

Cyfle Cymru

Gwasanaeth Mentora Cyfoedion
Peer Mentoring Service

SOCIAL RETURN ON INVESTMENT (SROI) EVALUATION REPORT OF CYFLE CYMRU PEER MENTORING SERVICE IN NORTH WALES

Part of the Social Value Cymru project

"It's changed my life"



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Executive Summary

This report details the Social Return on Investment (SROI) evaluation conducted on the Cyfle Cymru service in north Wales. The results demonstrate that significant social value is created through the project's activities, with a **SROI result of £6.05:1 – meaning that for each £1 invested, £6.05 of value is created.**

Fundamental to the success of the service is the peer mentors who have experienced many of the similar challenges and could offer a level of understanding and empathy, but also the guidance to support them and refer to appropriate support. Many of the clients had themselves become peer mentors which helped to maintain their own positive changes, but also support others through their journey.

There is a growing need for an alternative in our communities to support the growing concerns around mental health, poverty and to improve community cohesion. 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 **positive changes in their mental and physical health, feeling less isolated within their communities and also increased confidence to go on and find employment.**

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 the peer mentors and volunteers who are clearly passionate about their work, and in many cases, had gone above and beyond to help.

A huge thank you to CAIS, 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 shows 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 Cyfle Cymru peer mentoring service across North Wales funded by the European Social Fund. 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 April 2018 and until April 2019.

1.1 Background & Context

Key Organisation(s)

CAIS is a registered charity (Charity Number 1039386), and a company limited by guarantee registered in England and Wales (Company Number 2751104). This voluntary sector provider supports people with personal problems such as mental health illness, addictions, employment and housing. CAIS is established on the vision that they can change people's lives and their mission states;

“CAIS aims to empower positive changes in the lives of people affected by addiction, adverse mental health, unemployment, offending and other life challenges, through a range of services and support delivered by skilled and experienced staff and volunteers.”¹

Project Outline

This evaluation is done as part of the Social Value Cymru project managed by Mantell Gwynedd and led locally through Community and Voluntary Support Conwy. 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. 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.

CAIS is the lead agency in a consortium delivering the all Wales Out of Work Service, **Cyfle Cymru**, a project approved and launched in August 2016 **to support a wide range of people** in recovery from substance misuse or poor mental health or both, into **work, education or training**. Initially funded for 2 years via the European Social Fund, owing to its success, the project has recently been awarded an extension until August 2020. From 7 contract package areas throughout Wales, the consortium delivers 5 of these to the following groups:

- People aged 16-24 and not in employment, education or training.
- People aged 25+ who are economically inactive or long term unemployed.
- That live in North Wales, Gwent, Dyfed, Western Bay or Powys.
- Are in recovery from substance misuse and/or mental health issues.

¹ <http://www.cais.co.uk/mission-vision-values-aims/> (Accessed 12/10/2018)

Other barriers such as childcare costs, living in a combined jobless household, suffering from a work limiting health condition, or a disability or generally having low life skills does not preclude accessing support. Beneficiaries receive **bespoke**, open ended support from Peer Mentors who **encourage and empower** people to participate in a **range of activities** including courses (accredited and non-accredited), CV writing, confidence building, job searches, drop in groups, volunteer events and securing employment. Working with people who have a diverse set of circumstances requires tailored support to secure **positive outcomes** including:

- Gaining a qualification or work relevant certificate.
- Completion of a course.
- Becoming employed, including self-employment, up to 6 months after participating in the project.
- Engaging in job searches.
- Increasing employability through a work experience placement or volunteering opportunity.
- Embarking on further learning.

Identifying the need

One of the fundamental principles of the Social Services and Well-being (Wales) Act 2014 is prevention and early intervention. With the focus on empowering individuals and supporting individuals to be more resilient, there is a focus on preventing from developing further mental health illnesses, but also will have an impact on other stakeholders such as friends, family, community and the employment sector.

Cyfle Cymru is a project with potential to yield **strong and detailed social value outcomes** for beneficiaries spanning the following key areas within the Population Needs Assessment:

- young people
- older people
- veterans
- carers
- people who have health issues or physical disabilities
- people with poor mental health
- people experiencing domestic abuse

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 Cyfle Cymru Peer Mentoring service.

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.”²

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.”

According to StatsWales³, the unemployment rate in Wales has declined over the last 4 years from 5.3% in March 2015 down to 4.1% in March 2019. However, Betsi Cadwaladr University Health Board still has the highest number of substance misuse referrals into the health system in Wales, with 6,397 referrals in 2016-2017 with the majority of referrals from a working age.

²<http://www.wales.nhs.uk/sitesplus/documents/861/Together%20for%20Mental%20Health%20in%20North%20Wales.pdf>

³ <https://statswales.gov.wales/Catalogue/Business-Economy-and-Labour-Market/People-and-Work/Employment/Persons-Employed/employmentrate-by-welshlocalarea-year-gender>

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.

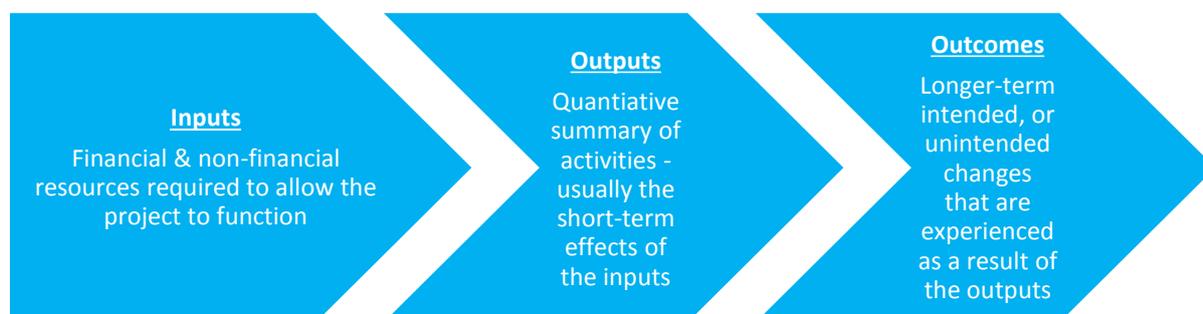
Social Return on Investment Principles

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)

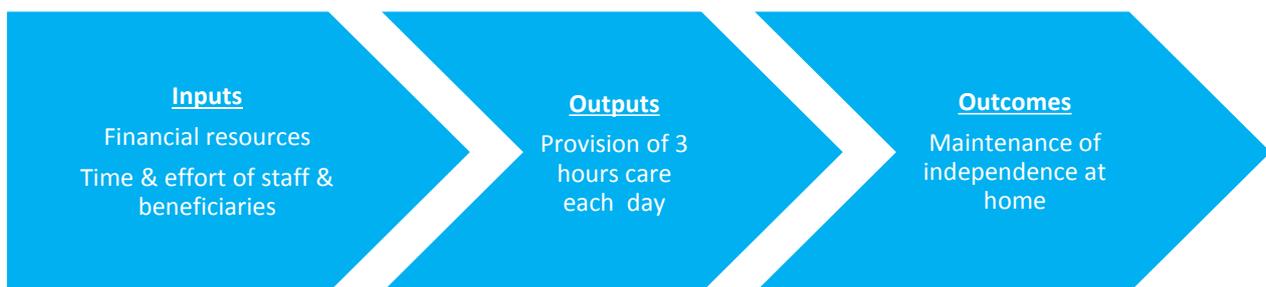
The guiding principles ensure that *how* value is accounted for remains paramount. To ensure a consistent approach is used, chains of change are constructed for each material stakeholder explaining the cause and effect relationships that ultimately create measurable outcomes. These chains of change create 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.

Case Study

Client A turned to Cyfle Cymru for some ideas and support in moving forward from a period of ill health and isolation. He attended many workshops and completed online training courses supported by Cyfle Cymru.

Client A has also received educational resources and information from Cyfle Cymru and support regarding his situation at the Jobcentre and ESA.

“I just want to say a few words of thanks, for the help and advice that you have given me over the previous weeks” said Client A.

“Your support has helped me build my confidence and self-esteem up to push forward into hopefully better future than I felt I had before we met.”

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 Cyfle Cymru peer mentor service, 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
Participants	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.
CAIS	Yes	Provides material inputs of finance, skills and other resources to ensure the strategic direction of the project, so must therefore be included.
Employers	No	Many of the beneficiaries reported feeling more confident in their own abilities and had improved their skills since attending the programme. It is possible therefore that both current employers and future employers have experienced changes but will be beyond the scope of this report.

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 potential impact on health will be considered but is unlikely to be significant.
Department of Work and Pensions	Yes – however their value will not be included as it is beyond the scope of this analysis	As the aim of their work is to support to create better skilled, better qualified and better confident individuals it is likely to have an impact on supporting people into employment or maintain in employment. However, they will not be included in this report as it is beyond the scope of this analysis.
Criminal Justice System	Yes – however their value will not be included as it is beyond the scope of this analysis	Some of the changes are likely to have an impact on the Criminal Justice Department; however, this was beyond the scope of this report.

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 Project Manager 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 participants 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.

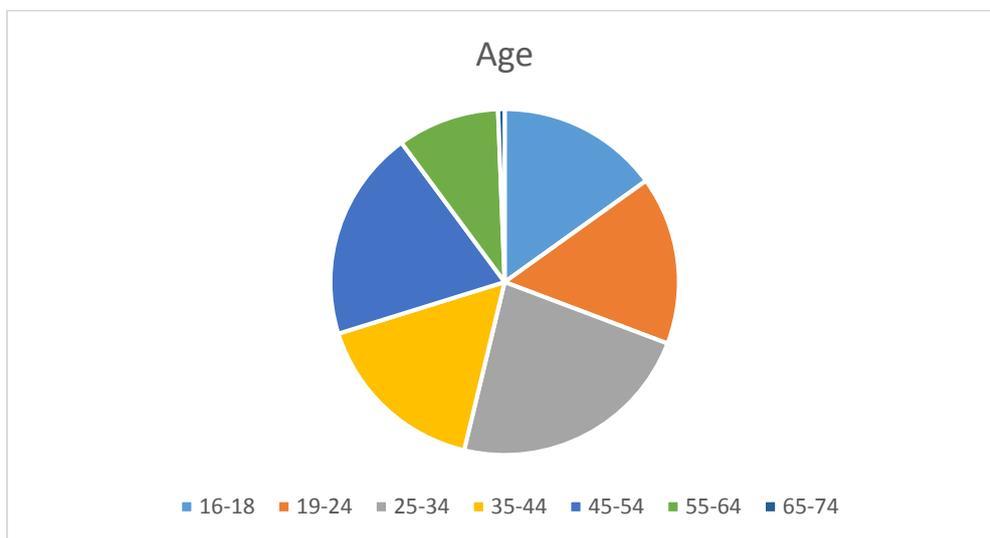
Unlike quantitative methods, qualitative interviewing does not have a statistical method for identifying the relevant number of interviews that must be conducted. Rather, it is important

to conduct sufficient numbers until a point of saturation is reached – this is the stage at which no new information is being revealed.

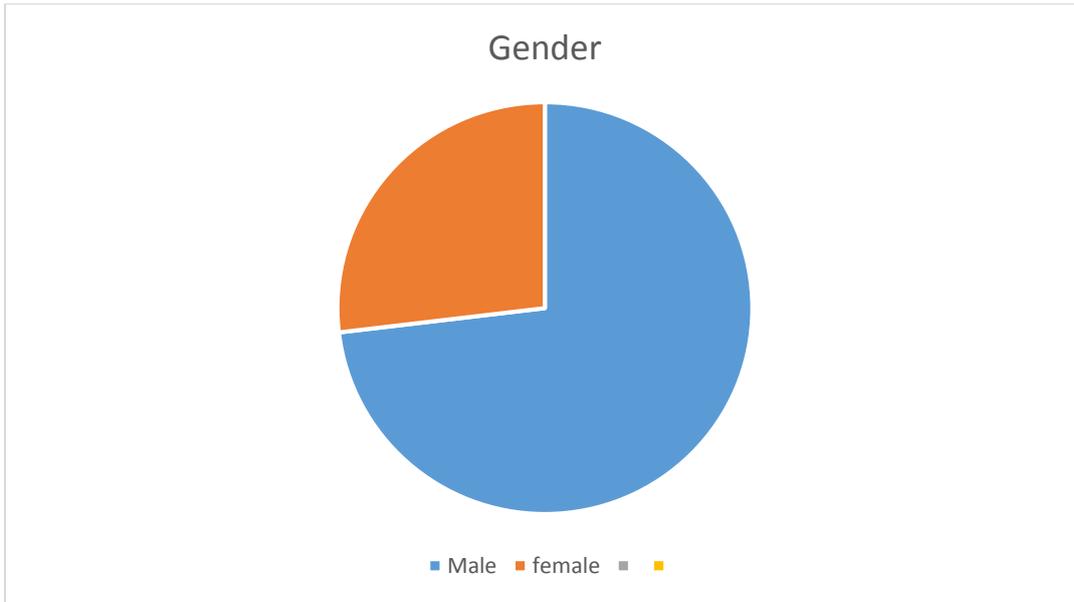
Potential Subgroups of Stakeholders

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, if they present themselves needing support for mental health, substance misuse or both, and also what county they live in. The diagrams below demonstrate the groups represented in this project.

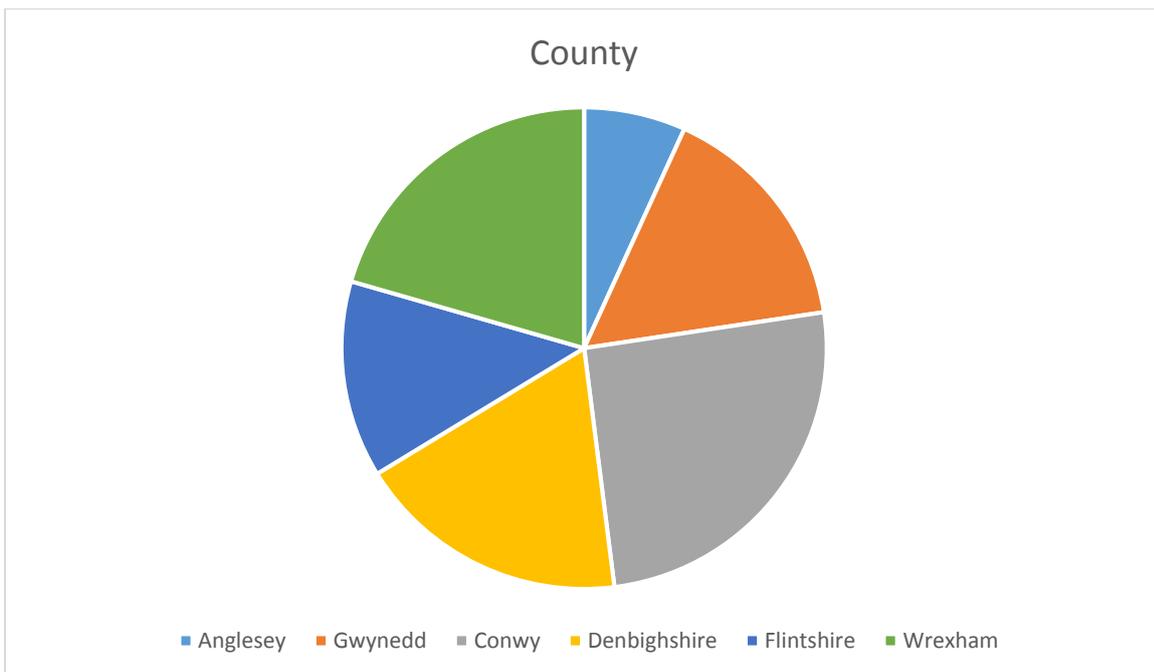
Age



Gender



County



Mental health support / Substance misuse support or both

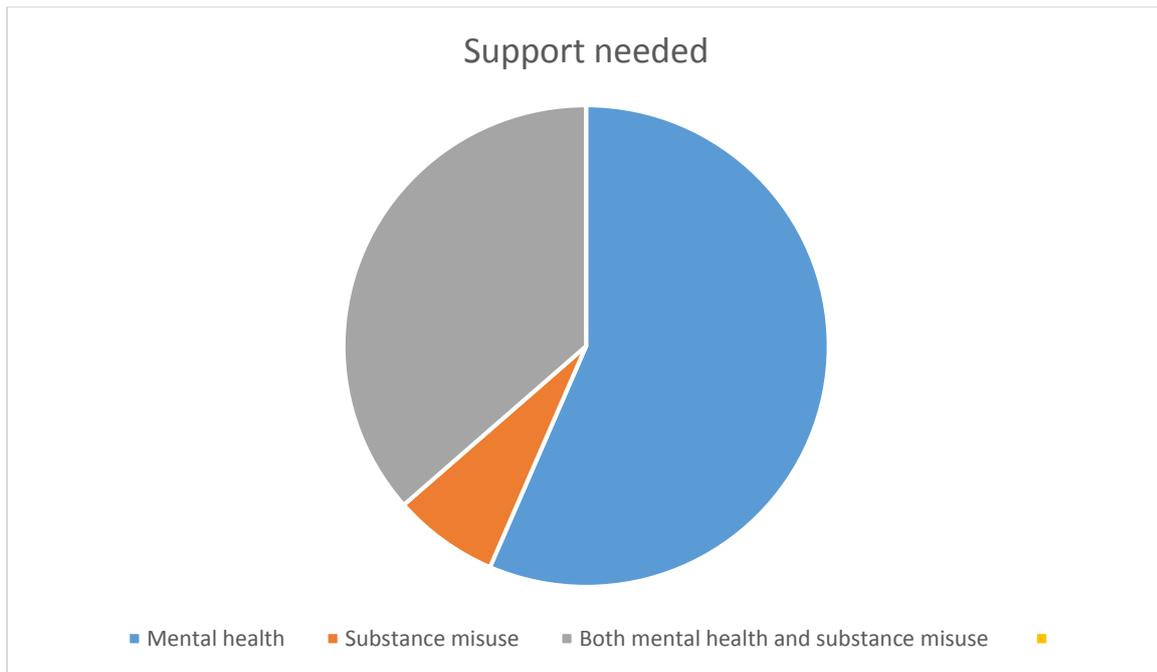


Table 2 provides a summary of the stakeholder engagement process. There are 10 individuals who were representative of the different subgroups identified below as well as 24 individuals who took part in the survey.

Table 2 – Stakeholder Engagement

Stakeholder	Population size	Method of engagement
Participants	1,150	1 x focus group at Troop Cafe (3 in attendance) 1 x focus group at Colwyn Bay Zoo (6 in attendance) 1 x one to one interview 24 of individuals completed the survey
CAIS	1	Many meetings with the Social Value Champion, Project Manager, and peer mentors. Also spoke

		to volunteers, some who had been through the programme.
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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.

Participants

This service is free to those that receive it, but some non-financial inputs are also necessary to ensure any changes. Many of the clients referred to the importance of having the peer mentor being able to meet them in their home environment, especially for initial meetings. For many travelling was difficult because of cost, but also for many leaving the home was difficult and challenging because of their anxieties.

The peer mentors will support them with some practical support such as form filling or attending some appointments. However, there needs to be some willingness to engage and trust by the participants in order for any change to happen. Many will need to face their anxieties also by going to group settings or attending course and therefore some trust is needed in the service and the peer mentor.

Cyfle Cymru

The financial input is managed by CAIS and funded by the European Social Fund, and the financial input for the period was £1,223,424.

This income pays for the salary of the Cyfle Cymru management team and coordinators, the peer mentors, costs of activities, administration costs and overheads.

Consideration was also given to include volunteer costs. It is good practice to always include the time of volunteers as an expense, because taking their input away could have a big impact

on a project or service. However, as the volunteer number were low and the number of hours was available at the time, it was not included this time.

An additional input of £20,000 was included in the value map to see what impact that would have. This brought the SROI down by 10p and therefore not including the expenses did not have a big difference on the results. However, any future SROIs on the service, it is recommended that more work should be done to include the inputs and outcomes for volunteers.

Total monetised inputs

The total inputs for the project over the one-year period have been calculated as £1,223,424. 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 Cyfle Cymru peer support

Stakeholder	Financial input	Non-financial input	Cost per individual
Clients	N/A	Willingness to engage, trust, time.	N/A
CAIS	£1,223,424.	Strategic management, time, expertise	£1,062
Totals	£1,223,424.		

5.0 Outputs, Outcomes & Evidence

The immediate outputs for the Cyfle Cymru peer mentoring service, is the number of referrals made to the service and how many hours of support each person received from the programme. From 4th April 2018 until 5th April 2019 there were 1,150 participants registered on to the service. The average number of hours supported was 26 hours, but there is a big variance in results with some having registered only 7 hours of support and other supported for over 200 hours.

Referrals to the service will be made by the Community Mental Health teams, Job Centres, GPs, probation, other third sector services and also self-referrals.

Each participant will have an initial assessment which will support the peer mentors to understand their needs and tailor their support package. They will receive 1:1 support by a peer mentor who will also refer to appropriate agencies for further support such as counselling, rehab, advocacy, training, volunteering and much more. The peer mentors will sometime also encourage participants to seek medical support if needed.

The service includes one- to one guidance by a peer mentor, who often had experience of something similar themselves, and specialist employment support including different workshops, volunteering experience and training. Each area will have a calendar of event; example can be seen in appendix 2. The table includes options for volunteering, courses and drop in, giving participants options based on their needs. Examples included volunteering for a gardening project or in a local zoo, job club, budgeting course, or just a drop in for a chat.

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. There are two theory of changes, one for mental health and one for substance misuse.

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 final four 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
Participants	Improved skills	Excluded	This was relevant to most stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes	
	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	
	Improved self-belief	Excluded	This was relevant to most stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes	
	Feeling better about the future	Excluded	This was relevant to most stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes.	
	Improved confidence to communicate with others	Excluded	This was relevant to most stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes	

Feeling less alone in their situation	Excluded	This was relevant for many stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes	
Improved self-esteem	Excluded	This was relevant to most stakeholders; however, this is an intermediate outcome that leads to the well-defined outcomes	
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 should a significant change for those who took part.	Qualitative: Participants explaining that they are engaging with the service and others in the drop in. Quantitative: Questionnaire results
Improved mental health	Included	This was relevant to all stakeholders during the qualitative stages, and the quantitative data demonstrated a lot of change	Qualitative: Individuals making changes such as new work positions, taking on more responsibilities, dealing better with their anxieties. Quantitative: Questionnaire results

Improved confidence to find employment	Included	This was relevant to all stakeholders during the qualitative stages, and the quantitative data demonstrated a lot of change	Qualitative: Participants felt more ready to look for work. Some had moved into employment. Quantitative: Questionnaire results
Improved physical health	Included	This was relevant to all stakeholders during the qualitative stages, and the quantitative data demonstrated a lot of change	Qualitative: Through the qualitative work many spoke of their recovery and maintaining recovery. Quantitative: Questionnaire results

Material Outcomes for each stakeholder

5.1 Participants

Outcome 1 – Improved mental health

Participants are referred to the service with mental health conditions and / or substance misuse and to help them to develop skills to support them into employment over time. The majority of the peer mentors will either have experience personally of suffering from mental health concerns or substance misuse or will have family members or others that have been through something. They are therefore able to use their own personal experience to support others. Many of the peer mentors had been through the programme themselves also, and perhaps for some this role meant it was supporting their own recovery.

Many of the participants suffered from low confidence and self-esteem. In the north Wales Population Needs Assessment 2017, the most common mental illness reported was anxiety and depression. For those who need it, they will refer participants for counselling. There can be a long waiting time for professional support also, and therefore this support they receive as they wait for this service will help them to maintain a state of health and avoid further deterioration.

One participant was referred to the project through her job coach and had support from the peer mentor and started to attend the weekly drop in sessions. She has now enrolled on to an 8-week course and also volunteers every week for a local wildlife charity

‘Cyfle Cymru has helped me believe in myself again, I have started to trust people again. You have supported me to get to the level I am now, and I am so thankful’.

One volunteer had been supported by Cyfle Cymru and he now volunteers full time with the service. He identified a big change in his self-esteem,

“It’s changed my life.”

He felt that he had much better focus now and his communication skills had improved. He explained that a few months previously he wouldn’t have been able to engage with us so indicated a lot of change for him.

For those that were referred for both mental health conditions and substance misuse, there was a change of 45% in those that took part in the analysis.

Outcome 2 – Improved physical health

The majority of the changes related to physical health was due to them living a healthier lifestyle and for those who did have problems with substance misuse, over time they saw improvements in their health. Participants also explained how having a routine and focus helped, as well as some activities that meant spending more time outdoors, such as taking part in walks and clean ups, or volunteering in the local zoo.

For those that needed support specifically for substance misuse, the outcome of improvement in physical health was seen as the most valuable, with a weighting of 9/10 compared to the other outcomes scoring 7/10. For this outcome there was a 20% change, but many discussed how this would vary over time.

Outcome 3 – Improved confidence to find employment

The main aim of the project is to support people back into employment. However, having engaged with the peer mentors and the individuals it was apparent that for many that change

would take a long time to achieve. Many faced barriers with their health, had criminal records or no or very little qualifications.

Having engaged with the peer mentors and the participants, it was apparent that it was a very person centred service, and that many steps would need to happen before employment was a possibility. For some, this was support to start engaging with services by helping them to complete forms and applications. Some didn't have confidence to communicate and therefore needed to develop skills firstly with the peer mentor, perhaps with the group through drop in but then communication with agencies and others.

The service gave participants an opportunity to volunteer within their communities and taking part in various activities such as working in the local zoo, DIY work, take part in clean ups and much more. This helped the participants to start getting a routine which many struggled with but felt helped them to get back on track.

“Reason to get up in the morning.”

Volunteering also gave them the experience of work like problems and situations in order to build their confidence that they could cope with a working environment.

12% of participants had gone into work. One man had support from the service to get his qualifications in painting and decorating and was now doing a Level 2 qualification as well as working part time.

Outcome 4 – Reduced isolation

During the focus groups, some of the participants explained how little support they have outside of the project. For some, the drop in was the only time in the week where they are able to engage and communicate with others.

Many explained how reassured they were that help was available, and that there wasn't too much pressure on this being only for a few weeks, allowing them time to make small changes. All participants had either a mental health condition, had trouble with substance misuse or both and explained how isolated they were. Being able to engage with other people, or the peer mentor who had similar experiences immediately gave them the feeling that they weren't alone.

The service gives them a lot of practical support by helping participants with form filling, benefit application, transport and others. For those who suffer from mental health concerns, these can be big barriers for them, so by having support by the peer mentor, it allows them to focus on other areas they need to work on.

The amount of change varied between the different segments of participants, but the distance travelled was between 38-51% and therefore showed some significant change. For those who reported both substance misuse and mental health concerns, they weighted this outcome as the most valuable. To have a service which specifically addresses both was seen as quite unique in the area and therefore seeing this as valuable is understandable.

Potential Negative Outcomes

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

Dependency

It was apparent that for some they were dependant on their peer mentors and / or the service. Some explained how the only interaction they had in their week was with the service which implied their confidence hadn't yet been developed enough for them to interact with other

services. Other explained how if they had any problems arising that they would call their peer mentor for support. Although this helped them to maintain a positive mental health and feel less isolated, some resilience and coping tools could be further developed to help ensure they can face some problems on their own.

No employment?

It's possible that for many, they will not be able to find employment and therefore great care must be taken to manage expectations. For some entering a training programme is a huge success, and the peer mentors and CAIS staff explained how this person centred approach helped them to support people based on their own needs. Some will be able to enter employment, whereas for others, being able to use public transport on their own might be a big success for them.

By managing social value, further insights can be gained on their needs and expectations, and how much change happens.

6.0 Valuing Outcomes

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 participants on the Cyfle Cymru peer mentoring service.

Impacts of Cyfle Cymru

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 Cyfle Cymru peer mentor service. 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.

Participants

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 rank and rate their outcomes. Therefore, they were asked to put their outcomes in order of importance, and then to rate their importance out of 10. 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
Segment A – Mental Health	Improved mental health	8.5
	Reduced isolation	8
	Increased confidence to find employment	6
	Improved physical health	6

Segment B – Substance misuse	Improved physical health	9
	Improved mental health	7
	Reduced isolation	7
	Increased confidence to find employment	7
Segment C – Substance misuse and mental health	Reduced isolation	8.5
	Improved mental health	8
	Improved physical health	7.5
	Increased confidence to find employment	7

All segments had ranked their outcome differently which indicates the differences in results based on their reason of referral. For Segment A, who were dealing specifically with mental health conditions, the most valuable outcome for them was improvement in their mental health, however, reduced isolation had a very similar weighting. Many had explained how they had lived with anxieties and depression for a long time, which also contributed to their isolation within communities. Through the support of the peer mentors, drop in and activities, many had seen some change in this outcome.

Segment B was those who specifically wanted support for substance misuse, and perhaps understandably the most valuable change for them was or would be changes in physical health. The results for this segment, however, was based on a very small sample, and therefore further work should be done here to get a better understanding of the weighting.

For those who were referred both for substance misuse and mental health, the outcomes were all very closely weighted. Again, it is advised that a bigger sample should be taken to get further insights, but the results does support the organisations to start understanding the differences in their importance.

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 had been experienced, therefore a proportion of the wellbeing 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 for segment A who wanted specifically to deal with mental health. The same was considered for segment B, however the HACT well-being valuation for Relief of Drug / alcohol problems was valued at £26,124 per individual and therefore to avoid over-claiming this value was used for both segment B and C. Following the principle of not over-claiming, we only took the amount of value that represents the amount of change. So, for segment A, for those with a positive change, there was a distance travelled of 51%, and therefore that percentage of the value was used in the value map, which gave a value of £18,751.

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)

This value is our anchor value, and from here the weighting of the outcomes was then used, so for segment A for the outcome of 'increased confidence to find work' there was a value of £13,326 with a weighting of 6.

Case Study

When I first signed up with Cyfle Cymru I took part in the volunteer activities to keep myself busy and it was great to get out and about and meet new people.

Volunteering for Cyfle Cymru and engaging in the weekly walks gave me a sense of purpose and helped me to rebuild my confidence.

After attending Personal Development classes and completing my volunteer training I built up enough confidence to do my Peer Mentor training.

I then went on to shadow Peer Mentors in the field of support where I learned valuable skills, qualities and work ethic that enabled me to transition into a Peer Mentor.

In April 2018, I was employed as a full time Peer Mentor and with the help of the Cyfle Cymru team guiding me and hands on experience, I have developed into a confident and passionate Peer Mentor.

Table 6 – Examples of Outcome Valuations

Outcome	Weighting	Identified value	Value of average distance travelled	Quantity of stakeholders experiencing outcome
Segment A – in mental health Outcome improved mental health	8.5	Used HACT well-being valuation, relief from anxiety and depression (adult) valued at £36,766 for unknown area. Took 51% of this value based on the distance travelled, therefore £18,751 per individual.	Taking the lowest point for our questionnaire scale – asking individuals to rate against measures (not applicable / no change =0%, little change = 25%, some change = 50%, quite a lot of change = 75%, a lot of change = 100%). The average movement was equals 51%. Although based on a sample size the results were in line with the tone of interview comments – this was cited as an extremely significant change.	From the data in second review, 100% had experienced change here, however, as the sample was low, a decision was made to only include 50% of participants registered on the project, so 324 individuals.
Segment B – substance misuse Outcome Reduced isolation	7	Used HACT well-being valuation, Relief from drug / alcohol problems valued at £26,124 for unknown area was used for the anchor value of improved physical health. Took 20% of this value based on the distance travelled, therefore £5,225 per individual. However, as this was valued at 7, lower than the value of 'physical health at 9 and therefore 70% of the value was used.	Taking the lowest point for our questionnaire scale – asking individuals to rate against measures (not applicable / no change =0%, little change = 25%, some change = 50%, quite a lot of change = 75%, a lot of change = 100%). The average movement was equals 38%. Although based on a sample size the results were in line with the tone of interview comments – this was cited as an extremely significant change.	From the data in second review, 80% had experienced change here, so 32 individuals.

Segment C- Substance misuse and mental health Increased confidence to find employment	Used HACT well-being valuation, Relief from drug / alcohol problems valued at £26,124 for unknown area was used for the anchor value of improved mental health. Took 45% of this value based on the distance travelled, therefore £11,756 per individual. However, as this was valued at 7, lower than the value of 'physical health at 8 and therefore 70% of the value was used.	Taking the lowest point for our questionnaire scale – asking individuals to rate against measures (not applicable / no change =0%, little change = 25%, some change = 50%, quite a lot of change = 75%, a lot of change = 100%). The average movement was equals 45%. Although based on a sample size the results were in line with the tone of interview comments – this was cited as an extremely significant change.	From the data in second review, 66% had experienced change here, so 139 individuals.
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7.0 Establishing Impact

In order to assess the overall value of the Cyfle Cymru 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,

“It's changed my life.”

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.

However, many commented on how unique the programme was, and in many cases helped them to deal with longer term problems. For those who suffered from both mental health concerns and substance misuse, the support targeting both issues and working towards employment was seen as something unique.

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
Segment A – mental health	Improved mental health	60%	Many stakeholders explained how the changes in their lives was because of the peer mentor support who was able to give a person centred support package. Having the mentor work alongside them through the problems that was creating barriers meant they could focus on these first. However, there are other organisations who can also offer mental health support within communities and therefore a medium deadweight percentage is used.
Segment A – mental health	Increased confidence to find employment	30%	For this outcome for all segments, a low deadweight percentage of 30% is used. There is other employment support available across Wales, but as Cyfle Cymru are specifically targeting concerns both with mental health

and substance misuse and focusing on employment, it was seen as something that offered unique support.

Segment B – substance misuse	Improved physical health	60%	CAIS is one of the main agencies in north Wales that supports those who have problems with substance misuse. However, there are other support agencies in the area, as well as possible support by family, friends, and health agencies. A medium rate of deadweight is therefore used to avoid over-claiming.
Segment B – substance misuse	Reduced isolation	60%	CAIS is one of the main agencies in north Wales that supports those who have problems with substance misuse. However, there are other support agencies in the area, as well as possible support by family, friends, and health agencies. A medium rate of deadweight is therefore used to avoid over-claiming.
Segment C – Both mental health and substance misuse	Improved mental health	30%	For this segment, receiving support for both mental health concerns, substance misuse and focus on getting back to employment was seen as unique in the area. A low deadweight percentage is therefore used for this segment and this outcome.
Segment C – Both mental health and substance misuse	Increased confidence to find employment	30%	For this outcome for all segments, a low deadweight percentage of 30% is used. There is other employment support available across Wales, but as Cyfle Cymru are specifically targeting concerns both with mental health and substance misuse and focusing on employment, it was seen as something that offered unique support.

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.

Considering the results of the survey and the qualitative work, the majority explained how many of the changes were the result of Cyfle Cymru but did acknowledge other support they also had

which included family members, Community Mental Health Team, health agencies and other charities. A similar rate is given to all outcomes as was given for deadweight. Again, a lower rate was used for the outcome of 'improved confidence to find employment' as many of the other support received was more targeted towards the support needed for their mental health or substance misuse.

Consideration was given to give a lower rate for 'reduced isolation' for all three segments, as many saw the opportunities given through the peer mentors and a drop in as a lifeline and helped with integrating them back into community. However, to avoid over-claiming and because of a low sample, a medium rate was used here for segment A and B.

The uniqueness of having a peer mentor to support both with mental health and substance misuse as well as opportunities to volunteer and develop skills was seen as unique, and therefore a low rate of 30% is used for all four outcomes for segment C.

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 is innovative and fairly unique in that it offers both mental health and substance misuse peer mentor support and therefore does not displace anything.

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. Many of the participants are involved with the project for many months and some of the intermediate outcomes as well as the well-defined outcomes will be apparent. The majority of the stakeholders that engaged with us was still having support, however, some had gone into

employment and was attending the drop in occasionally, as well as some had gone on to be peer mentors themselves, and saw this as a way of maintaining their recovery for some time. The organisation will maintain contact with participants for some months after leaving the service, but 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.

SROI Results

This section of the report presents the overall results of the SROI analysis of the Cyfle Cymru service in north Wales. 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 Cyfle Cymru makes through the dedication of the peer mentors to create a positive change in the lives of those who need support and inspire them to start considering about training or employment.

By supporting participants 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. Some had gone on to employment, some as peer mentors themselves, others had started their own businesses or gained employment. Some individuals still had a long journey before going into full time employment, but with the support they had seen some positive changes and was able to volunteer or access education.

The results in Table 8 indicate a positive return for participants who were supported by the Cyfle Cymru peer mentoring service. This is based on current data but also secondary research.

Table 7 - Present Value Created per participant

Stakeholder	Average value for each individual involved
Participants	£5,364

The overall results in Table 8 highlight the total value created, the total present value, the net present value, and ultimately the SROI ratio.

Table 8 – SROI Headline Results

Total value created	£
Total present value	£7,397,939
Investment value	£1,223, 424
Net present value (present value minus investment)	£6,174,514
Social Return on Investment	<u>£6.05:1</u>

The result of £6.05:1 indicates that for each £1 of value invested in Cyfle Cymru Peer Mentoring support, a total of £6.05 of value is created.

8.0 Sensitivity Analysis

The results demonstrate highly significant value created by the Cyfle Cymru Peer Mentoring service 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 9.

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 highly positive. The most significant impact of the sensitivity analysis is based on the change to the outcome for segment A and the outcome of improved mental health. This could be because of the relatively high value given to this outcome. Again, 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 Cyfle Cymru 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 and attribution percentage, the results still demonstrated a positive result of £1.06 for every £1

invested. From the sensitivity analysis table on the following page, the social value evaluation can be estimated to be between £1.06 and up to £7.44 for every £1 invested. The assumptions used in the value map estimate the social value is £6.05.

Table 9 – Sensitivity Analysis Summary

Variable	Current assumption	Revised assumption	Revised SROI	Proportion of change
Segment A – Mental health Outcome – improved mental health	Quantity: 324	Quantity: 150	5.63	6.9%
	Deadweight: 60%	Deadweight:90%	5.47	9.5%
	Attribution: 60%	Attribution: 90%	5.47	9.5%
	Value: £18,750	Value: £9,000	5.65	6.6%
Segment B – Substance misuse Outcome – Improved physical health	Quantity: 32	Quantity: 15	6.04	0.1%
	Deadweight: 60%	Deadweight: 30%	6.06	0.1%
	Value: £5,224	Value: £2,500	6.04	0.1%
Segment C – Substance misuse a mental health Outcome – Increased confidence to find employment	Quantity: 139	Quantity: 75	5.79	4.2%
	Attribution: 30%	Attribution: 90%	5.57	7.9%

9.0 Conclusion

This report has demonstrated that the Cyfle Cymru peer mentoring service has created over **£6,174,000** of value and for each **£1** invested, **£6.05** of value is created;

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

The Cyfle Cymru Peer Mentoring service provides a person-centred service for individuals across north Wales living with a mental illness or dealing with substance misuse, or both, and support them to get back into employment. Many of the peer mentors and volunteers had been through the programme themselves and by mentoring others it supported their own recovery.

The participants explained how isolated they were within their communities, and how the support had allowed them to start building their confidence and gave them work like experiences to help prepare them for employment.

Key finding includes;

- For every £1 invested there £6.05 of social value created
- Participants demonstrated some positive changes in both their mental and physical health, as well as a reduction in their isolation.
- Many felt more confident to find employment either immediately or in the future.
- 136 had now entered employment
- 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."

- Cyfle Cymru supports individuals to have access to employment, training or ensure they maintain in employment.

10.0 Recommendations

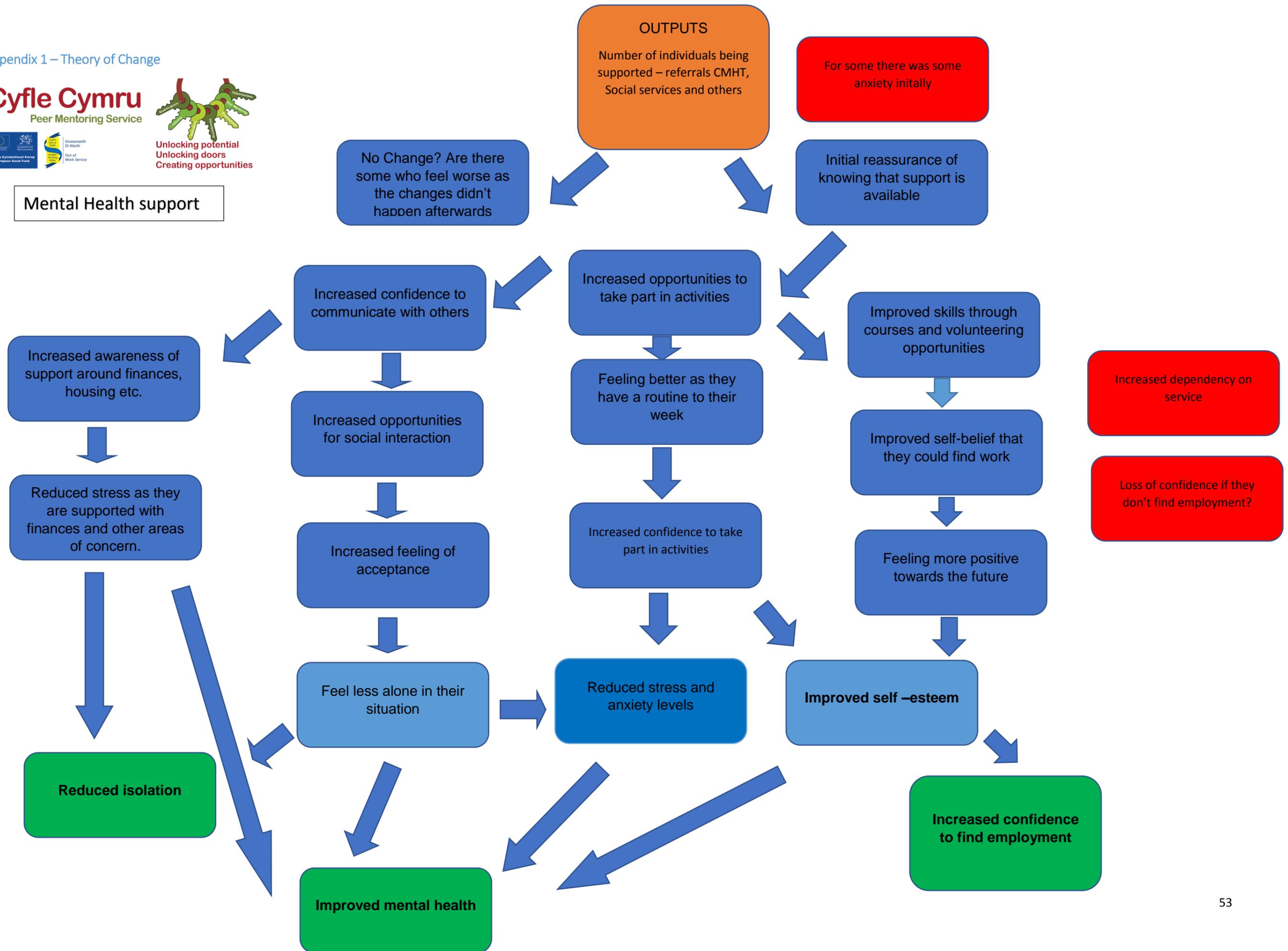
- 1) **Data collection** – in order to realise how much change and impact the programme is having on all stakeholders we need data to understand if there is any change, but also how much change, and whether there are differences in the needs of different individuals. It is therefore recommended that 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. Cyfle Cymru Peer Mentoring Service 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) Managing negative outcomes – it's important that CAIS also looks at any potential negative outcomes and use this information to inform their decision making. As discussed above, the impact management system will support them to do this.
- 3) Volunteers – There are some volunteers involved in the Cyfle Cymru project, some have been through the service themselves and therefore volunteers help them to maintain their own recovery, but also given them satisfaction that they can help others. It is recommended that Cyfle Cymru provides some resources to understand a bit more about the inputs but volunteers, and also the social value created for them. The same could be measured for the peer mentors. Although the peer mentors are employees, as

many are also in recovery themselves, it would be useful to understand a bit more about this.

11.0 Appendices



Mental Health support





Substance misuse support

OUTPUTS
Number of individuals being supported for substance misuse

For some there was some anxiety initially

No Change? Are there some who feel worse as the changes didn't happen afterwards

Initial reassurance of knowing that support is available

Increased awareness of support around finances, housing etc.

Increased confidence to communicate with others

Feeling better as they have access to professional support – rehab and counselling?

Improved skills through courses and volunteering opportunities

Increased dependency on service

Reduced stress as they are supported with finances and other areas of concern.

Increased opportunities for social interaction

Feeling better as they have a routine to their week

Improved self-belief that they could find work

Loss of confidence if they don't find employment?

Increased feeling of acceptance

Increased confidence to take part in activities

Feeling more positive towards the future

Reduced isolation

Feel less alone in their situation

Reduced stress and anxiety levels

Improved self-esteem

Reassurance of on-going support to maintain recovery

Improved mental health

Increased confidence to find employment

Improved physical health

Appendix 2 – Example of calendar of events available

Monday	Tuesday	Wednesday	Thursday	Friday
2	3 Gardening Project meet 9.30 am Dawn Centre	4 Basic IT 10-12 Part 1 Dawn Centre Intermediate IT 1-3 Part 1 Dawn Centre	5 Llandudno Drop in 2pm-4pm	6 Colwyn Bay Zoo 12.45pm Meet at Dawn Centre
9	10 Gardening Project meet 9.30 am Dawn Centre	11 Basic IT 10-12 Part 2 Dawn Centre Intermediate IT 1-3 Part 2 Dawn Centre	12 Sports Day Eirias Park Colwyn Bay Pick ups TBA	13
16	17 Gardening Project meet 9.30 am Dawn Centre	18 No Course this week.	19 Llandudno Drop in 2pm-4pm	20 Colwyn Bay Zoo 9.45am Meet at Dawn Centre 12.45pm Meet at Dawn Centre
23	24 Gardening Project meet 9.30 am Dawn Centre	25 Basic IT 10-12 Part 3 Dawn Centre Intermediate IT 1-3 Part 3 Dawn Centre	26 Llandudno Drop in 2pm-4pm	27
30				

September 2019 Courses Drop in Volunteering

For more information please contact: