause anxiety as well as building their confidence to communicate and socialise.

There is a growing need for an alternative in our communities to support the growing concerns around mental health. This model offers individuals the opportunity to create changes in their own lives and to empower them to make positive decisions. Outcomes experienced by clients included **feeling like they were accepted (better self-esteem), feeling less isolated within their communities and also better able to manage anxiety levels.**

Acknowledgements

This report would not be possible without involving key stakeholders that can help us to understand what changes and establish the impact. We're extremely thankful to the participants who gave their time in order to help us understand what had changed in their lives as a result, as well as helping us to understand how to build on this impact in the future.

A huge thank you to Advance Brighter Futures, who is clearly passionate about their work, and their enthusiasm and support to help the individuals was a crucial input in the chain of change. As they are part of the Social Value Cymru project, it demonstrates their commitment to both understand the impact of their work, but to also look at how they can maximise that impact.

Diolch yn fawr / Thank you

1.0 Introduction

This evaluation report will analyse the value of the Believe You Will project in Wrexham managed by Advance Brighter Futures funded by the Lloyds Bank Foundation and Wrexham County Borough Council. The impact of this programme on individuals will be considered, but also the value to other potential stakeholders.

Through engagement with the individuals receiving the support and the organisation and examining the information and data that was available, appropriate estimations have been made supported by secondary evidence.

The report will initially set out the background of this programme, followed by a discussion of the Social Return on Investment (SROI) framework used to evaluate the service. The SROI results will then be discussed in detail to explain the 'story of change' and value for key stakeholders. The report will look at the social value created for activities from January to December 2019.

1.1 Background & Context

Key Organisation(s)

Advance Brighter Futures (ABF) is a small mental health charity established in 1992 and based in Wrexham, North Wales. Guided by their vision to ensure that no one experiencing a mental health problem has to undergo this alone, the charity provides a variety of services to cater for a wide range of issues. Activities include life coaching, group activities and volunteer mentoring for people with mental illnesses, workshops for people with mild anxiety and depression, support for postnatal depression, services to build emotional well-being and resilience and much more. The organisations vision, mission and values are included below.

Vision

To ensure that no individual experiencing mental health problems ever feels like they are on their own.

Mission

To work in partnership with people experiencing mental distress in promoting health, wellbeing and recovery in Wrexham and its local communities.

Aims

To Listen, to Inspire, to Support and to Empower.

Values

- Integrity
- Compassion
- Wellbeing and recovery
- That people with mental distress have a voice
- Working in partnership, both internally and externally
- Social inclusion and citizenship
- To challenge stigma and discrimination

Project Outline

This evaluation is done as part of the Social Value Cymru project managed by Mantell Gwynedd and led locally through Association of Voluntary Organisations in Wrexham. The focus of the project is internal decision making, and therefore this report will mainly focus

on the value to those who matter the most – our clients / beneficiaries. In this report they will be referred to as individuals. These results will then be used as a baseline for trustees so they can start to embed social impact measurement to inform their decision making.

Believe You Wil (BYW) aims to help individuals who receive acute and secondary mental health care support to rebuild a life that is satisfying and meaningful to them. It is based on the idea that a person's recovery must be seen as comprehensive to include other key factors, most notably their reintegration into local community life through groups and activities. If a person can achieve and sustain a lifestyle they are happy with, their recovery is greatly enhanced and as a result are far less likely to relapse and become dependent on statutory mental health services.

To achieve this aim, every person supported by the service is first asked what is meaningful to them and what they would like to do or achieve. Different kinds of services are then offered which can meet their needs. These sources of support include:

- 1) Lifestyle coaching – one to one support based around setting short term goals and working together to achieve them.
- 2) Group activities and courses such as art, drama and walking. This allows people to take part in things they enjoy and build confidence in the company of trained and friendly volunteers
- 3) Mentoring/Volunteering – they receive peer support from someone who is fully trained to draw on their own lived experience of mental health to offer a listening ear and suggest guidance.

Weekly support is available and delivered mainly from the charity's office in Wrexham.

Signposting to other relevant organisations in Wrexham is also a crucial part of the service,

and the charity maintains strong links in the community to best provide opportunities for connection to the people they support.

BYW is delivered by three Engagement Officers and a number of volunteers who run the activities. Referrals for the service are received from mental health secondary care in Wrexham – Heddfan Unit, Coed Celyn, Home Treatment Team, Recovery Team and Community Mental Health Team. The team work both in Heddfan and in the local community, providing a point of contact for enquiries and a familiar face to people during transition from the inpatient unit to the community.

Identifying the need

The Healthier Wales strategy in Wales is a long term plan to look at new ways of providing health and social care in Wales to respond to the changes that has been seen in the demand over the last few years, including the increasing demand on mental health services. To develop these changes there is an aim to develop,

“new models of seamless local health and social Care”¹

There are ten design principles set out in the Transformation fund 2018-20 guidance². These are:

- Prevention and early intervention – acting to enable and encourage good health and wellbeing throughout life; anticipating and predicting poor health and wellbeing.

¹ <https://gov.wales/sites/default/files/publications/2019-10/a-healthier-wales-action-plan.pdf>

² <https://gov.wales/sites/default/files/publications/2019-03/welsh-government-transformation-fund-2018-20-guidance.pdf>

- Safety – not only healthcare that does no harm, but enabling people to live safely within families and communities, safeguarding people from becoming at risk of abuse, neglect or other kinds of harm.
- Independence – supporting people to manage their own health and wellbeing.
- Voice – empowering people to make decisions about their own care.
- Personalised – health and care services which are tailored to individual needs.
- Seamless – services and information which are less complex and better coordinated for the individual.
- Higher value – achieving better outcomes and a better experience for people at reduced cost.
- Evidence driven – using research, knowledge and information to understand what works.
- Scalable – ensuring that good practice scales up from local to regional and national level, and out to other teams and organisations.
- Transformative – ensuring that new ways of working are affordable and sustainable, that they change and replace existing approaches.

In 2012, the Welsh Government published a ten year Together for Mental Health Delivery Plan with an aim to improve mental health services for those needing support and their families. Since this was first published the Well-being of Future Generations (Wales) 2015 Act also came in to force which aims to get public bodies to think more about;

- Think more about the long-term
- Work better with people and communities and each other
- Look to prevent problems and take a more joined-up approach

These priorities, as well as those identified under the Social Services and Well-being (Wales) Act 2014 promotes a way of working which has the individual at the heart of decision making, and these principles will be considered when evaluating the Believe You Will project.

In the BCUHB three-year strategy it is stated,

“Mental well-being is concerned with how people feel about their lives and whether their lives are worthwhile. It is not just the absence of mental health problems – it is broader than that. It is about how much control someone feels they have; resilience and support networks; participating and being include.”³

In the 2017 Population Needs Assessment, it was recognised that the figures in North Wales of those reporting mental health illnesses are slightly under the rate for the whole of Wales. However, it was also anticipated that this figure is likely to increase, and their needs are much more complex. One of the recommendations from this model was as follows;

“Services for people with mental health needs must take a person-centred approach that takes into account the different needs of people with protected characteristics. The move towards the recovery model, which shifts the focus from treatment of illness towards promotion of well-being, should support the identification of and appropriate response to address barriers being experienced by individual.”

³<http://www.wales.nhs.uk/sitesplus/documents/861/Together%20for%20Mental%20Health%20in%20North%20Wales.pdf>

2.0 Social Return on Investment (SROI) Framework

By explicitly asking those stakeholders with the greatest experience of an activity, SROI is able to quantify and ultimately monetise impacts so they can be compared to the costs of producing them. This does not mean that SROI is able to generate an 'actual' value of changes, but by using monetisations of value from a range of sources it is able to provide an evaluation of projects that changes the way value is accounted for – one that takes into account economic, social and environmental impacts. Social Value UK (2014) states;

'SROI seeks to include the values of people that are often excluded from markets in the same terms as used in markets, that is money, in order to give people a voice in resource allocation decisions'

Based on seven principles, SROI explicitly uses the experiences of those that have, or will experience changes in their lives as the basis for evaluative or forecasted analysis respectively.

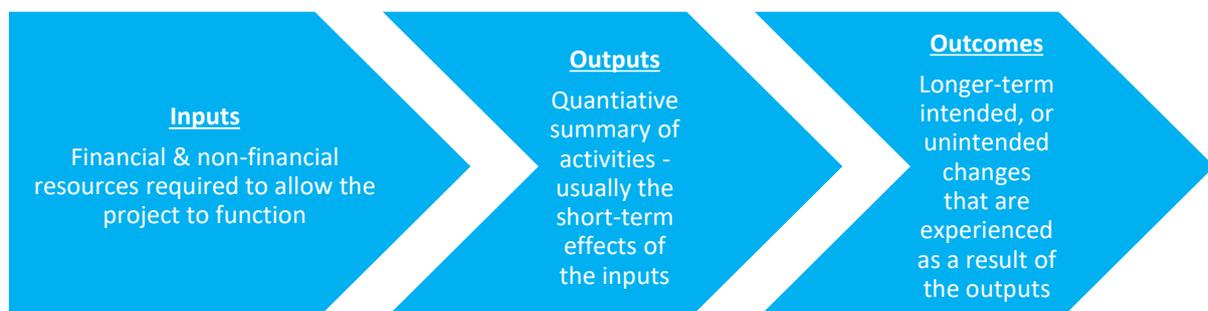
Social Return on Investment Principles

1. **Involve stakeholders** Understand the way in which the organisation creates change through a dialogue with stakeholders
2. **Understand what changes** Acknowledge and articulate all the values, objectives and stakeholders of the organisation before agreeing which aspects of the organisation are to be included in the scope; and determine what must be included in the account in order that stakeholders can make reasonable decisions
3. **Value the things that matter** Use monetisations of value in order to include the values of those excluded from markets in the same terms as used in markets
4. **Only include what is material** Articulate clearly how activities create change and evaluate this through the evidence gathered

5. **Do not over-claim** Make comparisons of performance and impact using appropriate benchmarks, targets and external standards.
6. **Be transparent** Demonstrate the basis on which the findings may be considered accurate and honest; and show that they will be reported to and discussed with stakeholders
7. **Verify the result** Ensure appropriate independent verification of the account (socialvalueuk.org)

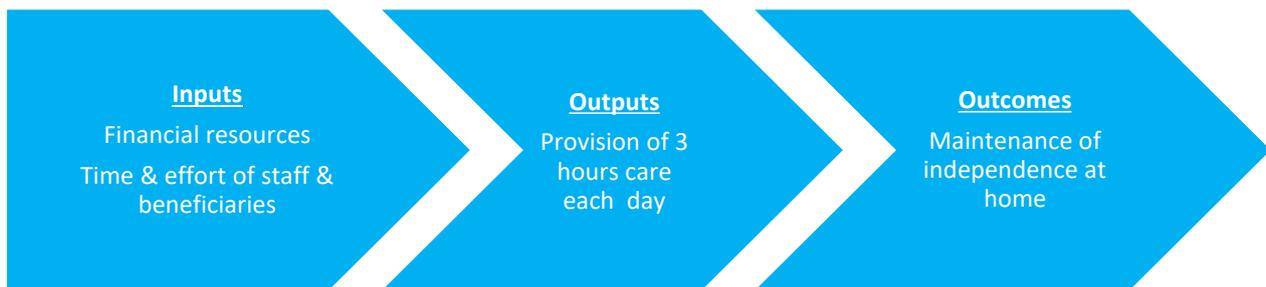
The guiding principles ensure that *how* value is accounted for remains paramount. To ensure a consistent approach is used, chains of change are constructed for each material stakeholder explaining the cause and effect relationships that ultimately create measurable outcomes. These chains of change create the overall Value Map (attached separately as appendix 6), and these stories of change are equally as important as the final result of analysis. In fact, SROI is best thought of as a story of change with both quantitative and qualitative evidence attached to it. Figure 2 summarises the different elements for each chain of change included within the SROI analysis (before the impact of outcomes is calculated).

Figure 2 – Outline of the Chain of Change



SROI is an outcomes-measurement approach, and only when outcomes are measured is it possible to understand if meaningful changes are happening for stakeholders. To illustrate this idea, figure 3 displays a brief theory of change for a domiciliary care programme to assist people to remain in their own home - only by measuring the final outcome, is it possible to understand the impact of the care-programme.

Figure 3 - Example Chain of Change –



As will be discussed at the point of analysis, SROI also incorporates accepted accounting principles such as deadweight and attribution to measure the final impact of activities that are a result of each particular activity or intervention. Importantly, SROI can capture positive and negative changes, and where appropriate these can also be projected forwards to reflect the longer-term nature of some impacts. Any projected impacts are appropriately discounted using the Treasury’s discount rate (currently 3.5%). The formula used to calculate the final SROI is;

$$\text{SROI} = \frac{\text{Net present value of benefits}}{\text{Value of inputs}}$$

So, a result of £4:1 indicates that for each £1 invested, £4 of social value is created

Overall, SROI is able to create an understanding of the value of activities relative to the costs of creating them. It is not intended to be a reflection of market values, rather it is a means to provide a voice to those material stakeholders and outcomes that have been traditionally marginalised or ignored. Only by measuring impacts are organisations able to not only demonstrate their impacts,

but also importantly improve them. This thereby strengthens accountability to those to which they are responsible, which in the third sector is fundamentally the key beneficiaries of services.

The name and pictures of the individuals discussed case studies of the report have been changed to protect the identity of the individuals taking part.

Case Study

Jake – Switching on my career



Jake has a diagnosis of Psychosis and Depression and was referred to ABF for lifestyle coaching. Jake was interested in attending college to progress his career as an electrician. However, he suffered with low mood, suicidal thoughts, and was paranoid that others were talking about

him. Jake had always been very passionate about his band practice, although he stopped attending this when his mental illness left him feeling numb.

During lifestyle coaching Jake, developed coping strategies he could use to improve his mood, and was supported by his coach to identify early warning signs and triggers of low mood. Jake set a goal of creating his own personal wellness toolbox which he could put things that make him feel happy in, such as a favourite movie, a piece of music and photos of his family.

“I feel brighter and I am enjoying life now”

Jake was able to list all of the things he could do to stay well. He found that his wellness toolbox and his new coping strategies have massively improved his overall wellbeing. He now feels he can cope better in situations that in the past would have made him feel withdrawn and isolated. Jake has started practicing with his band again and now plays football weekly with his friends. Jake is training to be an electrician in college and has secured an apprenticeship.

3.0 Stakeholder Engagement & Scope of the Analysis

Including stakeholders is the fundamental requirement of SROI. Without the involvement of key stakeholders, there is no validity in the results – only through active engagement can we understand actual or forecasted changes in their lives. Only then can SROI value those that matter most.

In order to understand what is important for an analysis, the concept of materiality is employed. This concept is also used in conventional accounting and means that SROI focuses on the most important stakeholders, and their most important outcomes, based on the concepts of relevance and significance. The former identifies if an outcome is important to stakeholders, and the latter identifies the relative value of changes. Initially, for the evaluation of the Believe You Will programme, a range of stakeholders were identified as either having an effect on or being affected by the project – table 1 highlights each stakeholder, identifying if they were considered

Materiality

If a stakeholder or an outcome is both relevant & significant, it is material to the analysis. Being important to stakeholders and of significant value, means that if the issue was excluded from analysis it would considerably affect the result.

Table 1 – Stakeholder List & Materiality

Stakeholder	Material stakeholder?	Explanation
Individuals	Yes	As key beneficiaries of the service these are the most important stakeholders and some changes experienced will be both relevant and significant.
Family members	Yes – however is beyond the scope of this analysis	Family members are likely to experience some positive impact and changes experienced will be both relevant and significant.
Advance Brighter Futures	Yes	Provides material inputs of finance, skills and other resources to ensure the strategic direction of the project, so must therefore be included.
Volunteers	Yes – however was beyond the scope of this analysis	Volunteers are likely to experience some positive impact and changes experienced will be both relevant and significant.
Local Authorities	No	Some of the changes are likely to have an impact on the Local Authority; however, this was beyond the scope of this report.
NHS	No	Many experienced positive changes in their mental health. The aim of the service is to ensure a positive transition into community

		<p>and reduce demand on statutory services.</p> <p>The outcomes to the Health Board are likely to be relevant, however, the focus of this report is the main stakeholder group and internal decision making and therefore this is beyond the scope of this analysis.</p>
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Having identified the material stakeholders for analysis, table 2 highlights the size of the populations, the sample size engaged with and the method of engagement.

Initial discussions were held with the Chief Officer to understand the scope and potential list of stakeholders. Further activities were held as part of the Social Value Cymru project to do further stakeholder mapping and to start to identify any potential characteristics that can possibly provide some insights in the results.

Engaging with the individuals themselves is essential to ensure we adhere to the principle 1 of SROI which is involving stakeholders and then through them we can get a better understanding about the outcomes. All qualitative data was gathered by either a focus group or one to one interview depending on the appropriate method. There are different ways of engaging with stakeholders and gathering qualitative data, and each option offers different advantages and disadvantages.

Although a great deal of thought was given to the questions being asked to the individuals about their experiences, in order to adhere to the SROI principles and to understand what had changed, a loosely structured approach was taken that allowed them to tell us what happened as a result of the support given by the organisation. The added flexibility of semi-

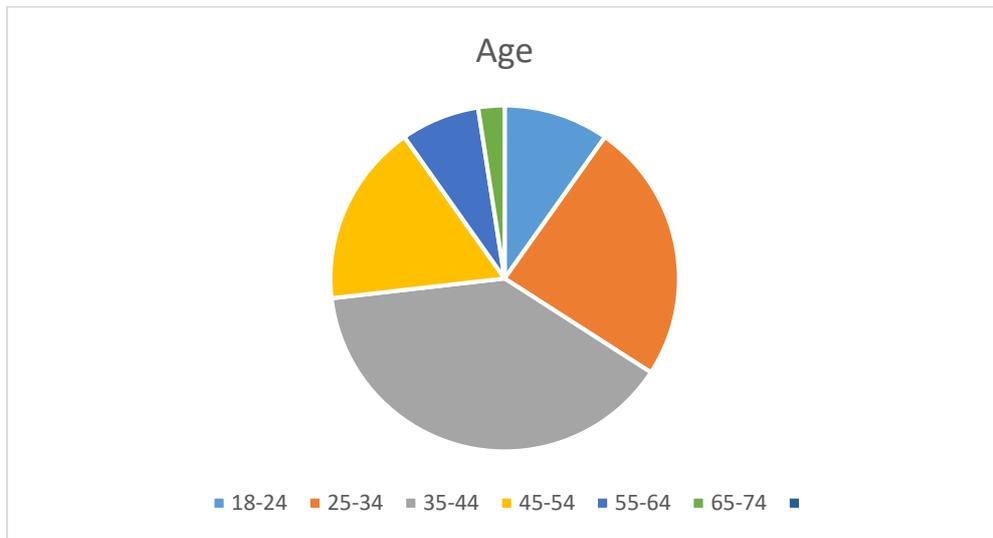
structured probing questions, such as asking people what they now do differently because of the change they had experienced, how long they believe the change will last, and importantly if they had any negative experiences allowed them to tell their story from their own perspective. The focus groups lasted approx. 60 minutes. The individuals were extremely open and were eager to speak about their experiences. They were also able to provide an insight into what had changed for them, but also what they think might have happened without the service and the possible difference it would have. Questions were also asked around impact such as who else contributed to any changes, and would they have support from somewhere else if this service wasn't available.

Unlike quantitative methods, qualitative interviewing does not have a statistical method for identifying the relevant number of interviews that must be conducted. Rather, it is important to conduct sufficient numbers until a point of saturation is reached – this is the stage at which no new information is being revealed.

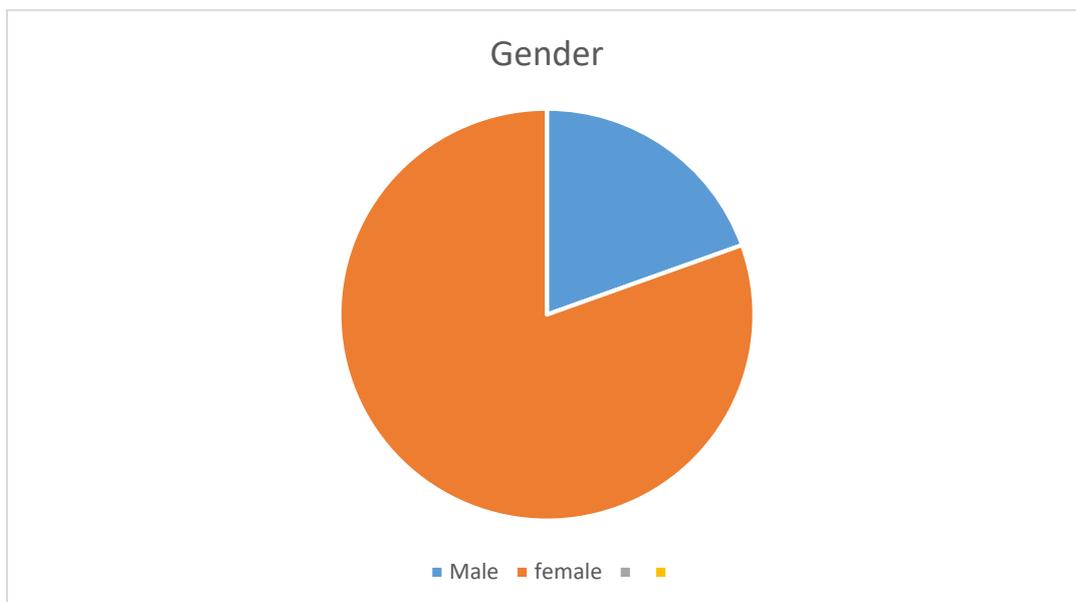
Potential Subgroups of Stakeholders

It's important to recognise that not all individuals are the same. Understanding if different characteristics have an impact on the data can help us to manage and inform decision making. Consideration is therefore given to the different characteristics below, which are age, gender, and how they were referred to the project. The diagrams below demonstrate the groups represented in this project.

Age



Gender



Referral

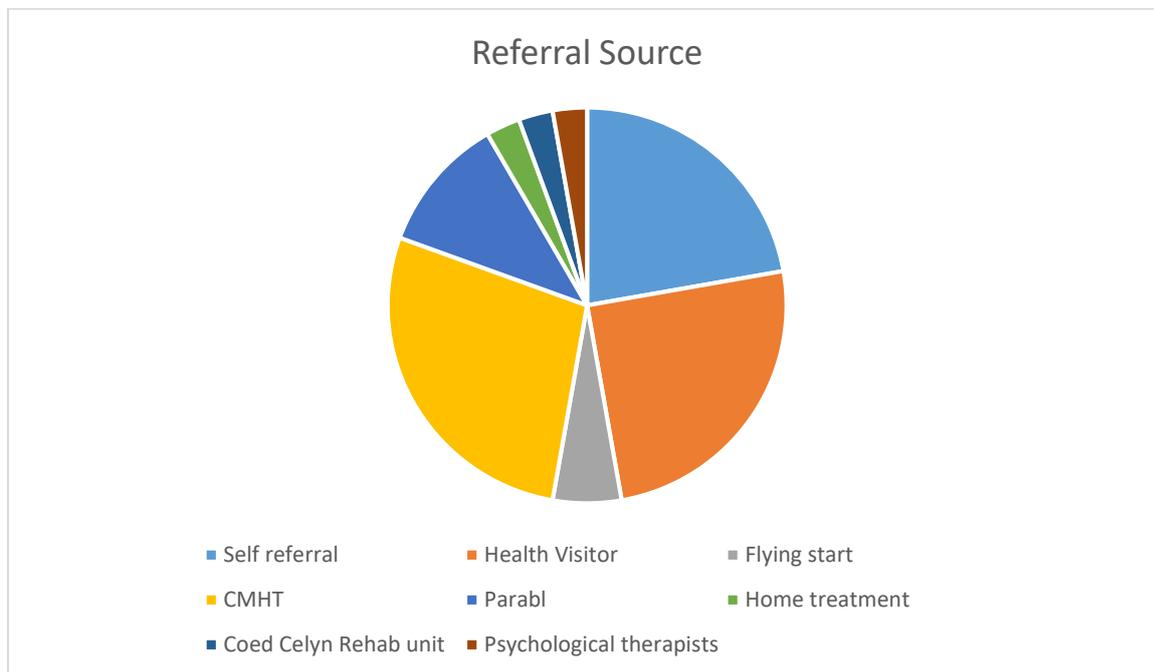


Table 2 provides a summary of the stakeholder engagement process.

Table 2 – Stakeholder Engagement

Stakeholder	Population size	Method of engagement
Individuals	56	1 x focus group at the centre (5 in attendance) 51 of individuals completed the survey
Advance Brighter Futures	1	Many meetings with the Social Value Champion, Project Manager, and peer mentors. Also spoke to volunteers, some who had been through the programme.

4.0 Project Inputs

This section of the report describes the necessary inputs from multiple stakeholders. Some inputs are financial, whereas others are not – yet where possible inputs are monetised.

Individuals

This service is free to those that receive it, but some non-financial inputs are also necessary to ensure any changes. During the focus group they were asked about their contribution and their time to attend activities and meetings were recognised, but also they felt the time they spent trying to create change for themselves was seen as crucial. Through the support of their lifestyle coach they recognised some actions needed to help them start to experience some changes in their lives. Some mentioned some activities such as going to a busy supermarket which caused a lot of anxiety to them previously. This meant really putting themselves in a situation which caused some discomfort initially, but with the aim of looking at ways to deal with their anxieties.

Advance Brighter Futures

The financial input is managed by Advance Brighter Futures and funded by the Lloyds Bank Foundation and Wrexham County Borough Council, and the financial input for the period was £76,849.

This income pays for the salary of the Believe You Will Engagement team, volunteer costs, and costs of activities, administration costs and overheads.

Consideration was also given to include a financial input for the time of volunteers. It is good practice to always include the time of volunteers as an expense, as taking their input away

could have a big impact on a project or service. The lifestyle coaches are paid, but volunteers will also assist with the group activities.

There was some change in how the groups were run over the 12 months with activities becoming more structured over time. For the initial group, it was estimated that they were supported on average 2-4 hours per week each by volunteers, and this was over 3-6 month period. For those who later joined the programme the average support by volunteer was 12 hours each. The National Living Wage for 2019-2020 was used to monetise their time which was £8.21 an hour. Their input was calculated as follows:

17 individuals on project initially supported on average 3 hours per week for on average 18 weeks = 918 hours

39 individuals on project later on supported on average 12 hours each for an average of 18 weeks = 468 hours

Total volunteer hours and costs = 1,386 hours x £8.21 in 2019 = £8,004.78

Total monetised inputs

The total inputs for the project over the one-year period have been calculated as £84,845 created by both financial and non-financial inputs from the range of stakeholders above. This information is displayed in table 3 and is compared to the costs per individual supported (whatever the key stakeholder is you can identify the input value per key stakeholder).

Table 3 – Total Monetised Inputs for Believe You Will programme

Stakeholder	Financial input	Non-financial input	Cost per individual

Individuals	N/A	Willingness to engage, trust, time.	N/A
Advance Brighter Futures	£76,841 plus £8,004 of volunteer time	Strategic management, time, expertise	
Totals	£84,845		£1,515

5.0 Outputs, Outcomes & Evidence

The immediate outputs for the Believe You Will programme, is the number of referrals made to the service and how many hours of support each person received from the programme. From January to December 2019 there were 56 individuals registered on to the service. The average number of time on project would be 3-6 months, and the majority would attend weekly sessions including activities and time with their lifestyle coach.

Referrals for the service are received from mental health secondary care in Wrexham – Heddfan Unit, Coed Celyn, Home Treatment Team, Recovery Team and Community Mental Health Team. The team work both in Heddfan and in the local community, providing a point of contact for enquiries and a familiar face to people during transition from the inpatient unit to the community.

Each individual will have an initial assessment which will support the Engagement Officers mentors to understand their needs and tailor their support package. They will receive 1:1 support by a Lifestyle Coach which will help them achieve some short-term goals. The Lifestyle Coaches are with experience themselves of mental health illnesses and therefore this put the individuals immediately at ease as they felt they had the empathy and somebody with some understanding of what they are experiencing.

They will also have access to a variety of activities to tailor to different interests such as equine therapy, art and craft classes, working groups, film classes and they had days in the allotments also.

They will also be given some further mentoring which will be someone who is fully trained to provide a listening ear and suggest guidance based on their own life experience.

Table 4 below summarises all the stakeholders, their outcomes, and considers their materiality. Consideration is given to what will be included and excluded and can then be seen in the Theory of Change.

A full Theory of Change can be seen in Appendix 1, and those that are highlighted in green are those included in the value map. To ensure we are not over claiming, it is only those well-defined outcomes that are given a value. However, this section will look at each stage to understand the importance of every step in the client journey, and to recognise what are the indicators for these changes. Consideration will also be given to potential negative outcomes.

Stakeholder	Outcomes	Included / Excluded	Materiality test	Indicator
Individuals	Increased reassurance that support is available	Excluded	This was relevant to most stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes	
	Able to develop trust with the lifestyle coach	Excluded	This was relevant to most stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes	
	Increased confidence to take part in activities	Excluded	This was relevant to most stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes.	
	Improved confidence to take part in activities outside of ABF	Excluded	This was relevant to most stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes	
	Feeling better as they are able to open up and share their feelings	Excluded	This was relevant for many stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes	

Increased opportunities to socialise	Excluded	This was relevant to most stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes	
Feeling safe and having more hope towards the future	Excluded	This was relevant to most stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes	
Feeling accepted (improved self esteem)	Included	This was relevant to everyone in the focus group and links to improved self-esteem. Many had struggled with their illnesses and felt excluded. Many felt they now had their own identity.	Qualitative: Individuals explaining how they take part in activities within the centre but also different activities within the community. Quantitative: Questionnaire results, results of Recovery star.
Reduced isolation	Included	This was relevant to all stakeholders and many explained how the service had helped them integrate more within their communities. The questionnaires also showed a significant change for those who took part.	Qualitative: Individuals explaining how they take part in activities within the centre but also different activities within the community.

				Quantitative: Questionnaire results, results of Recovery star.
	Improved mental health	Included	This was relevant to all stakeholders during the qualitative stages, and the quantitative data demonstrated change.	Qualitative: Individuals able to deal better with their anxieties. Quantitative: Questionnaire results, Recovery Star and PHQ / GAD 7 results

Material Outcomes for each stakeholder

5.1 Individuals

Outcome 1 – Feeling accepted (self-esteem)

During the focus group, many discussed how they had struggled to find their own identity and also had very low self-esteem. Many had very negative thoughts about themselves and explained how the activities had helped them to realise some strengths that they did have. Being able to take on different tasks helped them to realise what they could achieve and gave them an opportunity to take on various challenges.

Many explained that having a Lifestyle Coach that all had similar experiences to them provided them with reassurance that they were not alone, and that they could feel better over time. They spoke about how the coaching and mentoring allowed them to consider what they could achieve.

In the focus group, when asked to prioritise their outcomes, the majority felt that this was the most important change. They had struggled with their self-esteem for a long time and felt that the feeling of being accepted for who they were, both within the group and externally, was the most valuable change.

In the Recovery Star results, 60% had experienced change here with an average distance travelled of 25%.

Outcome 2– Improved mental health – managing anxiety levels.

Individuals are referred to the service with mental health conditions and concerns to help them integrate back into the community. The aim is to help individuals who receive acute and secondary mental health care support to rebuild a life that is satisfying and meaningful to them. It is based on the idea that a person’s recovery must be seen as comprehensive to include other key factors, most notably their reintegration into local community life through groups and activities. If a person can achieve and sustain a lifestyle they are happy with, their recovery is greatly enhanced and as a result are far less likely to relapse and become dependent on statutory mental health services.

As the individuals were receiving acute and secondary mental health support, many had been dealing with illnesses such as severe anxiety, depression, Post Traumatic Stress Disorder, Post-natal depression, and Bipolar Disorder.

During the focus group, many explained how the lifestyle coaching along with the activities had helped them to take positive steps to making changes and taking actions to help them reintegrate back into their community.

Some commented about how the service saves lives. They spoke about the feeling of acceptance and the reassurance that others are also going through similar experiences. Having the lifestyle coach that had also experienced mental illness also gave them reassurance and felt more positive towards the future,

“Before you feel you’re in a bottomless pit and can’t get out of it.”

One referred about living in a bubble previously and that that being able to open up, share and working towards specific goals helped them to release some air out of that bubble over time.

They also felt glad of the support they had to take some steps. One mentioned how going to the supermarket was extremely difficult because of so many people and they would become anxious. Being able to go with their coach and work through their anxiety was extremely helpful.

The results of the Recovery Star demonstrated a 26% distance travelled on a scale of 1-10. For those who used PHQ and GAD scoring systems, the average amount of change in score was - 7.25. In these measurement, the higher the score the more severe the mental illness is.

Outcome 3– Reduced isolation

All participants in the focus group explained how isolated they had felt, both living with their mental illness but also due to a lack of social interaction. Many felt alone in their situation, and felt that being able to share experiences with others had helped them.

Being able to take part in the activities helped them to build confidence over time to communicate with others and to interact. The activities were varied and many felt there was something for everyone such as walking, art and craft, drama, training and much more. Over time, they had become more confident to access other activities within the community. One individual had now joined a choir and didn't think this would have been possible without the support.

“I don't know what I would have done without it.”

In the quantitative data, the Recovery Star showed there was a 26% change in social interaction and 21 % positive change in relationships.

Potential Negative Outcomes

All Individuals who took part in interviews were asked about any negative changes or were there anything that the service could improve or learn from. All individuals were keen to stress how positive the whole experience was, but some did reveal some changes that needs to be managed.

Dependency

It was apparent that for some they were dependant on the service, with many suggesting that they weren't ready to move on. This was especially apparent for the lifestyle coaching as they currently receive 8 sessions and they felt this wasn't long enough. Finding the balance here to manage dependency is especially hard, but having some time limit as ABF does will help to ensure individuals are encouraged to move on to other activities within the community.

Some had become mentors and felt this helped them to maintain their own positive changes but also made them feel good by supporting others. However, some in the focus group were unaware of the mentoring programme and felt this service could be better advertised.

More direct route

Some commented on how difficult it is to get support and felt that you must reach crisis before somebody helps. This wasn't a criticism of ABF but more of the system. However, they did feel that the organisation could do more to promote their services.

“Need to jump through hoops to get support.”

The Manager explained that the requirements are specific, but over the year referral routes was relaxed a bit more. Self-referrals would still need to be supported through the mental health teams and the funders were willing to trial this, but is still a pilot and being monitored.

Support for family members

One individual was eager to speak about the need for more services for families. One mentioned struggling when her and her husband were unwell and needed some practical support such as form filling and getting financial support. There may be more opportunities for partnership working here for example with Citizens Advice.

No Change

In the results, some individuals showed no change at all which implies that perhaps this model of support was not appropriate or not suitable for their needs. There were some who also scored lower than they did at the beginning in some areas of support.

It's important to consider for those where change does not happen that they may feel worse over time as they had tried but had no changes.

"I believe that the service received was good, however I do not think it was right for me and I have not really benefitted from it." Client

"Not place false hope and promises in the lifestyle coaching sessions." Client

6.0 Monetisations of Value & Impact

The difference between using SROI and other frameworks is that it places a monetary value on outcomes. By using monetisation, it allows us to not only give the story of what's changed in people's lives, but also allows us to put a value on those changes so we can compare costs and outcomes. This is not about putting a price on everything, but it allows us to demonstrate what impact the service has on other stakeholders, and the possible savings an intervention can create. It also goes beyond measuring and allows organisations to manage their activities to ensure the best possible impact is created for those that matter to them the most: the individuals on the Believe You Will project.

Impacts of Believe You Will, Advance Brighter Futures

SROI analyses use accepted accounting principles to calculate the overall impact of activities. Taking into account any deadweight, attribution, displacement and drop-off factors, means that SROI analyses will avoid over-claiming value that is not a result of the Believe You Will project.

The boxes below outline each of the impact factors.

Deadweight

This asks the likelihood an outcome could have occurred without an activity taking place. So for example if it is believed that there was a 10% chance that someone could have found work without a training programme, the value of that outcome is reduced by 10%.

Attribution

Considers what proportion of an outcome is created by other organisations/individuals, so can therefore not be legitimately claimed by the SROI analysis. For example, if external agencies also support someone receiving training, that organisation is responsible for creating some of the value, not just the training organisation.

Displacement

This asks if an outcome displaced similar outcomes elsewhere. This is not always a necessary impact measure yet must be considered. For example, if a project reduces criminal activity in one area, which results in increases in other locations, there is a need to consider the displaced outcomes.

Drop-off

Outcomes projected for more than one year must consider the drop-off rate. This is the rate at which the value attributable to the focus of the SROI analysis reduces. For example, an individual who gains employment training may in the first year of employment attribute all of the value to the training organisation, but as they progress in their career less value belongs to the initial initiative owing to their new experiences.

Individual

There are a range of approaches to monetise outcomes including using financial proxies – that is using a market-based alternative as an approximation of a stakeholder’s value. However, some would argue that these do not represent the value that the particular stakeholder with experience of the change would attribute to it. Therefore, where possible, this analysis has applied the first SROI principle to involve stakeholders as much as possible. In the questionnaires, following an understanding of the changes and the outcomes gained, clients were asked to rate their outcomes in terms of how important they were to them. Therefore, they were asked to put their outcomes in order of importance, and then to rate their importance out of 10. This activity was also done with individuals who took part in the focus group. This is where we stopped with their involvement in valuing their outcomes and when it comes to placing a monetary value of their outcomes it was decided to use other techniques other than the value game. The value game identifies their material outcomes, and asks them to prioritise, and subsequently value them against a list of goods or services available on the market to purchase. However, it was decided that using well-being valuations was more appropriate for this analysis.

The weighting of the values is summarised below;

Table 5 – Weighting of the outcomes

Stakeholder group	Outcomes	Average Weighting
Individuals	Feeling accepted	9
	Reduced isolation	8
	Better able to manage their anxiety	7

During the stakeholder engagement and in the focus group, the majority had placed Feeling Accepted as the most important change for them. This was followed by increased confidence to socialise and take part in activities and then managing anxiety, although important was seen as the least important of all the changes. Some explained that although their anxieties were the route problem for many of them, what was really important was their self-identity and being happy with who they are.

In the questionnaires, both mental health and reduced isolation was seen almost equally important, so for this report the feedback from the qualitative was used. Moving forward it is advised that more clients are able to use a 1-10 scale to rate the importance of their outcomes to further understand how they value these changes. This will allow ABF to better manage the social value.

The valuations for the outcomes identified to the individuals were taken from HACT’S Social Value Calculator (version 4)⁴ that identifies a range of well-being valuations. However, the data from the questionnaire results and provided a distance travelled on how much change

⁴ Community investment and homelessness values from the Social Value Bank, HACT and Simetrica (www.hact.org.uk / www.simetrica.co.uk). Source: www.socialvaluebank.org. License: Creative Commons Attribution-NonCommercial-NoDerivatives license(http://creativecommons.org/licenses/by-nc-nd/4.0/deed.en_GB)

had been experienced, therefore a proportion of the well-being valuations were used accordingly.

Much consideration was given as to what best well-being valuation reflected the changes identified by the stakeholders. Many explained how the programme had helped them to deal with anxieties and stresses in their lives and therefore the well-being evaluation from HACT social value calculator -Relief from depression and anxiety (adult) was used which has a value of £36,766 per individual. This value was used as our anchor value and then the weighting was used to identify the difference in value in financial terms. Following the principle of not over-claiming, we only took the amount of value that represents the amount of change. So, for managing anxiety levels better, for those with a positive change, there was a distance travelled of 28%, and therefore that percentage of the value was used in the value map, which gave a value of £9,558.

Case Study

Dave – Building resilience

Dave had been living on the streets for many years. He had become lost in a world of drink and drugs and in the past had committed various crimes that he was now not proud about. Dave was diagnosed with depression and prior to seeking support, he had attempted to end his own life on more than once occasion. Dave was referred to Advance Brighter Futures for lifestyle coaching by his rehabilitation team, in the hope that he would build confidence and develop his ability to trust others.

Dave started at ABF believing that when he was discharged from the rehabilitation service he would revert to “being street”. After only a few weeks with the help of his lifestyle coach Dave was able to explore some of the reasons why he had low confidence and develop techniques to improve his resilience. Through lifestyle coaching Dave was able to realise that he had control of his own life and that he could take control moving forward. Dave has started going bike riding to improve both his mental and physical health and he is engaging in more community activities to support his confidence and reduce isolation. Dave is now looking forward to discharge from the rehabilitation service and move into supported living where he can continue his journey to recovery.

Table 6 – Examples of Outcome Valuations

Outcome	Weighting	Identified value	Value of average distance travelled	Quantity of stakeholders experiencing outcome
Feeling accepted (better self-esteem)	9	Used HACT well-being valuation, relief from anxiety and depression (adult) valued at £36,766 for unknown area. Took 26% of this value based on the distance travelled for mental health. Mental health was weighted on 7/10 and feeling accepted was 9/10 and therefore a value of £12,290.	Results of both Recovery Star and PHQ9 and GAD 7 was considered here to look at how much change there had been. The average change for the group for this outcome was 25%.	From the data in second review, 60% had experienced change here, which meant 34 individuals had experienced positive change here.
Better able to manage anxiety levels	7	Used HACT well-being valuation, relief from anxiety and depression (adult) valued at £36,766 for unknown area. Took 26% of this value based on the distance travelled for mental health. Mental health was weighted on 7/10 and the value was £9,559.	Results of both Recover Star and PHQ9 and GAD 7 was considered here to look at how much change there had been. The average change for the group for this outcome was 25%.	From the data in second review, 63% had experienced change here, so 35 individuals.

Establishing Impact

In order to assess the overall value of the Believe You Will outcomes we need to establish how much is specifically a result of the project. SROI applies accepted accounting principles to discount the value accordingly, by asking;

- What would have happened anyway (deadweight)?
- What is the contribution of others (attribution)?
- Have the activities displaced value from elsewhere (displacement)?
- If an outcome is projected to last more than 1 year, what is the rate at which value created by a project reduces over future years (drop-off)?

Applying these four measures creates an understanding of the total net value of the outcomes and helps to abide by the principle not to over-claim.

Deadweight

Deadweight allows us to consider what would happen if the service wasn't available. There is always a possibility that the individuals would have received the same outcomes through another activity or by having support elsewhere.

All stakeholders were asked during the stakeholder engagement process and in the quantitative data collection to consider what could have happened anyway. Many commented in the interviews about how they had struggled for years with low confidence and anxiety levels, and that the changes they experienced was all down to the support,

“I don't know what I would have done without it.”

For all stakeholders, it is possible that they could have accessed another programme that would offer similar results or attended other activities that could help them to identify changes. Many commented on how they had to reach crisis before they receive report.

All individuals were asked in the questionnaires how likely they think things would have changed without the support of the service. They were given options of very unlikely, unlikely / likely / very likely to have happened without ABF. The majority had put that it was unlikely or very unlikely to have happened anyway, however, some did say that there was a chance that these changes would have happened without the support.

To have a consistent approach, the different levels of deadweight and attribution will be considered using the rates below;

Low = 30%

Medium = 60%

High = 90%

Through the interviews with individuals and other stakeholders, and the results of the questionnaires, a reasonable estimate is given in Table 7 below.

Table 7 – Deadweight

Stakeholder	Outcome	Deadweight	Justification
Individuals	All outcomes	60%	Many explained how the organisation helped them to take action towards positive changes in their lives. Many were very grateful to ABF and felt that the project had ‘saved’ them. However, the overall percentage in the questionnaires was 53% deadweight. Many also commented that perhaps the service did not meet their needs at the time. Therefore to avoid over-claiming a medium rate is used.

Attribution

Attribution allows us to recognise the contribution of others towards achieving these outcomes. There is always a possibility that others will contribute towards any changes in people's lives, such as family members or other organisations. Attribution allows us to see how much of the change happens because of the support of this project.

During the focus groups, individuals were asked about others that had supported them with these outcomes. Some of the support was attributed to their GP, therapist, hospital, other community activities, college, and gym. However, many felt that the community activities that they were now attending would not have been possible without the support received by the organisation.

In the questionnaires, 52% said that very little or little of the changes were down to other services. However, 22% said much of the changes were down to others, and some did not answer this question at all. There are other mental health charities in the local area and therefore these services were also included.

Considering the results of the survey and the qualitative work, as well as the combination of activities, lifestyle coaching and mentoring a low attribution rate was used here. However, in future consideration must be given to different segments of stakeholders as some might have more support than others and therefore should be managed differently.

Displacement

We need to consider if the outcomes displace other outcomes elsewhere. For example, if we deal with criminal activity in one street, have we just moved the problem elsewhere? This programme does not displace any other service.

Duration & Drop-off

As this programme is evaluated as part of the Social Value Cymru project, the evaluation considered 12 months of value only, and therefore no drop-off rate is needed. Individuals are supported for an average of 3-6 months but they can continue to be supported by the organisation through other projects or by becoming mentors. 41% of those who took part in the survey said that they think the changes in their mental health would last for medium or long term which is 3 years or more. 34% said that the outcome of feeling less isolated would last for a medium or long term. When looking at segments of stakeholders again considering the difference in answers here could help to identify who might need further support to ensure sustainability. Considering those who said no change here or short-term change, there was no apparent characteristics that could offer some insights as to why this was. Measuring this data for a longer period of time might help to provide more insights.

It is recommended that a review is done with all participants up to 12 months after leaving the service to ensure the sustainability of any changes. Here only 12 months of value should be considered to avoid over-claiming.

7.0 SROI Results

This section of the report presents the overall results of the SROI analysis of the Believe You Will project managed by Advance Brighter Futures. Underpinning these results are the seven SROI principles which have carefully been applied to each area of this analysis. The results demonstrate the positive contribution that Believe You Will project makes through the dedication of the staff, lifestyle coaches and volunteers to create a positive change in the lives of those who need support and inspire them to take some actions to start to attend activities within the community.

By supporting individuals to overcome some barriers in their lives initially, it then provided them with more opportunities to increase their confidence, gain skills and to start integrating back into community. For many this allowed them to start recognising their own strengths and helped to feel accepted. This was identified as the most important change, but also they were better able to deal with their anxieties and this supported them to have more social interaction.

The results in Table 8 indicate a positive return for individuals who were supported by the Believe You Will project. This is based on current data but also secondary research.

Table 8 - Present Value Created per individuals

Stakeholder	Average value for each individual involved
Individual	£6,045

The overall results in Table 9 highlight the total value created, the total present value, the net present value, and ultimately the SROI ratio.

Table 9 – SROI Headline Results

Total value created

£

Total present value	£338,531
Investment value	£84,845
Net present value (present value minus investment)	£253,686
Social Return on Investment	<u>£3.99:1</u>

The result of £3.99:1 indicates that for each £1 of value invested in Believe You Will project, a total of £3.99 of value is created.

8.0 Sensitivity Analysis

The results demonstrate highly significant value created by the Believe You Will project and is based on application of the principles of the SROI framework. Although there are inherent assumptions within this analysis, consistent application of the principle not to over-claim leads to the potential under-valuing of some material outcomes based on issues such as duration of impact.

Conducting sensitivity analysis is designed to assess any assumptions that were included in the analysis. Testing one variable at a time such as quantity, duration, deadweight or drop-off allows for any issues that have a significant impact on the result to be identified. If any issue is deemed to have a material impact, this assumption should be both carefully considered and managed going forward. To test the assumptions within this analysis, a range of issues were altered substantially to appreciate their impact. A summary of the results is presented in table 10.

Although some of the sensitivity tests indicate changes to the result, owing to the scale of the amendments made and the verification of assumptions and data with stakeholders, the results still indicate that if a single variable were significantly altered, the overall results remain positive. The sensitivity test uses a relatively large change, and although there is a great deal of confidence in the figure employed, it nevertheless indicates the importance for Advance Brighter Futures to carefully manage this issue in the future.

As seen in section 8, different steps were taken to support the assumptions for the deadweight and attribution percentages. If all of the stakeholder segments were to have a 90% deadweight percentage, the results still demonstrated a return £1.00 for every £1 invested. From the sensitivity analysis table on the following page, the social value evaluation can be estimated to

be between £2.97 and up to £5.13 for every £1 invested. The assumptions used in the value map estimate the social value is £3.99.

Table 10 – Sensitivity Analysis Summary

Variable	Current assumption	Revised assumption	Revised SROI	Proportion of change
Outcome – Feeling accepted	Quantity:34	Quantity: 20	3.44	13.7%
	Deadweight: 60%	Deadweight:90%	2.97	25.5%
	Attribution: 30%	Attribution: 60%	3.41	14.5%
	Value: £12,290	Value: £6,000	3.29	17.5%
Outcome – Reduced isolation	Quantity: 42	Quantity: 20	3.20	19.7%
	Deadweight: 60%	Deadweight: 30%	5.13	28.5%
	Value: £10,924	Value: £5,000	3.17	20.5%
Outcome – Managing stress and anxiety	Quantity: 35	Quantity: 15	3.35	16%
	Attribution: 30%	Attribution: 90%	3.04	23.8%

9.0 Conclusion

This report has demonstrated that the Believe You Will project has created over £338,531 of value and for each £1 invested, £3.99 of value is created;

What that means in practical terms is that people's lives have been positively changed.

The Believe You Will project support individuals with mental health illnesses to take steps to manage their stress and anxiety and start to reintegrate into community. The combination of Lifestyle Coaching, activities, and mentoring creates a holistic approach to supporting individuals to identify positive changes in their lives.

The individuals explained how they struggled with finding their own identity and had felt alone, and through the support they felt accepted both within the organisation but more importantly within their communities.

Key finding includes;

- For every £1 invested there £3.99 of social value created
- Participants demonstrated some positive changes in their mental health, as well as a reduction in their isolation.
- Many felt more confident to take part in community activities.
- The findings are aligned with that needed for a 'Healthier Wales' in the Well-being of Future Generations (Wales) Act, "A society in which people's physical and mental well-being is maximized and in which choices and behaviors that benefit future health are understood."
- Many also said they felt they were now more economically active and less reliant on health services due to Advance Brighter Futures.

10.0 Recommendations

- 1) **Data collection** – in order to realise how much change and impact the programme is having on all stakeholders we need data to understand if there is any change, but also how much change, and whether there are differences in the needs of different individuals. It is therefore recommended that any continuation of this scheme, needs to **invest the time and finances into ensuring suitable systems and processes are in place to measure social value**, and also to extend this to include other important stakeholders. When such data is collected over a period of time, the potential to use the resultant information to inform decision making is possible. Ultimately, this means that value is not just being measured, but it is being managed to improve the impacts of the project.

Advance Brighter Futures are part of the North Wales Social Value Cymru Project, and therefore will be moving on to having their own impact management system and putting these changes in place.

- 2) To measure the amount of change, ABF initially used the Recovery Star and then moved to the PHQ9 /GAD7. The later provides a rigorous scale to measure changes in their mental health. However, by only using this form there is an opportunity lost to measure the amount of change for the other well-defined outcomes recognised in this report which is reduced isolation, and improved self-esteem / feeling accepted within communities. If ABF are to manage social value, having a consistent scale for all three well-defined outcomes would be beneficial.

3) Some of the participants did not show any change during the service. As noted above, managing social value can allow us to get some insights as to why some did not have any change, which may help identify small changes that might help to increase the social value.

11.0 Appendices

Appendix 1 – Theory of Change



If there are activities ending or new venues, can cause some anxiety or feelings of loss – dependency perhaps?

