Evaluation of the Link Up Pilot
Final Report

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Acknowledgements

Thanks are owed to all of the pilot participants and the stakeholders who have contributed to this evaluation.
1. Executive summary

The Link Up pilot project has connected Individual Employers with small and medium sized adult social care providers. In forming a Link Up partnership, it was intended that partners will discuss their recruitment and retention practices and potentially identify new ways of working.

The Link Up project has operated in two areas – the South East and the Midlands – and ran from mid-May to the end of November 2013. The South East pilot was facilitated by the Federation Centre for Independent Living (The Fed) while the Midlands pilot was facilitated by the National Care Association.

A total of 19 individuals participated in the pilot, eight of whom have been involved in active partnerships, i.e. both partners worked together on one or more topics relating to the employment of care and support workers or the provision of care. Six participants were ‘inactive’, i.e. they did not withdraw from the pilot but very little or no activity took place, and five withdrew.

ekosgen – an independent research and evaluation company – has completed an evaluation of the Link Up pilot project on behalf of Skills for Care. The findings are based on qualitative interviews with pilot participants and stakeholders.

1.1. Reflecting on the Delivery Model

Originating from the Department of Health’s Recruitment and Retention Sub-Group, the Link Up concept is well aligned with current adult social care policy. It is also well placed to contribute to the response to The Cavendish Review by encouraging greater levels of compassion and dignity in care.

Overall, the Link Up delivery model was appropriate. The scale and scope of the approach was suitable and the promotion and participant matching approaches have worked well.

Regarding the matching of participants, the partnerships were formed through either existing contacts, at the matching events, or by pairing participants where individuals were unable to attend the event. All participants were satisfied with their partnership. The opportunity to meet face to face is important for participants when deciding whether a partnership will work.
1.2. Expectations and Outcomes

The expectation that participants had of the pilot was to share knowledge across the sector, and for registered employers to better understand service users and their needs. There were no specific outcomes that participants wanted to gain and this is understandable given that Link Up was a pilot project and the scope was intentionally left open for participants to shape their partnership as they wished.

In terms of the activity undertaken through the pilot, there were three main subjects that the active partnerships have covered: training, emergency cover, recruitment and induction. In line with participants’ expectations, these activities have translated into a greater shared understanding amongst registered employers and IEs. Participants have also made amends to their training materials, recruitment forms and induction process as a result of the activities.

Aside from where emergency cover has been provided, which has been highly beneficial to the IE’s care arrangements, improvements in quality of care are more difficult to attribute to the pilot. It should however be noted that improvements in quality of care might not have been intended or needed. There was however one registered employer who felt this had improved.

Where the partnerships have been inactive, participants have benefited from their involvement, although to an understandably lesser extent than their active counterparts. The benefits included better networks and an understanding of potential new markets (IEs).

The pilot will leave a positive legacy. If active participants’ plans for their partnership are realised, their activities will continue beyond the pilot. The inactive participants also expressed hopes to begin their partnership or to apply the knowledge they had gained at the outset to their organisation.

1.3. Supporting the Link Up Participants

At the outset of the pilot, induction support was offered to participants by The Fed. This included induction events and an induction pack, both of which were well received. Once the partnerships were active and underway, the participants have not required support from The Fed.

Participants in inactive partnerships were however more likely to seek support. An IE in an inactive partnership sought support from The Fed to initiate a meeting with their
partner. This was however unsuccessful though no fault on behalf of The Fed, as the registered employer wished to remain in the pilot but continued to have a lack of capacity to dedicate to the partnership.

A Link Up toolkit was produced to support participants during the pilot and this was widely well received. Participants felt it provided suitable guidance whilst not being over prescriptive and allowing them to shape their partnership as they wished. The level of uptake of the toolkit as a resource has however varied by participants’ involvement in the development of the resource. Where they had contributed to the drafting of the toolkit, the familiarity with the content negated their need to put it to use.

The toolkit will be revised following to pilot to take account of the future delivery model. Participants felt that advice and guidance for the outset of the partnerships, agreeing terms of the pairing and setting expectations were the most useful areas of information to include in the revised toolkit, the majority of which was included in the pilot toolkit.

1.4. Conclusions

The concept of bringing together IEs and registered employers, to allow them to share experiences and better understand one another’s circumstances, is one which has considerable value and a strong rationale. It is also a concept which is highly attuned with current adult social care policy regarding personalisation and the expansion of personal budgets.

In delivering the pilot, the recruitment and matching of participants was fundamental to its success and appears to have worked well. Participants had the information they needed at the outset to understand the concept and to make an informed decision to take part. They were also pleased with the compatibility of their partnership. The efforts made to organise and facilitate recruitment and matching events have made a significant contribution to the pilot’s success. These gave participants the opportunity to grasp the concept, meet potential partners in person and discuss what they could gain from being involved. The importance of activities such as these should not be overlooked in taking the Link Up concept forwards.

Despite the strong start to the pilot, there was a mixed level of activity amongst the partnerships. Of the 19 participants recruited at the outset, just over half have either withdrawn or have not undertaken any significant activity. And importantly, in half of the active partnerships, one or more of the partners had actually been involved in the development of the pilot itself via the feasibility study or the steering group.
The scale of inactivity and attrition unfortunately limits the authority with which the evaluation can report, although it also needs to be seen in context. In all cases where the partnerships have not been active, this has been due to personal reasons or a lack of capacity to dedicate sufficient time to the partnership. In no instances did participants attribute inactivity to a lack of perceived benefit from their involvement. Furthermore, these participants actually tended to be positive about their involvement and hoped to develop the partnership outside the scope of the pilot.

It is very encouraging that where the partnerships have been active, they have also been very beneficial for both parties. IEs have received advice on employment matters, PA training and have put in place arrangements for emergency cover. Registered employers have gained a better understanding of IEs as service users and have been able to improve their practices as a result (a degree of commercial benefit is also evident through the emergency cover arrangements). Skills for Care is therefore encouraged to use these findings in promoting future iterations of Link Up.

On that topic, it appears at the time of writing that Skills for Care plan to take forward Link Up in the form of a publically available toolkit resource which will be promoted via local area officers and existing networks. It is therefore an encouraging finding of the evaluation that the pilot toolkit was widely considered to be fit for purpose. The toolkit has been revised and will be further strengthened by the inclusion of case studies from the pilot and participants’ feedback on the information and resources which they found to be most useful. The toolkit will be a valuable future resource for the roll out of Link Up.

When rolling out Link Up via the new delivery model, there are four key findings from the pilot that should be borne in mind.

Alongside the toolkit, participants valued the facilitated meetings at the outset of the process. Without this initial support, there is a risk that future participation rates will be jeopardised.

By relying on existing networks for promotion, participation is likely to be skewed towards those already actively involved in the sector. While this is not to say that these individuals would not benefit, it is likely that those who are less involved in wider sector networks stand to gain more from an initiative such as Link Up.

This new model seems to rely on individuals’ own networks to find a suitable partner. Although one pilot participant was able to do this, others did not have a partner in mind prior to the pilot. Again, this may lower participation rates particularly amongst those less involved in the wider sector.
Findings from the pilot would suggest that beyond support at the outset, partnerships are self-sustaining and there is little need for ongoing support.

Overall, this evaluation has found there to be strong support for the Link Up concept amongst IEs and registered providers. It has also demonstrated the benefits to be gained from being in a partnership and highlighted very few, if any, drawbacks, except the risk of registered employers not having the necessary time to commit. If participants continue their partnership as they intend, both IEs and registered employers stand to benefit further from what would appear to be the start of long standing relationships, and as such the pilot will leave a considerable legacy.
2. Introduction

The demand for adult social care in England continues to rise and with it the need for a skilled, dedicated and flexible workforce becomes increasingly important. Innovative ideas to help improve recruitment, retention and staff development in the adult social care sector are therefore needed more than ever.

Originating from the Department of Health’s Recruitment and Retention Sub-Group, the Link Up pilot project is one such idea. It has connected Individual Employers with small and medium sized adult social care providers with a view to them identifying ways in which they can support the recruitment and retention practices of each other. The intention was for these two groups of employers to develop relationships that were of mutual benefit and which would also benefit care workers, Personal Assistants (PAs) and people who use adult social care services.

2.1. Evaluation Objectives and Methodology

ekosgen – an independent research and evaluation company – have completed an evaluation of the Link Up pilot project on behalf of Skills for Care. The objectives of the evaluation are as shown below.

<table>
<thead>
<tr>
<th>Evaluation objectives</th>
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<tbody>
<tr>
<td>Identify participants’ expectations of the pilot and assess the extent to which these have been met in practice.</td>
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<tr>
<td>Gain insight into the attitudes of participants towards the pilot.</td>
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<tr>
<td>Understand the impact of the pilot on recruitment and retention practices, staff satisfaction and the delivery of personalised care.</td>
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<tr>
<td>Identify any cultural impacts on business and employer practices.</td>
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<tr>
<td>Understand participants’ perceptions of challenges and whether/how these were overcome.</td>
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<tr>
<td>Gather feedback on the support provided to participants throughout the pilot, including the guidance materials and toolkit.</td>
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<tr>
<td>Provide a strategic view of the Link Up pilot and make recommendations for how Link Up, or similar initiatives based on the same principles, might be taken forward in the future.</td>
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</table>
Summarised in the table overleaf, the evaluation has been based on two phases of qualitative interviews with pilot participants – one prior to the pilot and one when the pilot was drawing to a close. A series of stakeholder consultations were also undertaken in this later phase.

### Evaluation method

**Phase 1: Pre Pilot Evaluation (May to June 2013)**
Consultations with 13 pilot participants (seven IEs and six social care providers) to explore their motivations for taking part in Link Up, the benefits they expected to occur and the ways in which they thought they would be able to assist or support their partner employer.

**Phase 2: Post Pilot Evaluation (October to November 2013)**
Consultations with 13 pilot participants (seven IEs and six social care providers) to review the extent to which their expectations were met along with the outcomes and impacts that have occurred. Five stakeholders were consulted, representing the Federation Centre for Independent Living, Skills for Care and Brighton and Hove City Council.

This report is the final report from the evaluation.

### 2.2. Terminology

**Registered Employers**
Registered employers in the context of this study are small and medium-sized enterprises that are registered to organise and provide social care, including domiciliary, residential, day and/or community care. This care is provided to adults with different types of need including older people and/or those with physical or sensory disabilities, learning difficulties or mental health needs.

**Individual Employers (IEs)**
Individual Employers are adults in receipt of a direct payment who have opted to take this as a cash payment and employ their own care/support staff.

**Personal Assistants (PAs)**
A PA, in this context, refers to somebody who is employed by a recipient of a direct payment and supports them with a variety of social and care needs. The role is similar
to that of a home carer, except that there is often more flexibility in the range of tasks that a PA undertakes.
The Link Up project has operated in two areas – the South East and the Midlands – and ran from mid-May to the end of November 2013. The South East pilot was facilitated by the Federation Centre for Independent Living (The Fed) while the Midlands pilot was facilitated by the National Care Association. Following a feasibility study, the two organisations were given responsibility for recruiting IEs and registered employers, matching them and providing them with ongoing support on an as-needed basis throughout the pilot. Resources, including an induction pack and toolkit, were also produced. The resources included, amongst other things, suggested topics that the partnerships could cover and templates to assist partners’ meetings.

3. Overview of research methods

3.1. Link Up Pilot Timeline

August 2012: Steering Group established for Link Up with representation from Skills for Care, The Fed, the National Care Association and other stakeholders.

September – November 2012: Feasibility study undertaken, which comprised:

- 12 in-depth telephone interviews with care providers in Brighton and Hove;
- Online survey of 400 direct payment users that are members of The Fed, which secured 33 responses. These were supplemented with informal consultations with 15 direct payment users;

October 2012: A stakeholder event was organised for registered employers and IEs taking part in the feasibility study to provide them with an opportunity to identify ways in which they could support each other and how they may benefit from doing so. Twelve employers attended the event – six registered employers and six IEs – together with members of the Steering Group.

February 2013: Four ‘Mix and Match’ organised in the South East to contribute to the development of the Link Up project toolkit. Similar events held in the Midlands. The Mix and Match events also provided the opportunity to recruit pilot participants.

May 2013: Induction and launch of the pilot project in Brighton and Hove. This was attended by registered employers and IEs and provided a further opportunity as to how they could support each other in their respective partnerships.

May – November 2013: The pilot ran between May and November 2013, during which partners would implement the activities that they had identified at the induction. During this time an evaluation pre-pilot report was submitted to Skills for Care by ekosgen (May 2013), an interim report was submitted by The Fed based on a series of check-in calls.

1 Disability Rights UK; Brighton and Hove City Council Workforce Development; Prime Care; Board member of Skills for Care representing people who use services.
and an update version of the toolkit has been produced by The Fed based on the evaluation findings and decisions for the future of the pilot (November 2013).

**February and April 2014:** Two debrief events are planned (one in each pilot area) to celebrate the achievements of the project. A presentation of the evaluation findings will form part of the agenda.

A total of 19 individuals were recruited at the outset to participate in the Link Up pilot: eleven in the South East and six in the Midlands. In the South East, a higher number of IEs were recruited than registered employers; they did however withdraw from the pilot, the reasons for which are discussed later in the report.

<table>
<thead>
<tr>
<th>Link Up pilot participants</th>
<th>IEs</th>
<th>Registered employers</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>South East</td>
<td>7</td>
<td>4</td>
<td>11</td>
</tr>
<tr>
<td>Midlands</td>
<td>4</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>11</strong></td>
<td><strong>8</strong></td>
<td><strong>19</strong></td>
</tr>
</tbody>
</table>

As might be expected, the extent to which the Link Up partnerships have been ‘active’ has varied considerably. In summary, and as shown in the table below:

- Eight of the 19 participants have been involved in active partnerships, i.e. both partners worked together on one or more topics relating to the employment of care and support workers or the provision of care (we provide more detail in Chapter Four);
- A further six participants were in what can be classed as ‘inactive’ partnerships, i.e. they did not withdraw from the pilot but very little or no activity took place;
- The remaining five participants withdrew.

<table>
<thead>
<tr>
<th>Activity through the pilot</th>
<th>No. of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Involved and active</td>
<td>8</td>
</tr>
<tr>
<td>Involved and inactive</td>
<td>6</td>
</tr>
<tr>
<td>Withdrew</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>19</strong></td>
</tr>
</tbody>
</table>

The reasons for some partnerships being inactive, and the reasons why some participants withdrew, are covered in Chapter 5.
4. Reflecting on the Delivery Model

Summary of Key Points

- Link Up is well aligned with current adult social care policy. It is also well placed to contribute to the response to The Cavendish Review.
- In delivering Link Up, overall the chosen model has been an appropriate one. The scale and scope of the pilot was suitable and the promotion and matching approaches were successful.
- Regarding the matching of participants, the partnerships were formed through either existing contacts, at the matching events, or by pairing participants where individuals were unable to attend the event. All participants were satisfied with their partnership. The opportunity to meet face to face is important for participants when deciding whether a partnership will work.

4.1. Rationale, Scale and Scope

The concept of Link Up emerged from the Department of Health’s Recruitment and Retention Sub-Group. It was at the time, and still is, well aligned with social care policy and, were it to be rolled out on a larger scale, could feasibly make an important contribution to the personalisation agenda. It could also have the effect of encouraging greater levels of compassion and dignity in care, and in this respect aligns well with (some of) the recommendations in The Cavendish Review.

Both the scale and scope of the pilot appear to have been appropriate, especially given that it was very intentionally a pilot. It has been of a manageable size to set up and deliver and has highlighted a number of valuable lessons for future activity of this kind. That said, it could be argued (with hindsight) that more participants should have been recruited, and it is certainly the case that from an evaluation perspective, it is difficult to report conclusively upon the outcomes and impacts it has generated given the small number of ‘active’ participants (a learning point from the pilot is clearly that both attrition and inactive partnerships should be expected).

This issue was highlighted in the stakeholder consultations, with the view from some quarters being that more participants would have resulted in a lower proportion of inactive pairings. However, it should be noted that none of the participants that we consulted cited a lack of common ground with their partner as a reason for not having been more active through the pilot.
Hindsight might also suggest that more residential care providers could or should have been involved, although the relevance of a match between an IE and a residential care provider might (in some cases at least) not be especially obvious.

4.2. Promoting Link Up to Participants

Link Up was promoted to potential participants as a pilot project through which IEs and registered employers could discuss their recruitment and retention practices and potentially identify new ways of working. Individuals were approached via telephone and at scoping events to discuss the concept, the types of activities that could be undertaken and how both IEs and registered employers might benefit.

The scoping events were evidently a successful means of promoting the pilot. By bringing individuals together face-to-face, the events enabled them to understand the concept behind Link Up, to identify shared interests and to see how they could benefit, and offer benefit to others, from being involved. This worked much better than the telephone discussions, through which people clearly found it more difficult to understand the concept and in some cases struggled to appreciate how it might work in practice and the outcomes it could deliver.

“\textit{The events were successful...they brought together the different parts of the social care sector. People could talk about their needs....they started to realise that they had shared interests.}” Stakeholder

4.3. Pairing Participants

The pairings for Link Up were formed through one of three ways:

- Participants knew their partner prior to the pilot (either as an existing contact or through the feasibility and development activities) and already thought that they would work well together; or

- They met at a scoping event and decided to form a partnership; or

- They were unable to attend an event and were paired with another participant by the pilot delivery organisation in the Midlands.
The vast majority of participants were very pleased with their pairing and none expressed any dissatisfaction. They were often enthusiastic to find that their partner had a similar outlook on the delivery of care and frequently said that building a rapport with them had been very easy. Where participants already knew their partner, they acknowledged (perhaps unsurprisingly) that this had helped.

The key success factor when matching participants appears to be allowing the opportunity for individuals to meet face-to-face before deciding who to partner with. This provides participants with the best forum through which to identify where they have shared values and whether (and how) they might work together effectively.

“Finding common ground and having a conversation is the best way to start the partnerships. Each side needs to recognise where they have shared values – this is where the pairs have been successful. This is difficult for a third party to articulate when setting up the pairs.” – Stakeholder

“Give people the opportunity to meet and talk, to mix in a room.” – Participant (IE)
Summary of Key Points

- The expectation that participants had of the pilot was to share knowledge across the sector, and for registered employers to better understand service users and their needs. There were no specific outcomes that participants wanted to gain and this is understandable given that Link Up was a pilot project and the scope was intentionally left open for participants to shape their partnership as they wished.

- There were three main areas of activity that the active partnerships have covered: training, emergency cover, recruitment and induction. In line with participants’ expectations, these activities have translated into a greater shared understanding amongst registered employers and IEs. Participants have also made amends to their training materials, recruitment forms and induction process as a result of the activities.

- Aside from where emergency cover has been provided, which has been highly beneficial to the IE’s care arrangements, improvements in quality of care are more difficult to attribute to the pilot. There was however one registered employer who felt this had improved.

- Inactive participants have benefited from their involvement, although to an understandably lesser extent than their active counterparts, with participants citing better networks and an understanding of potential new markets (IEs).

- The pilot will leave a positive legacy. If active participants’ plans for their partnership are realised, their activities will continue beyond the pilot. The inactive participants also expressed hopes to begin their partnership or to apply the knowledge they had gained at the outset to their organisation.

5. Expectations

In broad terms, participants decided to be involved in Link Up with the expectation that they would be able to share knowledge with their partner and in turn learn from them. For registered employers, there was also the expectation that it would help them to develop a better understanding of IEs and how their needs are best addressed, and IEs too recognised this opportunity to share their experiences.

These expectations were, however, rather loosely formed and there was little in the way of specific outcomes or impacts that participants wanted to gain when they first joined
the pilot. This is quite understandable given that they had nothing in the way of feedback from previous iterations of the scheme upon which to base their experiences, and because the Link Up model deliberately avoids being prescriptive about what can or should be achieved, i.e. it is for the participants to decide and to agree an approach that works well for them.

Nonetheless, it has generally been the case that where the partnerships have been active, the participants’ say that their expectations have either been met or exceeded. By contrast, although by no means surprisingly, those involved in the inactive partnerships tended to say that the pilot had not lived up to their expectations.

“\textit{In my partnership my expectations have been met. We have both gained and equally valued the partnership.}” – Participant (IE)

“\textit{More than met. I spent a lot of time with my partner and his PAs.}” – Participant (registered employer)

5.2. Activity through the Pilot

The active partnerships appear to have worked very well. These participants have been in contact with their partner fairly frequently (weekly, fortnightly or monthly) and lines of communication have been effective. Most often the meetings have involved the IE and registered employer but in a minority of cases, a PA or member of the employer’s staff have been involved.

“It worked really naturally. Every time I’ve needed help I’ve been able to call my partner.” – Participant (IE)

There are three main areas in which activity has been undertaken through the pilot:

- **Training**: for example, one has been able to input into a registered employer’s staff training programme and provide a service user’s view on what they expect in terms of care and support. In two other partnerships, the registered employers helped to identify the training needs of the IEs’ PA and in one case provided that training free of charge.

- **Emergency cover**: two of the partnerships had (and still have) an emergency cover arrangement, whereby care and support was made available to the IEs when none of their PAs were available.
• **Recruitment and induction:** one registered employer sought advice from their IE partner on how they go about recruiting PAs and the qualities they look for, while in another partnership, the IE has reviewed and advised upon the registered employer’s induction practices. A further registered employer attended a recruitment fair with their partner and provided advice to help the IE with their recruitment practices.

“*I helped my partner with his recruitment practices, so hopefully he can choose the right employee first time.*” – Participant (registered employer)

Where partnerships have been inactive, a lack of time to commit to the pilot on the part of the registered employer has been the main cause.

“*We met once and haven’t taken things forward. It’s my fault – this just gets pushed down the priority list when you’re running a busy business.*” – Participant (registered employer)

Where participants have withdrawn, this has tended to be for personal reasons rather than any dissatisfaction with the project per se.

### 5.3. Outcomes

#### 5.3.1. Active Participants

For those participants in active partnerships, the key benefit of being involved has been new or improved knowledge. More specifically:

- **Registered employers** are now more aware of IEs’ needs and views (although that is generalising somewhat given that each active registered employer has only worked with one IE);

- **IEs** now have a better understanding of how registered employers manage and develop their staff, and how their own treatment (in an employment context) of PAs compares with that of the registered employers. They also felt that they now had a contact they could call with ad hoc queries.
“I can now phone up if I need to and I have someone to bounce ideas off.” – Participant (IE)

Over time it is likely that the above will lead to changes in practice on both sides, although to date this has understandably been limited. For example, one registered employer said that they had included additional information in their staff training materials as a result of conversations with the IE, and another had changed the language in their application forms to make it more accessible for applicants who are unfamiliar with certain terminology (this also had the benefit of meeting the Care Quality Commission requirement to seek service user input into staff recruitment). The IE had also made some minor changes to their recruitment and induction materials.

“The IE] has reminded me what’s important for the person receiving care. She inputted into a training session and had a slot to tell staff first hand what’s important to her as a service user. This was fascinating and had a big impact on the staff that took part. She said how the most important thing for her is that the staff are on time, if you’ve had a bad night and are waiting to get up all you want is the carer to be on time.” – Participant (registered employer)

“It’s been beneficial to be with clients and to find out what they want.” – Participant (registered employer)

“I understand the difficulties service providers face and enjoyed being able to share a service user’s viewpoint. It has made me think more about training for my PAs, I can compare what I offer to what’s expected and offered at the care provider to staff. It’s good to see how they support staff and provide development. This is something I want to provide but having never been an employer or been employed I have no experience of this. It’s been hugely helpful in backing up my thoughts that I should do more in the way of training and development.” – Participant (IE)

It is difficult for the evaluation to comment on care related impacts as a result of Link Up. Where participants have established emergence care arrangements, although perhaps not the original focus of the pilot, the impact on the IE has been hugely positive. Care related impacts as a result of other Link Up activities were more difficult for participants to comment on and it should also be noted that improvements in quality of care might not have been intended or needed. There was however one instance where a participant was able to attribute improvements in care to the pilot. This was a registered employer who stated that the quality of care they provide had improved as a result of the changes that had been made to their training materials.
“Having [the IE] involved in the training has made staff more passionate about providing quality service but benefits in terms of improved quality of care are hard to quantify.” – Participant (registered employer)

“If I have a hospital appointment at the last minute then being able to call on [my partner] for emergency PA cover takes the stress out of things. The extra support was exactly what I needed and I didn’t even know I needed it or that an arrangement like this could work.” – Participant (IE)

In one case, the partnership has resulted in the IE’s PAs being offered additional hours with the registered employer. Given the well documented challenges for PAs around a lack of wider support network and the need to supplement the low number of hours available with their IE employer, this should be seen as a positive outcome.

The pilot has demonstrated the full benefit that can be derived from Link Up partnerships. The clear view from the participants in active partnerships is that there were no missed opportunities to gain additional benefits. This is a very important message and one that reflects well on those involved in the design and delivery of Link Up.

5.3.2. Impacts for Inactive Participants

Understandably, the participants involved in inactive partnerships have benefitted to a much lesser extent. Nonetheless, it is encouraging that the majority still reported some benefit of having been involved. This included the networks that they now have and, for one registered employer, a better understanding of a market (IEs) in which they would like to be more active.

5.3.3. Recommending Link Up

It is an endorsement of the Link Up concept that the vast majority of participants, including those who had been in inactive partnerships, would recommend it to others in a similar position. No participants said they would definitely not recommend it.

5.3.4. Looking Ahead

If participants’ plans for the future of their partnership come to fruition, then Link Up has the potential to have a considerable legacy. All of the active participants planned to continue their involvement with their partner, and the majority of inactive participants still hoped to build on their initial meetings.
For those that had been active through the pilot, the future plans largely represent a continuation of the activity they had undertaken to date. This includes, for example, the continuation of emergency cover, continuing to incorporate IE views into training programmes and providing new training for PAs. For the inactive partnerships, the plans are understandably less well defined, although one registered employer did say that based on their initial meetings with the IE, they now planned to reassess the strategic direction of the business and explore potential new markets.
6. Supporting the Link Up Participants

Summary of Key Points

- The support for participants at the outset of the pilot, in the form of events and an induction pack, was well received. Once the partnerships were active and underway, the participants have not required support.

- Participants in inactive partnerships were more likely to seek support. An IE in an inactive partnership sought support from The Fed to initiate a meeting with their partner. This was however unsuccessful though no fault on behalf of The Fed, as the registered employer wished to remain in the pilot but continued to have a lack of capacity to dedicate to the partnership.

- The Link Up toolkit has been widely well received. Participants felt it provided suitable guidance whilst not being over prescriptive and allowing them to shape their partnership as they wished. The level of uptake of the toolkit as a resource has however varied by participants’ involvement in the development of the resource. Where they had contributed to the drafting of the toolkit, the familiarity with the content negated their need to put it to use.

- The toolkit will be revised following to pilot to take account of the future delivery model. Participants felt that advice and guidance for the outset of the partnerships, agreeing terms of the pairing and setting expectations were the most useful areas of information to include in the revised toolkit, the majority of which was included in the pilot toolkit.

6.1. Level of Support Accessed During the Pilot

At the outset of the pilot, induction support was offered to participants by The Fed. This support was designed to stimulate the pairs’ thinking on how they could work together to achieve mutual benefit. It involved:

- **Induction event:** The event was held in Brighton and Hove in May 2013. It marked the formal start of the pilot and provided a further opportunity (following the ‘mix and match’ event) for participants to discuss their ideas for the project;

- **Induction pack:** This pack provided an overview of the pilot, resources from the toolkit for planning activities and the conditions of taking part.
The above were both very well received by the participants.

“The induction pack was very helpful. The templates were used for pre meeting processes and the agenda and actions were agreed using templates.” – Participant (registered employer)

After the induction stage, it was intended that the participants would require relatively little support, and this is indeed how it panned out in practice, with The Fed’s role being one of gathering learning from the pilot. Participants in active partnerships were able to agree on their aims, contact each other and undertake the activities without needing to call upon any external support (this bodes well for a future Link Up programme that has little or no third party involvement).

Participants in inactive partnerships were more likely to ask for support and this concerned difficulties making contact with their partner. Unfortunately, and through no fault of The Fed, these difficulties remained unresolved. This involved an IE who approached The Fed because, despite calls and emails, they had been unable to establish a meeting with their partner due to the employer’s business commitments. The Fed contacted the IE’s partner on their behalf and sought assurance that they would undertake activity during the remainder of the pilot. Although the partner remained keen to be involved, despite these reassurances the IE was unable to facilitate a meeting. In this instance, both the IE and The Fed felt that there was little more that could be done given that the employer was enthusiastic about the pilot and did not want to withdraw.

“The Fed knew I was having difficulties getting in touch with my partner – they contacted the care provider and come back to me saying yes they still want to be involved. However nothing happened from it, I don’t know what more could have been done. But even though the project didn’t go anywhere for me, it’s given me the opportunity to improve something about the way I am as an employer. I would like to carry the relationship on and will try to do this.” – Participant (IE)

Other participants who had not undertaken activity through the pilot were very clear that a lack of support, or the type of support on offer, was not to blame.

6.2. Link Up Toolkit
The Link Up participants were generally positive about the toolkit, regardless of whether they had undertaken any or much activity through the pilot. They felt it provided a good introduction to the Link Up concept, provided useful suggested topics that the partnerships might want to cover and helpful templates and proformas to structure the meetings.

The importance of a balance between guidance and allowing the pairs the flexibility to establish the partnership in a way that met their needs was noted, and the participants felt that the toolkit had been pitched correctly. It provided the necessary advice and structure for the partnerships at the outset but was not too prescriptive.

Overall, it would appear that the toolkit is fit for purpose, which is an important finding for the evaluation given the plans to reproduce the toolkit to support future Link Up participants.

“The resources were very good. They had everything I needed and useful bits to refer to.” – Participant (registered employer)

“We had the resources we needed to be able to create the partnership that we wanted. It was important that we were able to do this for ourselves.” – Participant (IE)

“It’s useful to have a steer at the start.” – Participant (IE)

Half of the active participants had used the toolkit, particularly in the early stages of the pilot, to structure their thinking around the topics they wanted to cover. The other half had actually been involved in designing the toolkit and therefore applied their knowledge of it throughout the pilot rather than ‘using’ it per se.

“We had the resources we needed to be able to create the partnership that we wanted. It was important that we were able to do this for ourselves.” – Participant (IE)

“All the resources were pitched at the right level.” – Participant (registered employer)

“I helped to develop the toolkit so lots of the points in there came from us. It informed our approach.” – Participant (IE)

Not surprisingly, the inactive participants had not used the toolkit except for the purposes of their initial meeting.

6.3. Future Support Considerations
Overall, the Link Up participants were satisfied with the support that they received and they made no suggested improvements in this regard. There was no doubt from participants that a toolkit would be an essential resource for taking forward the pilot.

The toolkit is being revised by The Fed to take account of the delivery approach being adopted in taking Link Up forward (see the next chapter). As part of the evaluation, participants were asked about the information that they felt should be included in the revised toolkit, the vast majority of which was already included in the pilot toolkit. The advice or resources suggested included the following topics:

- **Setting expectations:** Pairs should discuss their expectations for the partnership at the outset, for example around time commitment and timescales;

- **Discussing emergency cover arrangements:** If care provision is part of the partnership, the costs should be agreed at the outset including where in kind care provision is provided in return for an IE’s services;

- **Activity ideas:** To help participants understand the Link Up concept and how it could benefit them, participants found it useful to have suggested topic areas that the partnership might cover;

- **Terminology and acronyms:** For some IEs new to the sector and care providers’ operations, it would be helpful to have an explanation of terms and acronyms;

- **Advice on managing relationships:** It was suggested that IEs who were new to professional relationships such as a Link Up partnership might appreciate guidance on this.

- **Templates for record keeping:** Participants found it helpful to record key points from their meetings in writing which allowed them to look back at previous notes and actions when they next met;

- **Communication arrangements:** Establish the main ways in which partners would keep in touch (e.g. by phone or email) and provide the relevant contact details.

Alongside this information, participants and stakeholders felt that it was important to include case studies in the tool kit. This would help explain the Link Up approach and how the concept could work in practice, as well as expanding on the suggested activity ideas. One participant also suggested using pictures to make the tool kit engaging and offering an easy read version.
7. Conclusions

The concept of bringing together IEs and registered employers, to allow them to share experiences and better understand one another’s circumstances, is one which has considerable value and a strong rationale. It is also a concept which is highly attuned with current adult social care policy regarding personalisation and the expansion of personal budgets.

In delivering the pilot, the recruitment and matching of participants was fundamental to its success and appears to have worked well. Participants had the information they needed at the outset to understand the concept and to make an informed decision to take part. They were also pleased with the compatibility of their partnership. The efforts made to organise and facilitate recruitment and matching events have made a significant contribution to the pilot’s success. These gave participants the opportunity to grasp the concept, meet potential partners in person and discuss what they could gain from being involved. The importance of activities such as these should not be overlooked in taking the Link Up concept forwards.

Despite the strong start to the pilot, there was a mixed level of activity amongst the partnerships. Of the 19 participants recruited at the outset, just over half have either withdrawn or have not undertaken any significant activity. And importantly, in half of the active partnerships, one or more of the partners had actually been involved in the development of the pilot itself via the feasibility study or the steering group.

The scale of inactivity and attrition unfortunately limits the authority with which the evaluation can report, although it also needs to be seen in context. In all cases where the partnerships have not been active, this has been due to personal reasons or a lack of capacity to dedicate sufficient time to the partnership. In no instances did participants attribute inactivity to a lack of perceived benefit from their involvement. Furthermore, these participants actually tended to be positive about their involvement and hoped to develop the partnership outside the scope of the pilot.

It is very encouraging that where the partnerships have been active, they have also been very beneficial for both parties. IEs have received advice on employment matters, PA training and have put in place arrangements for emergency cover. Registered employers have gained a better understanding of IEs as service users and have been able to improve their practices as a result (a degree of commercial benefit is also evident through the emergency cover arrangements). Skills for Care is therefore encouraged to use these findings in promoting future iterations of Link Up.
On that topic, it appears at the time of writing that Skills for Care plan to take forward Link Up in the form of a publically available toolkit resource which will be promoted via local area officers and existing networks. It is therefore an encouraging finding of the evaluation that the pilot toolkit was widely considered to be fit for purpose. The toolkit has been revised and will be further strengthened by the inclusion of case studies from the pilot and participants’ feedback on the information and resources which they found to be most useful. The toolkit will be a valuable future resource for the roll out of Link Up.

When rolling out Link Up via the new delivery model, there are four key findings from the pilot that should be borne in mind.

- Alongside the toolkit, participants valued the facilitated meetings at the outset of the process. Without this initial support, there is a risk that future participation rates will be jeopardised.

- By relying on existing networks for promotion, participation is likely to be skewed towards those already actively involved in the sector. While this is not to say that these individuals would not benefit, it is likely that those who are less involved in wider sector networks stand to gain more from an initiative such as Link Up.

- This new model seems to rely on individuals’ own networks to find a suitable partner. Although one pilot participant was able to do this, others did not have a partner in mind prior to the pilot. Again, this may lower participation rates particularly amongst those less involved in the wider sector.

- Findings from the pilot would suggest that beyond support at the outset, partnerships are self-sustaining and there is little need for ongoing support.

Overall, this evaluation has found there to be strong support for the Link Up concept amongst IEs and registered providers. It has also demonstrated the benefits to be gained from being in a partnership and highlighted very few, if any, drawbacks, except the risk of registered employers not having the necessary time to commit. If participants continue their partnership as they intend, both IEs and registered employers stand to benefit further from what would appear to be the start of long standing relationships, and as such the pilot will leave a considerable legacy.
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