

# Telephone Befriending – Update

## Introduction

Ageing Better is a test and learn programme. It is collecting information and insights from across 14 partnerships to identify learning that will be useful for other programmes and organisations delivering activities aimed at reducing social isolation in people aged 50+.

This report brings together information from across Ageing Better on delivering telephone befriending activities. The aim of this paper is to provide an update for internal stakeholders and Ageing Better areas to help them consider and plan for the next phase.

## Changing context

As the Covid-19 situation hit, Ageing Better areas were often well positioned to start reaching people via telephone befriending activities. This included using the telephone to keep in contact with the people who were already a part of the programme but who couldn't now engage in face-to-face activities as well as setting up brand new telephone befriending activities. As the Covid-19 crisis has progressed, so too has delivery evolved.

Each of the areas is operating in a different context. In most places the local authority and third sector are often coordinating a local response but what this looks like is different in each location.

Ageing Better Middlesbrough set up a new telephone befriending service for those people in need of “low level” emotional support. Towards the start of the crisis they received a long list of people to contact from the Shielding Hub and Health Link Workers. Around 50% of these “new” people joined their existing participants to receive regular calls. They continue to receive a steady trickle of referrals. They are finding that in general those being referred by external partners are more complex and in some cases are border line appropriate for telephone befriending. Their host organisation is however, Mind, who are also running a telephone befriending service and there is a clear referral route for them.

This is also the case in Age Better in Sheffield where their Wellbeing Practitioners can support people with more complex mental health needs. They are currently gearing up the telephone befriending service to receive a greater number of calls as they have distributed over 2,000 activity boxes which include details of the phone service.

Ageing Better in Camden also worked with local partners to generate referrals. This resulted in a number of complex referrals to their newly established telephone befriending service that was being operated largely by volunteers (supported by paid

staff). This has led to them pausing the referral route to their telephone befriending in order to work through the referrals already received.

Across Ageing Better, areas are delivering phone befriending using a combination of both professional led and volunteer led delivery. The professional led delivery can be enormously valuable as it allows the telephone befriending service to work with more complex cases. However, the volunteer led service allows more people to make calls and more people to be reached.

Time to Shine (Leeds) have trained over 200 volunteers to provide telephone befriending. They are clear the level of training they are able to provide means they are not training people to be “befrienders” in the truest sense and are instead calling it emergency befriending. They have also found that their volunteer cohort cover a wide range of people with an amazing range of skills providing them with a good mix of people with whom to match befriendees. A number of the volunteers (partly as a result of their having responded to the national campaign) will soon be returning to work. As a result, they are in the process of reaching out to the community that is still shielding and seeing if they can harness them as volunteers. We have found across our Ageing Better learning there is enormous value in this reciprocity of support.

Brightlife (Cheshire) have found that there are a large number of volunteers interested in providing support but a lack of capacity in other organisations to screen or assess them. They have found they are being contacted to ask if they can “vouch” for particular volunteers to speed this up.

Those delivering volunteer led services are finding that the relationships between volunteer befriender and befriendees are starting to grow with conversations about the time when they can meet up in person for a coffee. As time has gone on services are finding that the on-going calls and ensuing developing relationships have meant that the befriendees have been able to share more and other issues have been disclosed e.g. domestic violence, grief, financial hardship etc., We also heard that for people with low level needs a telephone call is appearing to be protective. Early learning from Ageing Better activity has been applied here and telephone befriending is aiming to be person-centred.

One interesting reflection from across the Ageing Better areas is that telephone befriending and Covid-19 crisis has led to them finding new people. In some areas they are finding that the service has led to a greater engagement with more socially isolated and lonely older men who have liked the phone calls and that they have found it easier to open up over the phone than in a face-to-face environment. We were told that a number of the older men had been recently bereaved. In other places they are finding a broader range of people coming forward and we heard that people aren't sure whether this is a measure of the level of desperation or that some of the stigma associated with poor mental health, social isolation and loneliness is disappearing and there are more proactive services reaching out to people to give them help and support.

## **Transition**

Our latest feedback clearly indicated that areas are entering a period of transition and this is leading to changes in how the telephone befriending service is being offered and evolving their plans for the future.

Ageing Better in Camden are in the process of moving the newly established telephone befriending service to Age UK Camden who are actively seeking funding to continue delivering this service in the short to medium term. Ageing Better in

Camden are making this strategic decision to free up capacity to allow staff to return to their outreach work. They know from community partners that there have been people out and about in the community and they are keen to return to that role in the community.

Brightlife (Cheshire) are starting to introduce a form of “home visit” into their offer. They are calling it ‘fence time’. This allows the social prescriber to offer people some face to face contact time. There is an assessment of the person’s environment as to whether this is feasible and then carefully shared with participants, so they know it is optional. This is now even developing to the point where the worker takes their own chair and travel mug to meet a group of three people outside their houses. They are finding people are really receptive to the opportunity to spend some face-to-face time together.

Ageing Better Middlesbrough are starting to transition to more of a blended model - building telephone befriending into their wider offering. They are looking at the possibility of continuing to offer some form of telephone befriending. They have found this has been a surprisingly useful tool and will continue to run telephone befriending alongside their face to face community development work.

The amount of available activity is also starting to increase across all the areas. There are growing levels of activity being made available on digital platforms, although areas are finding there are still significant numbers of people who are reticent about going online. Organisations are also starting to look at ways they can offer socially distanced activity in parks and open spaces.

## **Learning**

There is a lot of emerging learning from those involved in delivering telephone befriending that is important to consider both when delivering telephone befriending but also to be mindful of and factor into plans as the transition out of lock down develops.

Areas have highlighted that initial telephone befriending calls focused on practical issues. This has moved on and conversations are more on the emotional aspects. Then as the lock down eases they are finding people are expressing fears about being forgotten (as they are shielding) or are finding themselves feeling more pessimistic about when they will be able to go outside or see friends and families. Although each call is different they are finding people have a substantial amount of anxiety about practical issues and the changing messages.

There are also a group of people who are in particularly difficult situations, for example in a caring role with someone who has dementia or experiencing domestic violence, where the previous protective factors, like being able to get out for a coffee have gone. Telephone befriending cannot fill that gap.

The areas have also identified that relationships are starting to build through the telephone befriending, making the conversations easier. However, there are those people with more complex needs whose anxiety levels vary hugely on a daily basis. This has a knock-on effect on the volunteers and the staff supporting them and an awareness of the need to reassure volunteers on a regular basis. This includes helping them understand and manage, for example, the repetition of stories from people with dementia.

There is also an emerging problem, likely to be enhanced as the lock down eases of people “going missing”. In these cases the volunteer rings as agreed and there is no answer. Staff may make a follow up call, again with no answer and there is then time needed to manage that situation.

Some key emerging learning is the importance of the nature of the conversation and focusing on the here and now during the call. This can mean approaching the start of the call by asking ‘how was your morning’ instead of ‘how are you’. This allows the conversation to start in a more focused place rather than on the enormity of the crisis. There is also important learning to try and ensure that the conversation finishes on a higher note, so ending with some form of positivity. As well as insight about the value of the conversation being light and easy, we heard that as relationships develop the conversations have developed away from initial scripts (though still helpful).

We are also finding it has been beneficial in some areas to have relatively few expectations of the telephone befriending. This has allowed both participants and befrienders to move at a pace that suits them, allowing the relationship to develop in a person centred way rather than with a specific “outcome” in mind. Those delivering these activities with staff have found this freedom to work without expectation has allowed them to achieve more. This has been helped by being clear that the aim of the service is to help people be a bit more cheerful than at the start of the call.

### **Considerations for the next phase**

The next phase of the easing of Covid-19 is taking place and there will be a huge range of considerations for Ageing Better areas. This includes the wellbeing and safety of staff and volunteers and the practicalities of delivery whilst maintaining social distancing. In addition to these, areas have also identified some key additional considerations.

As the transition happens there has to be a huge amount of communication. This includes with staff, to ensure they are happy and feel safe and with partners to understand and interpret the government guidance appropriately. The process also benefits from including participants and gaining their views on what the next steps for a project or programme should look like. This communication, especially with partners, is likely to be time consuming and is likely to need a substantial focus to ensure people being supported by multiple partners receive consistent messaging. It is likely to also mean a continuing range of methods of delivery for some time to accommodate the various access ability and risk factors for participants.

It is also clear that the process involves far more than “just” thinking about the delivery of an activity within social distancing means - there is also the issue of access to toilets and getting to the location in the first place etc.,

The areas involved in our discussion also highlighted that as lockdown eases there will be a mix of responses from people currently shielding or highly anxious about the relaxation. There will be a split of people who are keen to get out and those that are fearful of what easing the lockdown will mean for them. The groups will need varying responses.

A further consideration is how to harness the enthusiasm of all the new volunteers that have been part of Ageing Better or other delivery partner organisations during Covid-19, and how to structure opportunities so they can still volunteer on the return to work.

### **Further information**

More information on the Ageing Better Programme together including insights from across the programme are available at [Ageing Better](#)