





Age UK's fit for the future Programme

Interim evaluation report (2 page summary)

Dr Andrea Wigfield Dr Erika Kispeter Dr Royce Turner

CIRCLE

(Centre for International Research on Care, Labour and Equalities) University of Leeds

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Key Findings

Main characteristics of survey participants

- The average age of Survey One respondents is 75 years.
- Three-quarters (74%) are women and a quarter (26%) are men.
- Nine-tenths (91%) of respondents are White British and 4 per cent are Indian.
- 30 per cent have one and 63 per cent have multiple long-term health conditions.
- 60 per cent consider themselves to have a disability.
- Over one-tenth (13%) are carers.
- 90 per cent of respondents do not smoke.
- 40 per cent drink alcohol, with 90 per cent consuming within the limits recommended by the NHS.
- 60 per cent think physical activity is important and say they are doing something about it, with walking being the most popular form of physical activity.
- Three-quarters think healthy eating is important and say they are doing something about it, with 69 per cent eating at least three, and 26 per cent at least five portions of fruit and vegetables a day.
- Over nine-tenths of respondents feel fully informed about and involved in the management of their long-term health conditions.
- Around half have companions but a third feel isolated some of the time.

Implementing fit for the future

- Local Age UKs have adopted a variety of approaches to recruiting or referring older people to the programme. Detailed analysis is required to learn from the different local referral patterns.
- Overall, General Practitioners have been difficult to engage in the referral process.
 However it emerged from the case studies that referrals from health professionals may be taken more seriously than invitations from voluntary organisations, which suggests that engaging more GPs would benefit the programme.
- Case studies highlighted the importance of older people being informed about the referral process and the activities offered in *fit for the future*.
- Two models of providing group-based activities have been identified: 'single-' and 'multi-purpose' groups; in some cases 'outreach' services have also enabled frail older people to benefit from the programme in their own homes.
- *fit for the future* activities were more affordable and more accessible to older people than mainstream exercise groups, due to more appropriate start times and more convenient locations.

Impact

- Case study participants invited to join *fit for the future* groups responded positively to the invitation primarily because they wished to meet new people.
- Participants joining through self-referral were often actively seeking activities outside the home.
- Almost all case study participants felt they had benefitted from the programme.
- Some partner organisations benefitted from the increased number of referrals, while others were unable to meet the increased demand for their services.
- Engaging volunteers was difficult in some areas; further analysis is necessary to unpack the reasons.
- Existing relationships between organisations are becoming stronger, but partnership building has not yet been facilitated by *fit for the future*, with some stakeholders unaware of the programme.

The future and sustainability

- Case study participants were satisfied with the programme; the individual attention they received was particularly appreciated.
- The stakeholders who have been interviewed also supported the continuation of the programme.
- Some stakeholders recommended that a small fee should be charged for services, and that costs should be reduced by finding free venues and involving volunteers to contribute to sustainability.
- Stakeholders suggested that *fit for the future* should be integrated in the commissioning of non-clinical health and social care services.