

Positive Steps Thamesmead: the story so far

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Thamesmead



A change for the better

 Peabody

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Authorship and acknowledgements

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FOREWORD

Introduction to PST evaluation report from Dr Prem Anand, BSc, MB BS, MRCP (London), Lakeside Medical Practice

I welcome this important report from Locality Matters, evaluating Peabody's Positive Steps Thamesmead (PST) programme, that has been operating in Thamesmead since April 2015. One of the key locations PST has been operating from is my own GP practice, Lakeside Medical Centre. The work of Peabody's staff and the team of wonderful volunteers they have recruited and trained to deliver the programme, has made an outstanding contribution to the community and more specifically to my own practice in Thamesmead.

As the report shows, the programme is having a measurable impact on the lives of local people, of whom well over a thousand have been seen by PST volunteers, the vast majority originally seen in our practice. Whilst it is still early days and attribution of benefit is always challenging, it is clear that the programme is having a measurable impact on the demand we are facing in our practice.

Thamesmead is a deprived community and a practice such as ours often sees the impact of that deprivation. My own estimate is about 40% of people who come through the door presenting with medical conditions, in fact have socio-economic factors as the source of the presentation. The initial complaint may be anxiety and depression or other health conditions, but these are a consequence of the real issues affecting their lives.

As a clinical team we are well aware of the need to direct our patients to services and advice that can help with these underlying conditions. However, given the time constraints we are under, the challenge of keeping abreast with the multitude of local provision and the turnover of staff (as well as use of locum staff), it is almost impossible to effectively understand where best to direct people and to make those referrals. Having a single referral point, in which we have total confidence, is a rare and valuable privilege.

It is our firm belief that whilst, for many people, longer term, more regular support is required to help them through a period of mental health or other health issue, it is often the case that a huge number of people find themselves in challenging and ultimately stressful situations because of specific events: They face a threat of eviction; they are unable to feed their families;

they are overwhelmed by debt; they have no recourse to public funds, leaving them effectively in a state of limbo by the immigration system - the list goes on.

The brilliance of PST is that it provides an invaluable service to connect with those struggling in our community, understand their needs and quickly (or immediately when needed) connect them to different services that are proving to deliver effective and immediate relief.

As the report alarmingly shows, the vast majority of people who are supported by PST would not know where else to turn to if PST were not in existence. This is echoed by our staff who have come to rely on the services, support and care that Peabody and their volunteers provide through PST.

We hope this report will be widely shared and the lessons from the excellent work in Thamesmead taken and applied elsewhere and that recognition and support is provided to secure the long-term funding of this project.

Dr Prem Anand
Lakeside Medical Centre



EXECUTIVE SUMMARY

Background and overview

Positive Steps Thamesmead (PST) is a programme run by Peabody operating predominantly in the eastern side of Thamesmead, SE London. The programme emerged through a realisation that c.40% of people visiting the main GP practice (Lakeside Medical Practice) were largely visiting because of non-biomedical factors.

The programme was supported with funding from the Department for Communities and Local Government (DCLG) as well as City Bridge Trust (CBT). It was launched in April 2015 and aims to support local people by signposting them to different services that can address issues they may have. Typically, people are putting pressure on GP and other public sector services resulting from challenges they face, covering issues such as; housing, debt, immigration, access to benefits and food shortage.

Peabody's approach has been to recruit a team of volunteers who are based at different locations across Thamesmead (the majority at the GP practice). These volunteers either have referred to them, or introduce themselves to, local people and ask if they would be happy to discuss their personal circumstances. This discussion involves going through a simple questionnaire which flags different services which might be helpful to the individual client. The client (if in agreement) is then referred to different agencies or partners who will meet or contact the client to gather more information and identify and deliver packages of support. The range of support is wide covering the breadth of advice providers.

The PST service draws heavily upon the Thamesmead Advice Providers Forum (APF). The APF was established prior to the launch of PST and is now the spine of the whole PST programme. Since its launch in April 2015, the PST service, through over 500 hours of volunteer time has met with over 1,250 clients. The service has made over 1,800 referrals to different partner organisations.

Summary of benefits

There are several different key stakeholder groups that are affected by the PST service.

STATUTORY PROVIDERS

The support for the PST programme, from different statutory providers is strong, covering: the Local GP Practice, LB Bexley, and Bexley Clinical Commissioning Group (CCG). Whilst it is too early to be definitive about the benefits generated from PST, there are certain areas where some clear evidence is emerging.

LOCAL PARTNERS

PST has provided an effective route for local people to be referred to local statutory and voluntary provision in volumes that would not have been achieved without the presence of PST volunteers at different sites. This has enabled significant uplift in the support these organisations can deliver to local people.

VOLUNTEERS

Since its launch it has recruited and trained 28 volunteers. Of these, 17 remain active volunteers in the programme. From interviews and a survey with volunteers it is clear they derive benefits

from their involvement with the programme. Key areas being: the acquisition (through training and work) of skills that increase their employment prospects, a greater connection to their community, reducing loneliness and isolation for volunteers and the building of skills and confidence – in one case leading directly to a volunteer starting their own business.

CLIENTS

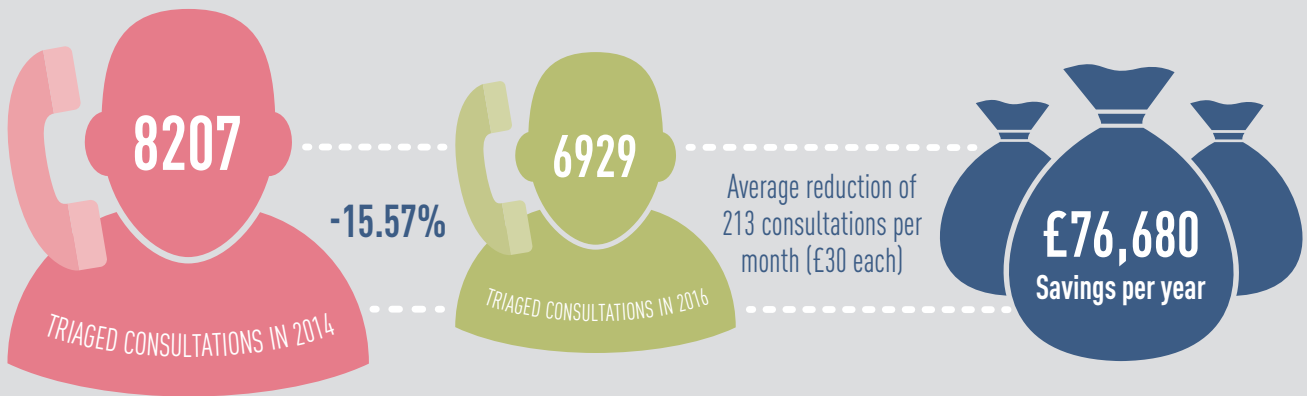
PST has seen over 1,250 clients. From responses to an online survey it can be seen that the experience of clients is overwhelmingly positive both in terms of how the service has affected their lives and their assessment of the service.

43% say the service has “made a huge difference to their lives”. 48% indicate it “has helped” with only 2% saying it “has been a waste of time”. Significantly, when asked what they would have done without PST 69% said “don't know”. There is clearly an existing and ongoing demand for the support that PST provides.

Key Findings and comments from clients

FROM CLIENTS

91% of clients say PST has “helped” or has “made a huge difference”.



If you hadn't met a PST advisor what would you have done?

Clients were asked where else they would turn to if PST was not there – significantly nearly 70% said they didn't know.

Changed my life and that of my children's for the better.

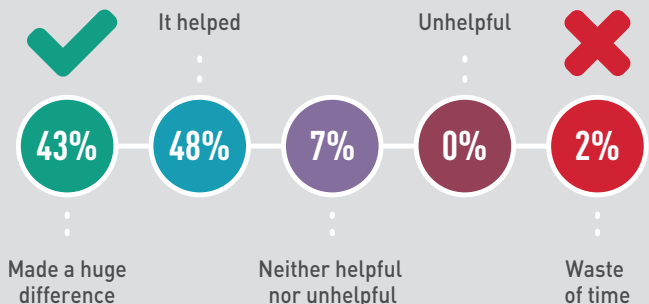
Back on the right path in life thanks to positive steps – great people.

I DON'T KNOW 68.57%

ASKED DOCTOR (GP) FOR ADVICE 20%

NOTHING 11.43%

How helpful was the support you received from the organisations you were referred to?



Referring me to CAB Lakeside Surgery immediately and Peter making calls and sorting out housing benefit for me was the beginning of other help. Even when I got very unwell and admitted to hospital I was not afraid of not having anywhere to live. In short, the difference PST made to me is that I didn't kill myself. My daughter still has a mum. Or she could have followed me. Many thanks to PST.

FROM PARTNERS

One of the key measures is that PST has prevented at least seven households from being evicted (Source: CAB and Fair Finance).

It has given me the confidence and direction to get back into the workplace.

FROM LAKESIDE

PST has potentially contributed to a significant reduction in the number of "Triaged consultations". Triage consultations are telephone based consultations with a GP, provided where no appointment is available. They typically last five minutes, as opposed to ten minutes for a normal GP consultation. The fact that the practice is offering fewer "Triage Consultations" is an indication that they are reducing the backlog and latent demand for GP visits. Over a two-year period the average monthly reduction in triage consultations is 213 consultations per month. Lakeside Medical Practice estimate that each Triage consultations costs c.£30. On that basis, it can be argued that the practice is generating savings (or productivity gains) of £76,680 per year, a significant proportion of which is potentially attributable to PST.

Recommendations

Set out below, under different headings, are the key recommendations from this evaluation:

PROCESS RELATED

- Improve the quality and distribution of the monthly reports.
- Share case studies and success stories from PST more broadly (within Peabody, amongst partners, and with volunteers).
- Explore how aspects of the PST process could be automated.

GATHERING OF EVIDENCE

- Be clear about what specific benefits Peabody seeks from PST and ensure measures are in place to track these.
- Be clear where PST seeks to impact on demand for other public sector services e.g. health or unemployment and ensure measures are in place to track.

- Put in place a way to measure the impact PST is having on clients' overall health and wellbeing. This should be achieved through agreeing a standard health and wellbeing assessment.
- Explore the potential for a shared funding model where benefiting organisations (e.g. GP Practices, DWP or local councils) commit to funding PST once positive impact on their services can be evidenced.

CONTINUATION AND EXPANSION

- Subject to funding availability, other priorities, and discussion about funding support from others, our recommendation is for Peabody to continue to support the PST programme in its current form.
- Explore the potential with RB Greenwich and Greenwich CCG to expand PST to Gallions Reach Health centre.
- Set up a steering group within Peabody to oversee PST and assess potential for expansion to other Peabody sites.

Very pleased and relieved that I could have the support I needed straight away. The service was very helpful and I really appreciate the help I wanted without waiting a long time. Big thank you to the PST programme.

BACKGROUND TO PST

Need identified by Dr Anand

Positive Steps Thamesmead (PST) emerged from a conversation with Dr Anand, the leading GP at Lakeside Medical Practice. In a meeting in 2014 he estimated that c.40% of visits to the GP practice were driven by non-biomedical reasons. People were presenting with genuine medical needs, such as high levels of stress or anxiety or other issues, but the cause of these symptoms was believed to be from socio-economic issues rather than medical ones. It was becoming clear to the practice that key issues such as: debt, poor financial literacy, housing and immigration were causing people to visit the practice. The conclusion being that helping people to address these, and other issues, could potentially have a substantial impact upon their health and wellbeing and ultimately choke demand for overwhelmed health services.

Creation of the Advice Providers Forum

At this time, already in existence, was the Thamesmead Advice Providers Forum (APF). The APF had been established and

supported by Trust Thamesmead (now Peabody) and was a well-functioning forum, designed to coordinate activity and share best practice between advice providers across the community. The APF remains a thriving body and is the spine of the PST programme. The forum meets every quarter and has been instrumental in getting the PST programme set up and supporting it. For the PST programme to be effective several components needed to be in place. The most critical being organisations, that people requiring help, can be signposted or referred to. Having the APF in place meant that when PST was established, strong partnerships already existed with organisations to whom “clients” would be referred.

Funding from Our Place and City Bridge Trust

When the creation of PST was being considered, the Department for Communities & Local Government (DCLG) created a scheme inviting community groups to apply for funding and capacity to support their plans for initiatives within their communities. Trust Thamesmead applied to be part of the scheme and were successful

in becoming one of 120 initiatives, across the country, that were part of the original Our Place programme. Over the course of the programme this resulted in funding of £33,000 to support the development of PST.

City Bridge Trust (CBT)

Peabody also won funding from CBT of £90,000, over three years, to support the development of the PST programme. As the programme developed it became clear that adaptations were required to address needs that were emerging from the work, such as homelessness, immigration and disability issues. The CBT funding is used to support different providers addressing these issues including: Greenwich Association for the Disabled, Citizens Advice Bureau and “smart money advice” from Fair Finance.

More recently concerns related to Female Genital Mutilation (FGM) have been identified as a potential need and may be something to be explored, as a service provision, in the future.

EXPLANATION OF PST

What is PST? The overall PST process is set out below



PST VOLUNTEER MEETS CLIENT AND FILLS OUT REFERRAL FORM

IS THERE A CRITICAL ISSUE?



PST is a programme where volunteers talk to people in a range of Thamesmead community settings and ask them if they need help with different aspects of their life. Currently the majority (84%) of these initial meetings take place at the Lakeside GP practice, but more recently initial conversations (assessments) are also taking place at Waterways Children's Centre, and Windrush School.

The volunteer introduces themselves to the "client", explains the programme, and asks if the client would be happy to be asked some questions. If acceptable, the volunteer asks the client a series of predefined questions (see appendix 1) to determine what sort of help the client may need. Essentially the volunteer asks questions such as:

- Are you looking for work?
- Are you having difficulty feeding yourself or your family?
- Are you facing a threat of eviction?

Following this initial conversation (or assessment) the volunteer will determine if the client requires immediate assistance (for example if they are having difficulty feeding their family or face an imminent eviction threat). If they require immediate assistance, then they are referred to the relevant partner(s) for immediate support. In most cases though the client's requirements are not urgent – for example they have an immigration issue or they have an ongoing debt management issue. In these, and other cases, the client (through

the PST process) is referred to different organisations who should be able to support them.

The volunteer completes the form (appendix 1) and every week these are collected and entered onto Peabody's Salesforce Customer Relationship Management (CRM) database. Details about the client (name, address, contact details) as well as flags indicating which services the client wanted to be referred to, are captured on the database. These flags are then used, on a weekly basis, to create a list, for each partner, covering which clients are being referred to them. Every week an email is sent to each partner (see example Appendix 2) setting out who is being referred to them and relevant details about the client being referred.

It is then the partner's responsibility to contact the client, within 10 days, and arrange (if appropriate) for the client to visit them to discuss their needs in greater detail.

For some partners, there is a different process, in that the PST team in Peabody have access to the partner's diary and will make bookings for clients to see the partner. This is the way that bookings are made for Bexley Citizens Advice Bureau (CAB) and the Lewisham Refugee and Migrant Network and others. These organisations provide advice and support under a contract they have with Peabody.

Every month, as part of the agreement that is in place with all advice providers, the partner is asked to provide details about the PST clients they have seen in the last month. This data is collated by Peabody's PST team and generates a monthly report (see example attached at appendix 3). Essentially this report sets out a summary of key aspects of the programme, covering issues such as:

- How many people have been assessed by volunteers
- Who have they been referred to
- Have they been seen by the advice provider and if so what happened?

Where are services delivered from?

There are four venues where clients access the PST programme by speaking to a volunteer. Often clients will contact the Peabody PST team directly. Sometimes a client will be referred into the programme by one of the partners.

Currently almost all clients enter the programme after an initial conversation with one of the volunteers. The volunteers are currently based at the following locations, set out in the table below:

Location	Frequency
Lakeside Medical Practice	Every day from 10.30 to 12.30
Emmanuel Church	Every Tuesday from 10.00 to 13.00
Waterways Children's Centre	The third Wednesday of every month from 10.15 to 12.15
Windrush School	The first and third Wednesday of each month from 14.30 to 15.30

Who are the service providers?

Service providers are all members of the Advice Providers Forum (APF) which also includes other service providers. Those organisations providing support for PST can be divided into three groups:

1. Those doing on a voluntary basis
2. Those doing under a contract from Peabody
3. Those doing who are part of the "Peabody family"

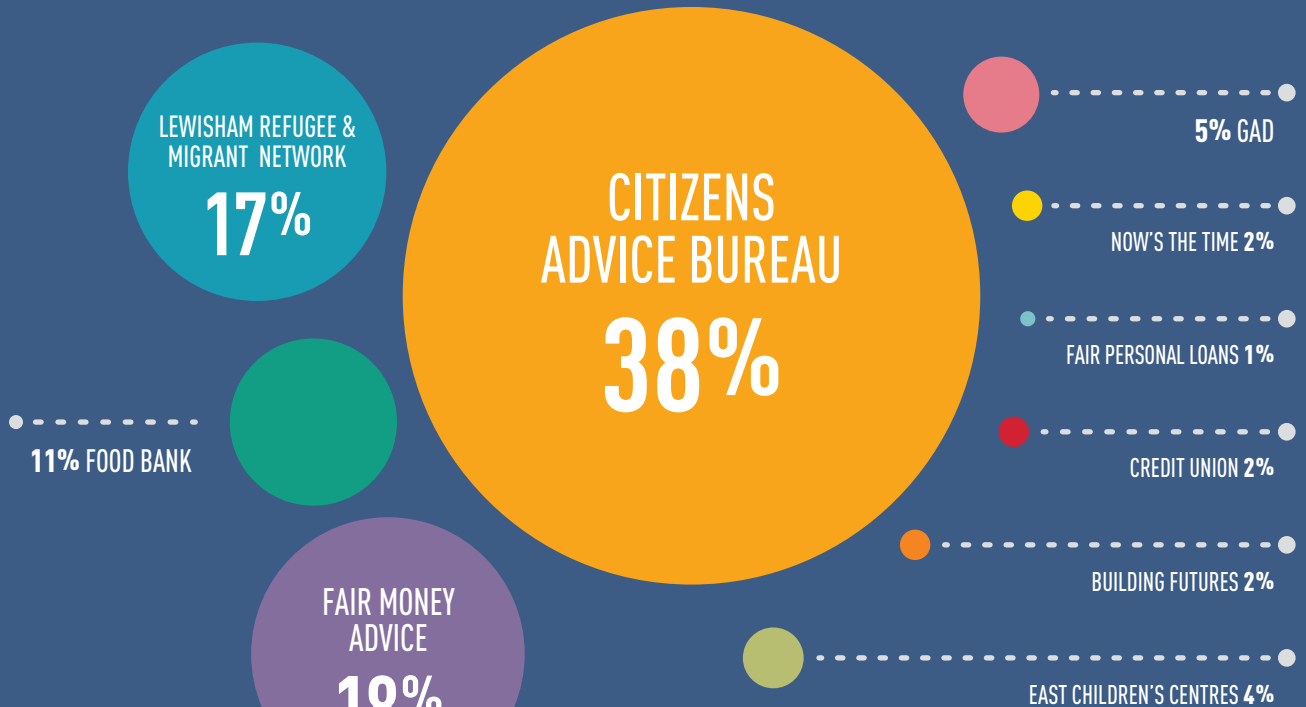
The different organisations and a summary of the advice and support they provide is set out in the table below:

Organisation	Type	Brief Description
Building Futures	Peabody family	Employment advice
Citizens Advice Bureau	Peabody contract	General advice on wide variety of issues and specifically access to benefits
Credit Union	Voluntary	Support for saving and borrowing
Fair Finance	Peabody contract	Debt and financial advice and debt restructuring
Fair Personal Loans	Peabody contract	Finance support in terms of a loan
Greenwich Association for the Disabled	Peabody contract	Support for disabled
Gallions	Peabody family	Housing advice for Peabody tenants
Lewisham Refugee and Migrant Network	Voluntary	Support for those with refugee status and immigration issues
Now's the Time	Peabody family	Support into and maintaining physical activity
Recovery College Greenwich	Voluntary	Advice and support for those with drug and alcohol issues
Re-Instate	Voluntary	Provide employment support for people with mental health issues
The Food Bank	Voluntary	Provide emergency food parcels for families

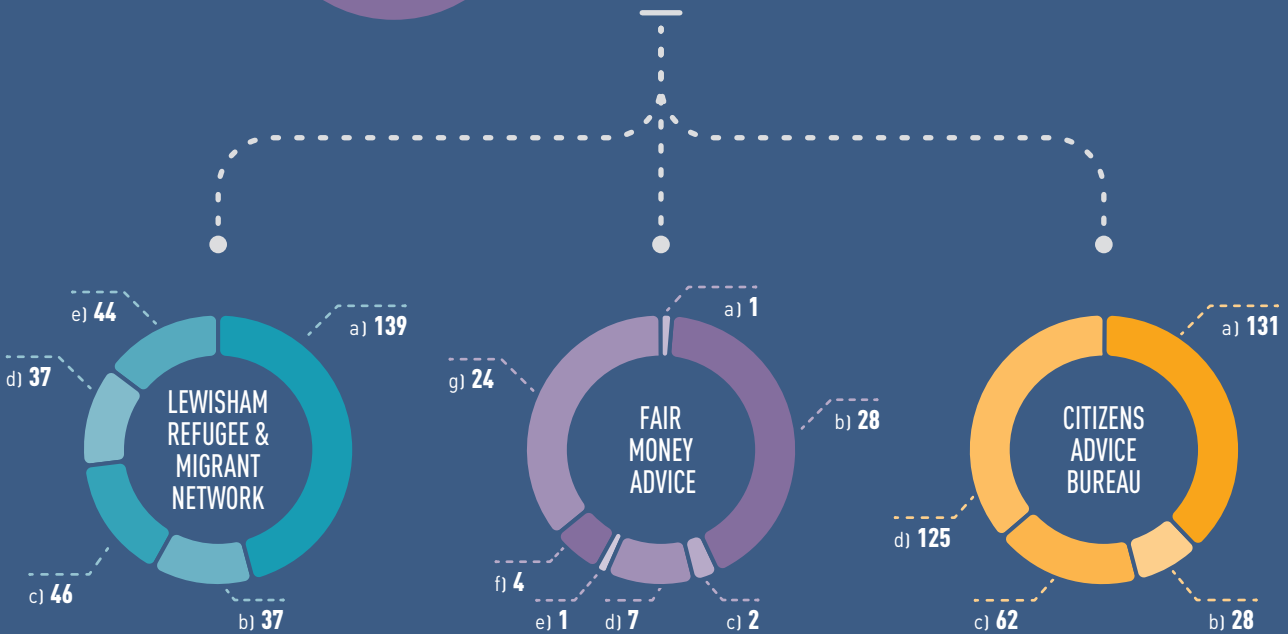
We helped a particular gentleman whose gas bill was £40 a week and he got it down to £40 a month.

Alan Kerr, Greenwich Association for the Disabled, Advice provider

Where have referrals been made to?



KEY PROVIDERS



- a** Can't assist with finances - Signposted
- b** Solved Issues
- c** Not enough resources to help
- d** No action required
- e** Client requires finance

- a** Court action avoided
- b** Income maximised
- c** Debt written off
- d** Repayment negotiated
- e** Homelessness prevented
- f** Bailiff action stopped/prevented
- g** Other

- a** Advice given
- b** Referred to another agency
- c** Given follow up CAB appointment
- d** Given info for self help

The chart to the left shows what percentage of referrals over a 13-month period have been made to each organisation.

The following three organisations accounted for 73% of all referrals in the 13 months covered by the figures above.

- Citizens Advice Bureau
- Fair Money Advice (part of Fair Finance)
- Lewisham Refugee and Migrant Network

For these three organisations further details are provided in the figures below setting out what action was taken with those clients:

FAIR FINANCE

Over a 13-month period Fair Finance received 209 referrals from PST. To the end of December 2016, they had “taken action” with 67 of these clients, summarised in the diagram on page 13. As is evident many people who are referred to Fair Finance have not taken up the offer of an appointment – in a number of cases Fair Finance have booked up to three appointments for someone and they have not attended any of them. This is something that should be investigated to understand why people are not turning up. Some of the causes of this may be:

- They have more pressing issues
- The cost of travel to the appointment
- Are referrals being made to Fair Finance appropriate or is there a requirement for further volunteer training?

Since the launch in April 2015, the clients Fair Finance have seen have presented with accumulated debts of £941k. Of this figure 67 people presented with accumulated unsecured credit related debt amounting to £437k. Some of the key benefits delivered by Fair Finance include:

- Income maximised £20,187
- Debts written off £17,226
- Evictions prevented 5

CITIZENS ADVICE BUREAU

Over a 13-month period CAB have received 460 referrals from PST. To the end of December 2016 they had “taken action” with 346 of these clients, summarised in the diagram on page 13.

Outcomes that CAB can evidence include:

- They have carried out three appeals related to benefits of which at least two were successful
- Five claims for benefits have been made by CAB
- Two evictions prevented
- For one client, they have successfully secured emergency housing
- For PST clients, they have generated incremental income of £12,938

LEWISHAM REFUGEE AND MIGRANT NETWORK (LR&MN)

Over a 13-month period LR&MN has received 178 referrals from PST. To the end of December, they had taken 300 different actions with these clients as set out on page 13.

Volunteers

The PST programme is reliant on the services of volunteers, who make the whole programme possible. Peabody has a well-developed programme for recruiting and training volunteers. This and the enthusiasm and professionalism of Peabody’s volunteer management staff has made the volunteer aspect of the programme a specific success.

Since its launch in April 2015, 28 people have been recruited as volunteers and 17 have been active volunteers for the PST programme. From launch to December 2016 collectively these volunteers have delivered 523 hours of volunteering covering 491

hours of client facing time and 32 hours of administration support: Volunteers not only support PST through the work they do in talking to and assessing clients’ needs (at the different delivery points), they also help with crucial tasks such as data entry and report collation.

Some volunteers have undertaken Information, Advice and Guidance (IAG) Level 3 training with the Volunteer Centre Greenwich. Other training programmes that have been on offer, to which some have taken part in, are:

- Customer First
- Professional Boundaries
- Data Protection

All the PST volunteers are now going through the mandatory training so that everyone is at the same level. As well as IAG training, other training for new starters covers:

- Customer First
- Data Protection
- Lone Working
- Safeguarding
- Equality & Diversity

As part of the evaluation, an online survey of PST volunteers was carried out using Survey Monkey, to which there were 13 responses. Key findings from this survey are set out on page 18.

Overall the response from the volunteers has been extremely positive.

In a series of follow up telephone interviews the volunteers were asked to suggest areas for improvement of the PST Programme. Suggestions covered areas including:

- Providing child care for volunteers
- More rapid payment of expenses
- Advisors to spend more time with partners
- Creating a website for PST
- Expanding the service to new venues
- Greater publicity of the service

These and other recommendations have been picked up in later sections of this report.

Volunteers were asked to describe what the highlights of PST for them had been and key issues that emerged are as follows:

- Helping people in need who don't know where to turn
- Being more connected to the community
- Developing skills and becoming "employment ready"
- Growing personal confidence levels
- Working in a team
- The support from PST

Peabody staff

Peabody staff have delivered a variety of roles in setting up and running the PST programme. The key members of staff that have supported the programme are as follows:

Staff Member	Title and role in PST
Mick Hayes	Trust Thamesmead Chief Executive providing executive support.
Lucy Webb	Head of Partnerships and Engagement, originally created the development plan and secured funding.
Paula Hines	Head of Thamesmead Socio-Economic Regeneration
Linda Delieu	Community Development Officer, operational management of the programme.
Lisa Ann Newton	Community Regeneration Officer, took over from Linda Delieu.
Jess Moles	Community Development Assistant, responsible for tracking PST activity, Sales Force Database and reporting.
Georgia Mann	Socio-Economic Assistant responsible for tracking PST activity, Sales Force Database and reporting. Took over from Jess Moles

The Advice providers

The active providers have been interviewed as part of the PST evaluation. A summary of the interview notes with each of the providers has been provided in Appendix 4.

The clients

A request was sent to c.700 PST clients asking them to complete an online questionnaire about their experiences of having been

supported by the PST programme. To date 41 have responded to this questionnaire (some on line and some via forms which were handed out). Some of the key findings from this survey have been set out on pages 16-17:

- Clients were asked to rate from one star to five stars how helpful the PST Volunteer had been with 83% giving four or five stars (see page 17).
- The top three issues clients seek support around are:

Housing, Employment and Benefits (see page 17).

- The chart on page 17 provides key feedback for PST with 43% saying the service has "made a huge difference" and 48% saying "it helped".
- The need for PST is reinforced on page 17, effectively showing that clients, who have been supported by PST, would not know where to turn to if the service had not been there.

Helping me get back to work.

Back on the right path in life thanks to positive steps – great people.

The difference the PST has made to me is that if I hadn't had the help from the very pleasant young lady Georgia, I would have felt very worried about the outcome. She made me an appointment to see the Disability Advisor and also gave me a number that he was willing to be contacted on if I had any worries when I requested help.

I was given professional help by a Disability Advisor who helped me fill in the form with my son in attendance. He was very calm and professional with my son and he gave me reassurance that if the claim was refused there could be hope of an appeal. I am so pleased that I have been made aware of Positive Steps and will pass on other people to the brilliant service. Thank you very much.

Very pleased and relieved that I could have support I needed straight away. The service was very helpful and I really appreciate the help I wanted without waiting a long time. Big thank you to the PST programme.

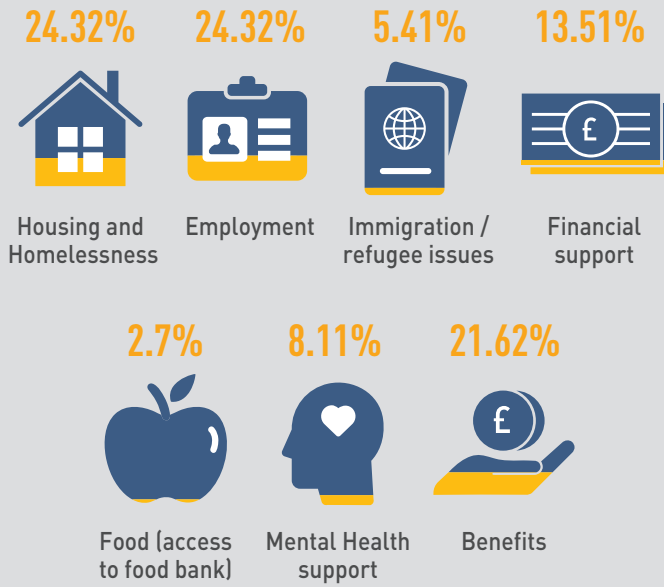
It has given me the confidence and direction to get back into the workplace.

Referring me to CAB Lakeside Surgery immediately and Peter making calls and sorting out housing benefit for me was the beginning of other help. Even when I got very unwell and admitted to hospital I was not afraid of not having anywhere to live. In short, the difference PST made to me is that I didn't kill myself. My daughter still has a mum. Or she could have followed me. Many thanks to PST.

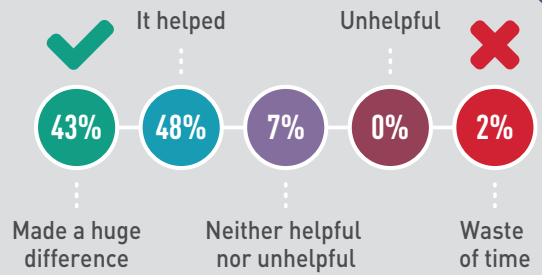
Changed my life and that of my children's for the better.

Clients

What did you need support / advice about?



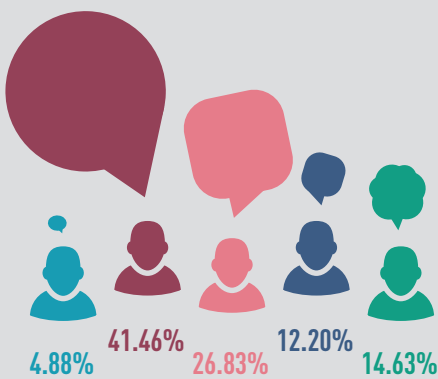
How helpful was the support you received from the organisations you were referred to?



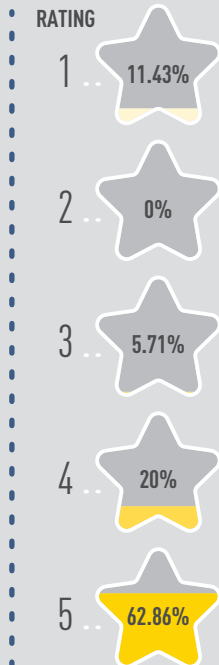
If you hadn't met a PST advisor what would you have done?



Where did you first hear about Positive Steps Thamesmead (PST)?



- Children's Centre
- Lakeside GP surgery
- Through Trust Thamesmead / Peabody
- Recommended by somebody
- Other



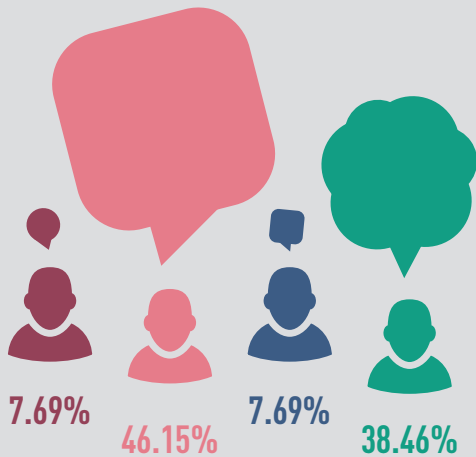
How helpful (on a scale of 1-5) was the advisor you first spoke with?

After meeting the advisor how quickly did organisations, that you had been referred to, get in touch with you?



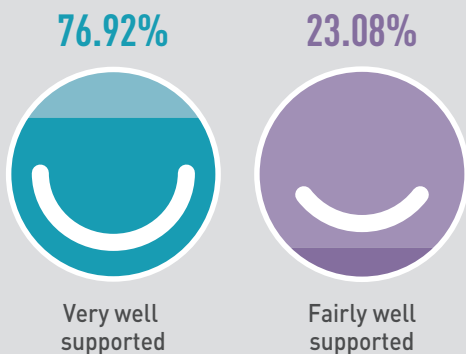
Volunteers

Where did you first hear about Positive Steps Thamesmead (PST)?



- Lakeside GP surgery
- Through Trust Thamesmead / Peabody
- Recommended by somebody
- Other

Do you feel supported in your role?



No one feels

- ☹ NEITHER SUPPORTED OR UNSUPPORTED
- ☹ NOT THAT WELL SUPPORTED
- ☹ NOT SUPPORTED AT ALL

Partners

The brilliance of PST is that it provides an invaluable service to connect with those struggling in our community, understand their needs and quickly (or immediately when needed) connect them to different services that are proving to deliver effective and immediate relief.

Dr Anand
Lakeside Medical Practice

PST has demonstrated how effective volunteers can be in identifying, supporting and signposting those most vulnerable people in our communities. People who often have no idea where to turn to and without the support provided, by the PST family, are highly vulnerable to exploitation or place unnecessary pressure on already stretched public services.

Andrew Jordan
Lewisham Refugee and Migrant Network

SPECIFIC OUTCOMES OF THE PST PROGRAMME

Hard measures

When the programme was originally conceived, funding and support was awarded from the DCLG, to develop an operational delivery plan. As part of the Our Place programme, there was a specific requirement to undertake a Cost Benefit Analysis (CBA) of the programme. The programme team selected a series of measures they anticipated that PST would be able to have an impact on, covering:

1. Reducing GP visits
2. Reducing unemployment
3. Reducing evictions
4. Reducing Council Tax arrears for LB Bexley
5. Reducing housing benefits claimants for LB Bexley
6. Reducing mental health referrals

For each of these measures the programme team sought to put in place mechanisms for gathering data on a six-monthly basis, that would indicate the impact that PST was having on these measures.

In the sections below each of these measures is taken in turn and, where it has been provided, the data is set out to form a judgement about the impact that PST has had upon these public service costs.

Ultimately this data forms part of a cost benefit analysis (CBA) which uses a tool (favoured by the DCLG) which has been designed by New Economy Manchester.

In summary, from “hard” evidence, despite some of the data set out below, it is difficult to definitively state that PST has had a measurable impact upon public service demand across the six areas listed above. The key reasons for this hesitancy are:

1. In the absence of a meaningful control group or “counterfactual” (i.e. an area of similar population size and demographics, to whom a comparison can be made) any conclusions drawn will be vulnerable to challenges around attribution.
2. For many of the areas of public sector spend which the programme is looking to influence, it will need to run for a longer period to be able to make concrete claims about the impact it has had.
3. For some measures, there is insufficient data about latent demand. For example, it is not known, with any accuracy, the extent to which PST is eating into the latent demand that was previously not being addressed.

REDUCING GP VISITS

One of the key drivers for setting up the PST programme was the level of non-biomedical related demand being experienced by Lakeside Medical Practice. Overall, as can be seen on page 20 the demand for GP visits has reduced slightly over the period PST has been in place (April 2014 - Sept 2016). The reduction is too small to really be significant albeit that the trend is in the right direction.

However, when “Triaged consultations” are looked at (see page 20) i.e. those visits for whom there has not been a previous appointment booked (for example) a slightly different, and more compelling, picture emerges.

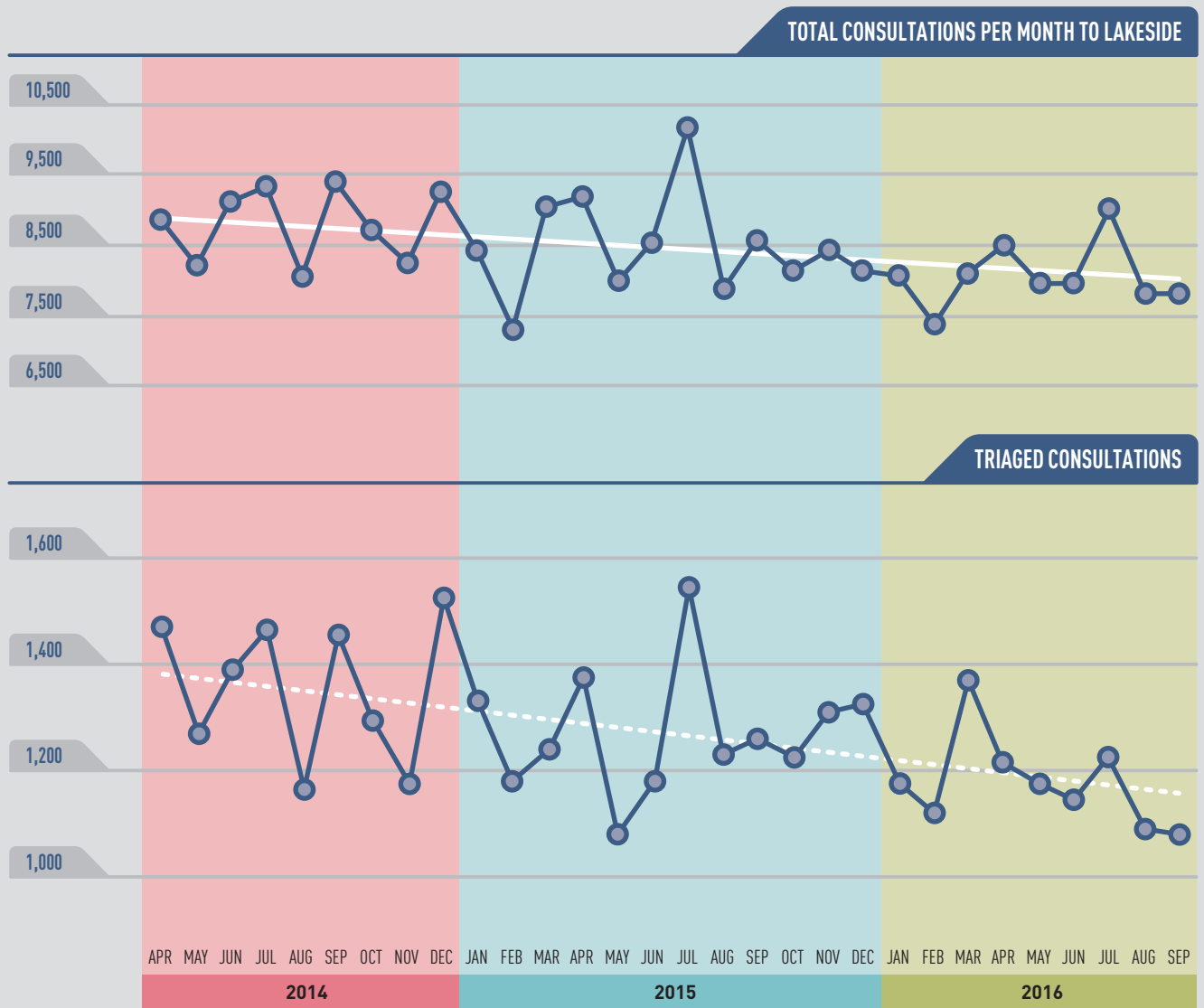
If the period for which there is data for the same months, for 2014 and 2016, is then looked at (see following graph) it shows that over a two-year period there has been a significant reduction in the number

of “Triaged Consultations”. Triage Consultations are telephone based consultations with a GP, provided when no appointment is available. They typically last five minutes as opposed to ten minutes for a normal GP consultation. The fact that the practice is offering fewer “Triage Consultations” is an indication that they are reducing the backlog and latent demand for GP visits. Over this period the average monthly reduction equates to 213 visits per month. Lakeside estimate that each triage consultation costs c.£30. On that basis, it can be argued that PST is making a significant contribution to savings (or productivity gains) for the practice of £76,680 per year.

One of the areas the PST team hoped they would have an impact upon was to reduce the regular visits of clients who do not have chronic disease or a critical illness. However this does not appear to have been impacted.

It is worth stating that over this period the number of registered patients has not altered in any significant way.

One area of data, the programme team wanted to test, is to what extent PST has soaked up some of the latent (and invisible demand) for Lakeside Practice. One way of assessing this would be to see if unnecessary A+E visits, from the Bexley side of Thamesmead, have reduced during the time PST has been operational. Data from Queen Elizabeth Hospital is still awaited. Another potential measure for this is the extent to which abandoned calls to the GP practice have reduced over time – the hypothesis being that abandoned calls relate to uncatered for clients (or latent demand). We are still waiting for this data.



8207

TRIAGED CONSULTATIONS IN 2014

-15.57%

6929

TRIAGED CONSULTATIONS IN 2016

Average reduction of 213 consultations per month (£30 each)

£76,680

Savings per year

3109

Average number of patients with three or more appointments who do not have a chronic disease or critical illness.

16,083.63

Average number of registered patients at Lakeside

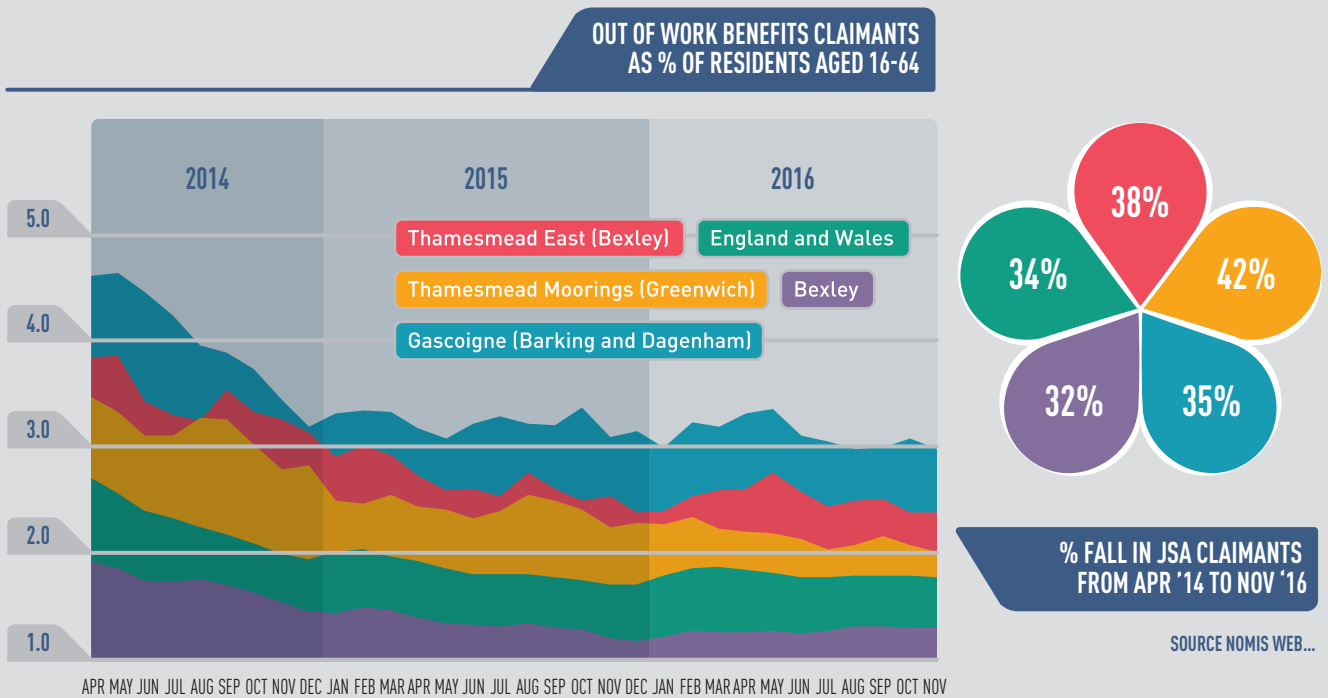
REDUCING UNEMPLOYMENT

During the time that PST has been in operation, as shown in the graph below, there has been a reduction in out of work benefit claimants across: England and Wales, Bexley as a whole, and similar neighbouring wards to the

key ward that PST is focussed on (Thamesmead East).

As is shown in the table below, when compared with Bexley and England, Thamesmead East compares well in terms of reduction of out of work benefits claimants. However,

when compared with similar local neighbours (Thamesmead Moorings in Greenwich and Gascoigne (across the river in Barking and Dagenham) there is no strong case to be made that PST has impacted positively on JSA claimants.



Whilst evidence from the national unemployment figures is inconclusive at this stage we do know that PST referrals have directly resulted in new employment for at least nine people.

9 PEOPLE REFERRED BY PST AND FOUND JOBS



Thamesmead Moorings and Thamesmead East are both performing significantly better than Bexley as a whole in reducing out of work benefit claimants. In Thamesmead East from April 2014 to Nov 2016, there has been a drop in out of work benefit claimants of 115 people (from 320 to 205).

There is evidence from Building Futures, (Peabody's employment support service to Thamesmead's residents) that PST has been successful in supporting people into employment. It is known that many of the people that Building Futures has seen have been referred to them from PST. In the early months of PST's operation 46 people were referred from PST to Building Futures of whom nine eventually found employment. In the last 12 months there have been 24 referrals, to Building Futures from PST, and, at the time of writing, none had found employment. The feedback from Building Futures is that, in recent months, many of the people being referred to Building Futures have required onward referral as they had issues that were excluding them from employment, such as immigration status. This may indicate a training need for volunteers.

REDUCING EVICTIONS

From the Fair Finance and CAB data it can be confirmed that they have prevented evictions on seven separate occasions.

New Economy Manchester estimate that the average immediate costs to the state of

A highlight for me was that I stopped an eviction taking place.

JG, PST Volunteer

an eviction is £7,000 indicating a total value, delivered from PST in excess of £49,000.

REDUCING COUNCIL TAX ARREARS FOR LB BEXLEY

There is insufficient data at this stage to make any claims about reductions to council tax arrears.

REDUCING HOUSING BENEFITS CLAIMANTS FOR LB BEXLEY

There is very little evidence to support any claim to have reduced housing benefits claimants. In order to generate this evidence far greater rigour would need to be applied to setting up a control group or counterfactual.

REDUCING MENTAL HEALTH REFERRALS

There does not appear to be any evidence to suggest conclusively a reduction in mental health referrals.

Soft measures and anecdotal evidence

LAKESIDE MEDICAL PRACTICE

As part of the evaluation staff at Lakeside were interviewed. Their overwhelming response is that PST

has provided a service of which they are very proud and would be "devastated" if it did not continue.

Teresa Orford, who is the nurse practitioner at Lakeside, says that she personally sees c. 120 patients every week and estimates that she refers on average 10-15 of these patients to PST every week.

Dr Prem Anand is the lead GP at Lakeside and described the service as "fantastic" and all the staff and

A lady texted me to thank me for reducing her water bill.

N.A., PST Volunteer

volunteers as having "a real can do attitude". In any inspection or audit of the GP practice the PST element is always commented upon as a key service. Recently,

There was a gentlemen who used to come to the surgery all the time and wait around – since referring to PST we see him much less often.

Teresa Orford, Nurse Practitioner, Lakeside

Professor Sir Malcolm Grant the Chairman of NHS England (the body that oversees and funds all GP practices in England) visited Lakeside and was effusive in his praise for PST saying it should be replicated in all GP practices.

It is clear (and the evidence supports this) that the service is of significant benefit to the practice. As well as allowing GPs and other staff to focus their skills and time on those people who they are likely to have the most impact on, their staff no longer spend valuable time keeping their knowledge up to date about the wide variety of local alternative provision. They can simply refer the client to PST, confident that non-biomedical issues will be identified and support will be provided.

CLIENTS

The positive impact on clients is apparent from the response to the online survey.

ADVICE PROVIDERS

One of the challenges, to any provider of services (such as those services provided by the PST partners), is to attract clients whom they can help. PST provides

a valuable flow of clients to the advice providers which would dry up immediately if the service were no longer in place. For different reasons people are sometimes unwilling to come forward or make themselves known to “formal” statutory or commissioned service providers:

- They might not be aware that the service is available.
- They might be frightened of consequences, such as exposure to social care issues or the threat of deportation.
- They might be embarrassed or have language difficulties.

Many of the providers have commented on the quality of the PST volunteers in terms of their care, their accessibility and their enthusiasm. Their approachability is also a key element of the service – they (almost all) come from the Thamesmead community and many of them have faced the same issues as the people they are trying to help now face.

This empathy is a key contributor to the success PST has achieved in terms of the number of clients that have been seen since the programme started.

VOLUNTEERS

Many of the volunteers who were interviewed, or completed the online survey, mentioned how much need there was in the community and how being a volunteer had opened their eyes to this need. They also stated how grateful they were to be part of a programme that effectively addresses this need.

Many have been impressed with the training provided and how the training, and their time volunteering, has allowed them to develop new skills and build greater personal confidence.

The excellent support provided by Peabody staff in supporting the team of volunteers, through their training and support on the job, has been commented upon by many as being invaluable.

The PST training has given me great confidence. I set up a web based business – in a way that I didn't think I would ever be able to do before.

A.A., PST Volunteer

WHAT HAS THE PROGRAMME COST?

Set up costs Peabody has incurred to establish the programme

The key third party cost was consultancy support from Locality Matters which over the total period amounted to £30,000.

Costs incurred by partners and advice providers

Partners and advice providers (where they are not being funded directly by PST) were asked to provide a breakdown of time spent on PST. For many the PST works falls within everyday activity and they have struggled to provide estimates of time. Where estimates were given, these are set out in the table below – these figures cover time spent from January 2016 to December 2016.

Partner / Advice provider	Hours	Costs estimate at £15 per hour
Credit Union	12	£180
Building Futures	9	£135
East Children's Centre	12	£180
Now's the time	18	£270
Lakeside GP Practice	30	£450
Total	81	£1,215

Summary of costs

Putting to one side set up costs the ongoing costs, for running the PST programme over a year are as follows:

Item	Total annual costs
Peabody staff	£18,750
Contracts with other organisations	£39,877
Costs incurred by partners	£1,215
Total	£59,842

RECOMMENDATIONS

The overall process

From the review issues have emerged that should be looked at in terms of future development of the PST programme.

Monthly reports should be distributed to all interested parties. This would include statutory providers who stand to benefit from PST, as well as all members of the Thamesmead APF and the volunteers. Currently the reporting of PST feels, to some partners, as being very one sided, in that they provide a set of monthly data but, other than verbal feedback, at the APF meeting, they get no report.

- More effort should be put into sharing case studies from different partners. The few case studies collected as part of the evaluation demonstrate the impact that PST has had on clients' health and wellbeing.
- There is a lack of understanding, amongst some of the volunteers, about the capabilities and services offered by some of the PST partners. Advice providers should be given an opportunity to meet with the volunteers on a rolling basis, as part of ongoing training, or as part of their induction programme.
- There is an opportunity to automate aspects of the PST programme and this should be explored in more detail. Currently there is a significant reliance on paper based systems and single individuals to ensure the process works smoothly. Whilst there is little evidence of the processes not working, it is costly in terms of time and delays to clients being seen by organisations they are being referred to. Key areas where automation could significantly improve, reduce risk and speed up the PST process would be:
 - Volunteers being able to update the Salesforce (or other) database immediately through entering data from client assessments directly onto some form of tablet computer.
 - Reports to partners, detailing who has been referred to them, could be generated automatically and immediately from the database.
 - Automating the monthly reporting process so that it evolves from an MS Excel spreadsheet (which requires significant data entry and manipulation) to an automated system driven from the database.

- Whilst it is felt by everyone that the breadth of partners is one of the most impressive features of PST there are some service areas that are not covered:
 - Youth services – there is the potential this could be provided by other parts of Peabody
 - Relationship counselling
 - Support to prevent Female Genital Mutilation (FGM)
- The “Together We Can” partnership agreements that Peabody has with partners on the Advice Providers Forum should be reviewed.
- There is a need to ensure that all staff at Lakeside are referring to PST. Currently 62% of referrals come from two members of staff.
- Investigate why there is such a drop off between referrals to Fair Finance and who they end up seeing.

Management of volunteers

- Volunteers need to be kept better informed about the success of the programme and the people they have seen.
- The feedback from volunteers suggest a very strong link and relationship between the volunteers and the Community Development Officer. To a certain extent, the officer's commitment and devotion to the programme papered over any cracks in the process. It is acknowledged that having a dedicated resource solely focused on the programme is unsustainable but it is recommended that mitigating actions are taken to ensure risks to the programme are minimised and volunteers are supported.
- A focus should be placed on capturing outcomes achieved for volunteers.

The gathering of evidence

TO PROVE THE BENEFIT TO PEABODY

The original programme was never established on the basis that specific outcomes had to be delivered. It is vital that, if the programme is to continue, a set of agreed target outcomes are established. Ultimately the priority for Peabody should be to put in place an evaluation system that allows Peabody to test empirically if PST is value for money from Peabody's perspective. Peabody's mission is to *“To help people make the most of their lives by: providing good quality*

affordable homes, working with communities and promoting wellbeing". PST needs to evidence that it is contributing to this mission and, to that end, mechanisms need to be put in place to assess the impact of PST on:

- The state of the local housing stock
- The level of rent arrears
- Local people's sense of "belonging". There are many different measurement approaches being used by different projects across the country that seek to measure people's health, wellbeing and sense of connectedness. Peabody should agree which of these measures they will adopt as a mechanism for measuring the impact of programmes such as PST across the organisation.
- Peabody and the PST programme team should review the monthly reports that are currently produced and agree a series of measures and a dashboard for their presentation within the monthly reports.

TO PROVE THE BENEFIT TO OTHERS

Gathering data from other statutory providers (GP Practices, other health organisations, LB Bexley etc.) has proved a challenge for the PST team, throughout the programme. If Peabody chooses to continue to support PST, it is recommended that a steering group is set up with responsibility for overseeing the programme. A key part of this steering group's remit would be to agree:

- what outcomes PST aims to deliver?
- how impact will be measured and tracked?
- where will the data for measuring impact come from?
- with relevant organisations, that they will commit to providing data in a timely manner.
- with relevant organisations that they will attend programme steering group meetings.
- that specifically, data must be gathered and reported on relating to age, ethnicity and gender.

Ultimately, as many of the benefits of PST fall to organisations beyond Peabody, Peabody's aim should be to work, in partnership with other benefiting organisations, to track where benefits are accruing, with the intention of agreeing a partnership funding approach in the future. It is recommended that the following key partners should be part of the steering group:

- Peabody
- Lakeside Medical Practice
- Bexley CCG
- LB Bexley – would need to represent
 - Public Health

- Benefits
- Housing
- Social care
- Local DWP office
- RB Greenwich (if programme extends to Greenwich)
- Gallions Reach Medical Practice (if programme extends to Greenwich)
- Greenwich CCG (if programme extends to Greenwich)

Our recommendation is that the key measures that PST seeks to track are as follows:

Those of benefit specifically to Peabody:

1. Condition of housing stock and repairs being undertaken
2. Rent arrears
3. Anti-Social Behaviour
4. Wellbeing score of clients should be measured at initial assessment and then after six months – Peabody (if not done already) should select a model for measuring wellbeing across different programmes that they support.
5. Income maximisation
6. Uptake of employment advice services by tenants / number of tenants into work
7. Levels of volunteering by tenants
8. Tenants being better informed and having access to the information they need
9. Building a stronger more resilient community

Those of benefit to other organisations

1. Volunteering hours delivered by PST volunteers
2. Employment created for both volunteers and clients
3. GP Visits
4. Hospital episodes
5. Levels of drug prescriptions from Lakeside and other practices if programme extends
6. Unnecessary A&E Visits

Expanding the service

1. Expanding within current nominal boundaries

There is no sense that PST has exhausted the provision of advice and support to the residents of Thamesmead that are registered with Lakeside, attend Lakeside or other venues from which PST operates. The limitation of the programme currently is the capacity and budget to recruit, train and

support additional volunteers. Our recommendation is that, following this report, a meeting is held with other partner organisations to explore the potential to extend the presence of volunteers at the current delivery sites. As part of this discussion there should be consideration for joint funding of this extension.

It is also essential that any plans, with respect to developing the PST programme, are dovetailed with the emerging plans for the social regeneration of Thamesmead as part of the overall Thamesmead regeneration programme.

2. Expanding into Greenwich and Bexley

Both Greenwich and Bexley CCGs and the respective council Public Health Departments have expressed interest in PST and are keen to support the programme and understand how some, or all, of the elements of PST could be applied to new areas. In particular Gallions Reach (the GP practice in Greenwich close to Thamesmead town centre) wants to replicate aspects of the service that is provided from Lakeside.

In both council areas, there are plans underway to trial the impact of Social Prescribing projects which are similar in aspiration to PST. The key differences between PST and these other programmes are that PST:

- Is led and financed from the third sector
- Relies on volunteers to carry out initial assessments as opposed to paid staff
- Is underpinned by a philosophy that often it is a couple of relatively simple obstacles that need to be addressed rather than a need for ongoing therapeutic or mentoring support
- Generates (we understand) significantly greater number of referrals
- Has an established brand
- Is underpinned by a powerful coalition of pre-assembled partners

3. Expanding more broadly across other Peabody communities

Our assessment is that PST has been relatively isolated in terms of awareness of the programme across the rest of Peabody. The establishment of the Peabody Community Foundation (PCF) and other changes within Peabody (specifically staff changes within Trust Thamesmead) provide the opportunity for closer coordination and cooperation across the organisation.

As part of the bedding in of the PCF it is recommended that a group is set up to review this report and other evidence to assess the applicability of the PST model in other localities.

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APPENDIX ONE

Questionnaire used by volunteers

Date:	Venue:	Referring Officer:	Organisation:	Reference : __ __
First Name:			Number of adults in household:	
Last Name:			Number of children (under 18) in household:	Any under 5 []
Address Line 1:			Borough (Greenwich / Bexley):	Greenwich [] Bexley []
Address Line 2:			Gender:	Male [] Female []
Post Code:			Do you have access to public funds:	Y [] N []
Can we write to you at this address?	Y [] N []		Landlord:	Private [] Social []
Telephone/Mobile:			Name of landlord:	
Can we leave a message?	Y [] N []		Do you consider yourself to have a disability?	Y [] N [] Prefer not to say []
Email:			Ethnicity – please state	
Date of Birth:				
Please answer the following questions with a YES or NO				
Do you currently have any money worries and in need of debt advice?				
Are you at risk of? Or have				
Eviction or homelessness [] Bailiff action [] Court date/hearing [] Utility disconnection []				
Would you like to attend a smart money workshop?				
Are you looking for a low cost loan?				
Do you need any advice about any of the following?				
Rent [] Bills [] Benefits [] Housing []				
Are you interested in saving?				
Do you lack any basic furniture items? I.e. beds or something to sit on				
Are you going to struggle to feed yourself/your family over the coming week?				
Would you like some advice on how to find employment or volunteering?				
Employment [] Befriending []				
Do you need advice regarding a disability?				
Housing [] Employment [] Benefits [] Other []				
Do you need information or advice about immigration?				
Do you need support with your mental health?				
Do you need support with English language skills?				
Do you need support with numeracy & literacy skills?				
Do you need support with getting physically active?				
I, the undersigned, give consent for the details presented in this form to be passed on to the relevant organisations of the Positive Steps Thamesmead partnership and for those partners to contact me to provide advice and support.				
Signature				
Signature of Referral Officer				
Any other comments / Do you need any other advice? Please specify:			Can we contact you for feedback? Y [] N []	

Office Use Only	
Money worries and debt advice	Fair Money Advice FF []
Risk of eviction/homelessness, Bailiff action, Court date/hearing or Utility Disconnection	Fair Money Advice FF []
Smart Money Workshop	Fair Money Advice FF []
Advice about bills or rent	Fair Money Advice FF []
Low cost loan	Fair Personal Loans FF []
Advice about benefits or Housing	Gallions []
Referral for saving	Credit Union []
Referral for lack of furniture	Furniture Bank []
Food Bank voucher given/ Food bank voucher number	Voucher Given [] Voucher Number ____ - ____
Referral for employment	Building Futures []
Referral for advice on mental health issues	Bridge Mental Health [] Recovery College Greenwich []
Referrals for ESOL	Learning centre Bexley [] Greenwich Community College [] Other [] Please Specify:
Referrals for Numeracy/Literacy skills	Learning centre Bexley [] Greenwich Community College []
Referrals for physical activity	Now's the Time []
Referrals for Children's Centre	Greenmead [] East CC []
Referrals for immigration advice	Lewisham Refugee & Migrant Network []
Citizens Advice Bureau	Citizens Advice Bureau [] Benefits [] Housing [] Other []
Greenwich Association for Disabled People	Benefits [] Housing [] Employment [] Other []
Other (please state)	

Appointment	Date/Time	Attended (Y/N)

APPENDIX TWO

Example referral form sent to Advice Provider

First Name	Last Name	Household Mailing Address	Mailing Post Code	Can we write to you at this address?	Mobile	Household Phone	Can we leave a message?	Email	Number of adults in household	Number children in household (under 18)	Under 5	Borough	Gender	Do you have access to public funds
xx	xx	xx	xx	Yes	xx		Yes	xx	1		0	Bexley	Female	No
xx	xx	xx	xx	Yes	xx		Yes	xx	2		0	Bexley	Female	No
xx	xx	xx	xx		xx		Yes	xx	3		0	Bexley	Female	No
xx	xx	xx	xx	Yes	xx		Yes	xx	1	1	1	Greenwich	Female	No
xx	xx	xx	xx	Yes	xx		Yes	xx	2	1	1	Greenwich	Male	No
xx	xx	xx	xx	Yes	xx		Yes	xx	3	4	1	Greenwich	Male	No
xx	xx	xx	xx	Yes	xx		Yes	xx	1	1	0	Greenwich	Female	Yes
xx	xx	xx	xx	Yes	xx		Yes	xx	5		1	Greenwich	Female	No
xx	xx	xx	xx	Yes	xx		Yes	xx	3		0	Greenwich	Male	No

Landlord (P/S)	Landlord	Disability	Fair Finance referral for money worries	Fair Finance referral for eviction etc	Fair Finance referral for SMW	Fair Finance referral for bills or rent	Fair Finance referral for low cost loan	Gallions referral for benefits/housing	Credit Union referral for savings	Furniture Bank referral	Food Bank voucher given	Food Bank voucher number	Building Futures referral for employment	Bridge Mental Health referral
Social	Peabody	No	1	1	1	1	0	0	0	0	1	xx	0	0
Social	Peabody	No	1	0	0	0	0	0	0	0	0		0	0
Private			1	0	0	0	0	0	0	0	1	xx	1	0
Private		No	1	1	0	1	0	0	1	0	1	xx	0	0
Private		No	1	1	0	0	0	0	1	0	0		1	0
Private		No	1	0	0	0	0	0	0	0	0		0	0
		No	0	1	0	0	0	0	0	0	0		0	0
Private		No	0	0	1	1	0	0	0	0	0		1	0
Private		No	1	0	0	0	0	0	0	0	0		1	0

Recovery College referrals	Learning Centre referral for ESOL	Greenwich College referral for ESOL	Divine Twig referral for ESOL	Learning Centre referral for Num/Lit	Greenwich College referral for Num/Lit	Divine Twig referral for Num/Lit	Now's the Time referral	Greenmead Children's Centre referral	East Children's Centre referral	Lewisham Refugee & Migrant Network Referral	CAB referral for benefits	CAB referral for housing
0	0	0	0	0	0	0	0	0	0	0	1	1
0	0	0	0	0	0	0	0	0	0	0	1	0
0	0	0	0	0	0	0	1	0	0	1	1	0
0	0	0	0	0	0	0	0	0	0	1	1	1
0	0	0	0	0	0	0	0	0	0	1	1	1
0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	1
0	0	0	0	0	0	0	0	0	0	0	1	1
0	0	0	0	0	0	0	0	0	0	0	0	0

APPENDIX THREE

Example extract of monthly report

Positive Steps Thamesmead (PST) Monthly Report – December 2016

Summary Narrative

82 referrals were made by Positive Steps in December with a large number of these going to CAB, GAD and Lewisham Refugee & Migrant Network.

The evaluation of the programme is well underway and is expected to be completed by early March 2017.

Venue	Monday	Tuesday	Wednesday	Thursday	Friday
Lakeside Health Centre	PST 10.30 – 12.30 GAD 13.00 – 17.00	Fair Finance Drop In 9.30 – 13.00 Mind In Bexley Drop In 10.00 – 12.00	CAB 9.30 – 13.00	PST 10.30 – 12.30 LR&MN 10.00 – 14.00	PST 10.30 – 12.3
Waterways Children's Centre			PST 3 rd of the month 10.15 – 12.15		
Windrush School (Term time)					PST 3 rd of the month 14.30 – 15.30
Emmanuel Church Food Bank		PST 10.00 – 13.00			

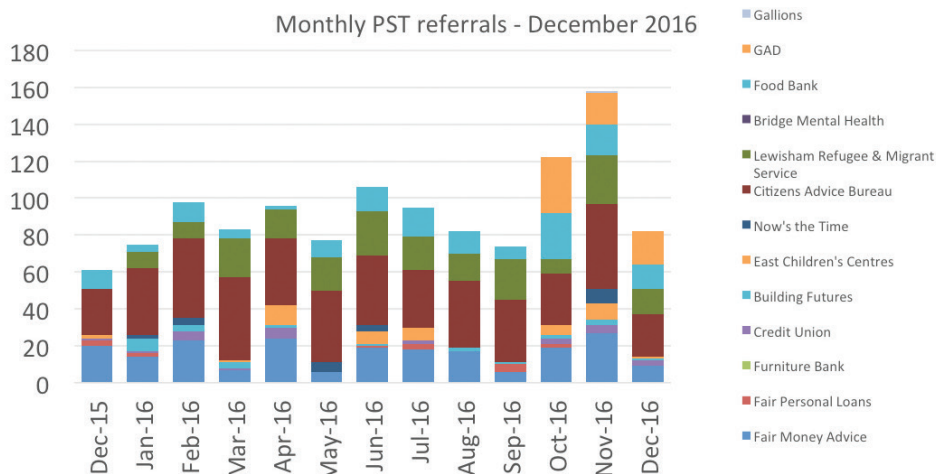
CAB = Citizens Advice Bureau

GAD = Greenwich Association of Disabled People

LR&MN = Lewisham Refugee and Migrant Network

PST = Positive Steps Thamesmead

Referrals by Month



APPENDIX FOUR

APF Interview Notes

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- 1.
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|---|--|--|
| <p>Provider:
Greenwich Association for Disabled People (GAD)</p> <p>Representative:
Alan Kerr</p> <p>Date of interview:
25/11/16</p> | <p>GAD are an association for disabled people. They never turn anyone away but as they are funded by RB Greenwich the focus is Greenwich. GAD has six staff. Alan Kerr (AK) is based at Lakeside Medical practice one afternoon every week. He sees people on an appointment basis and Peabody makes the appointments for him. They are funded to provide this service by Peabody and it costs £6,000 per annum. Peabody funding provides for 100% in year one, 75% in year two and 50% in year three.</p> <p>GAD have c. 220 people on their books at any one time - around 16 from Thamesmead. At Lakeside</p> | <p>they tend to see people once and then they will have dealt with the issue. AK provides reports to Peabody about the people he has seen on a weekly basis. They will have seen 100+ people since the programme started in April 2016 – almost everyone they have seen has had a genuine need and they have been able to send them away having supported them typically covering issues such as:</p> <ul style="list-style-type: none"> • Housing • Disability Rights • Help with Disability Living allowance and Employee Support Allowance |
|---|--|--|
-
- 2.
- | | | |
|---|--|--|
| <p>Provider:
Lewisham Refugee and Migrant Network (LRMN)</p> <p>Representative:
Andrew Jordan</p> <p>Date of interview:
25/11/16</p> | <p>LRMN provide immigration, welfare, housing and other advice. It started in 1991 in Deptford and has one FTE advisor plus three other staff.</p> <p>LRMN are funded through a mixture of grants, the main ones being Big Local and Trust for London. They have been providing services for Peabody since August 2015.</p> <p>Andrew runs a weekly surgery on Thursday afternoons at Lakeside Medical Practice. All appointments are set up by the PST administration staff. Currently Andrew sees c. six people every week. Peabody's only contribution is towards travel costs.</p> | <p>Many of the people they see are members of the community who have "no recourse to public funds". Often these are highly vulnerable clients, many being single parents. Whilst they have access to health and education services their status excludes them from access to other public services such as benefits and housing. They are also legally prevented from working. Often these circumstances and their inability to return to their country of origin leave them in limbo and highly vulnerable to exploitation.</p> |
|---|--|--|
-
- 3.
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|---|--|--|
| <p>Provider:
Credit Union</p> <p>Representative:
Kay Campbell</p> <p>Date of interview:
21/10/16</p> | <p>Credit Union provide saving and loan schemes to local people. The Credit Union was originally encouraged to come to Thamesmead as there was no bank operating in the area. They find enormous benefit from being part of the APF. As far as PST is concerned they have received very few referrals. Kay's expectation</p> | <p>is that the people being seen by PST are too desperate to be able to be helped by the Credit Union. For someone to take advantage of a Credit Union loan they need to be able to make regular savings. Even very small savings are usually beyond the resources of the clients that PST sees.</p> |
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4.

Provider: Reinstate	Reinstate provide employment and associated support for people with mental health issues, typically this relates to support to: stay in employment, find employment or benefit from additional training.	Reinstate, whilst an important and regular attendee at the Thamesmead APF, do not receive any referrals from PST. All Reinstate referrals come from Mind with whom they are contracted to provide services.
Representative: Kevin Winch		
Date of interview: 24/10/16		

5.

Provider: Gallions / Peabody	Historically, through PST, clients (who were Gallions' residents) were referred to Mike Hemp, and his team, for advice around housing and benefits issues. According to Mike, PST has been exceptional for the ease with which	clients can be referred to helpful services. Now that Peabody has set up a contract with CAB to attend Lakeside every week there are fewer referrals coming through to his team.
Representative: Mike Hemp		
Date of interview: 17/11/16		

6.

Provider: Thamesmead Food Bank	Thamesmead Food Bank is part of the Trussell Trust network. Their aim is to provide food for three days to clients who are struggling to feed themselves or their families. They have 16 foodbanks across Greenwich.	In Thamesmead, there are two centres (in Emmanuel Church and Disraeli Close). There is a constant demand for food parcels and since April 2014 the foodbank has distributed over 235 food parcels to people in Thamesmead.
Representative: Pastor Bumni Omidiran		
Date of interview: 31/10/16		

7.

Provider: Bexley Citizens Advice Bureau (CAB)	Bexley CAB is based at Lakeside one day a week. Peter Holt who is the key worker has appointments set up for him by the PST admin team. Currently they are seeing c. six people every week. They tend to deal with the client's issue there and then and aim where possible to not have to refer them on. The key issues they tend to deal with are: Housing (being allocated housing), benefits, debt (to a certain extent but debt issues are dealt with by Fair Finance).	In Roland's view, they are seeing 300 people a year who would not otherwise be seen. Their office in Erith has seen no reduction in demand since the start of the service funded by Peabody. Essentially they are operating continually at full capacity at both sites. This suggests there remains latent demand.
Representative: Roland Haigh		
Date of interview: 25/11/16		

8.

<p>Provider: Building Futures</p> <p>Representative: Sharon Hawe-Jones</p> <p>Date of interview: 25/11/16</p>	<p>Building Futures provide employment and training advice. They have also won funding, as part of the European Social Fund "Love London Working". They have three FTE staff and two admin workers and the manager SHJ.</p> <p>They see c. 50 people a week and refer onto PST about four to five people a week. In the early days of PST they used to get a lot of referrals from PST but recently these have dried up.</p> <p>Building Futures were very keen to be part of the PST programme, as historically there was nowhere to refer people to. Typically, there are issues people need to resolve</p>	<p>before they are "employment ready" and PST has provided a valuable referral point to help address these other issues. They tend to refer on people for three main issues (housing, debt and immigration). They suspect that they see a lot of people with mental health issues but that the client won't reveal that due to fear that it will affect their chance of securing employment.</p> <p>Building Futures has a target of registering 500 people a year and PST is helping with that. Of the 500 they register they have a target of securing employment for 345 (69%) a year and they are on track to deliver that.</p>
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9.

<p>Provider: Now's the Time</p> <p>Representative: Steph Turner</p> <p>Date of interview: 24/11/16</p>	<p>Now's the Time provide physical activity sessions for the residents of Thamesmead. This is a three-year programme ending in October 2017 that is 50% funded by Sport England with matched funding from a collection of other organisations including: LB Bexley, RB Greenwich and Peabody. Their total budget is c. £500k over three years. They have three staff and then commission</p>	<p>different people to deliver different projects from different venues. Most events are charged at no cost or £1.</p> <p>They have c. 2,500 members and c. 400 attend on a monthly basis</p> <p>Currently they get very few referrals from PST. Most come from word of mouth, self-referral or the Now's the Time website.</p>
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10.

<p>Provider: Fair Finance</p> <p>Representative: Shari, Jahanara Khanom, Soomaiya Syeda</p> <p>Date of interview: 31/10/16</p>	<p>Fair Finance has been working with Trust Thamesmead / Peabody since 2001. They provide loans that are cheaper than other "pay day" loan companies. Typically, these are based on interest rates at c. 100% APR. They also provide advice for managing finances.</p> <p>Fair Finance is a "social business" based in London. They were approached by Peabody to set up a service in Thamesmead.</p>	<p>They currently receive a grant of £20,000 pa to run the service from Peabody. The current contract ends in March 2017.</p> <p>Fair Finance is a key partner in the PST programme. At the very earliest stage, clients struggling with debt and financial illiteracy were identified as being a major cohort of those non-biomedical cases being seen by GPs.</p>
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APPENDIX FIVE

Example case studies

Case Study #1: Lorna, supported by Fair Finance

We emailed Lorna all the relevant information and our cover letter and a Financial Statement for her to complete and take with her to court. Lorna called us after her court hearing with good news. Her eviction was stayed and her new arrangement was to pay for her shortfall plus £3.80 toward her arrears, which was less than what we had proposed prior to the court hearing! This was a good outcome because Lorna was able to keep her home and save money. The risk of homelessness was a huge worry for her because of the impact it would have on her daughter's mental health.

Case Study #2: Alison, supported by CAB

Alison had returned to the local area to live with her Nan (aged 80+) and her uncle. As a result of a stroke her Nan was bedridden. Her uncle was suffering from mental ill health and didn't want her in the house.

Alison herself suffers from depression, was receiving ESA and appeared vulnerable and scared.

A referral was made to the local Women's Aid to ascertain more information on Alison's domestic situation, and she was seen within a week. As a result of this referral CAB supported Alison to make a homeless application on the basis that she was subject to domestic abuse and was vulnerable due to her health issues. Within one day of her application Alison was placed in temporary accommodation by the local authority.

Case Study #3: Ifeoma, supported by Fair Finance

Ifeoma and her husband were facing many issues which caused a lot of stress and anxiety. Not being able to provide for their children had an emotional toll and left her in tears when she explained that she could not buy food. We referred Ifeoma for immigration advice in Thamesmead in order to understand the options available regarding their right to remain. The immigration advisor could only suggest finding another sponsor for her husband. We contacted Coram Children's Legal Centre for further information on the phone as we needed further clarification on Ifeoma's options and where they could receive more in depth advice. We learned that if the client has no good grounds to not return to her country, there isn't much she can do. When I spoke to the client to warn her that the council will want to know what her grounds were, I asked her what she would say. At this point Ifeoma finally realised that the reality of the situation is that she may have to return to her country. This was something that she had to accept, however upsetting it was. Providing a realistic representation of the situation was important so that the client could think about her future plans appropriately.

Case Study #4: Rosemary, supported by Fair Finance

Rosemary was a 74-year-old widow living alone since the death of her husband. She visited Fair Money Advice as she was struggling to meet her minimum monthly payment of £300 towards a credit card balance of £12,250.

Rosemary was in receipt of pension credit and a private pension and was up to date with all her priority bills. Rosemary was using money allocated for food and household shopping towards the credit card's minimum payment, which left her with no money for basic expenses such as food and she often had to use the credit card again for these needs.

During Rosemary's appointment, she disclosed that she and her husband had an abusive marriage. He had kept all of her personal documents in his office, and after his passing Rosemary found all her personal documents had been shredded. Rosemary had to request a new birth certificate.

When Rosemary requested this, she found out that she had been adopted and it came as a huge shock to her.

We successfully assisted Rosemary to apply for a Debt Relief Order as the debt would not be cleared within a reasonable amount of time given her current and future financial prospects. She will be cleared of any liability by the end of next year. When Rosemary's case was nearing to a close some things in her personal life had greatly improved. Some old colleagues that she worked with years ago found her sitting at Thamesmead Town Centre and invited her to join them for lunch- she told us how much fun she had with her old colleagues and was grateful to have friends again.

Case Study #5: Abena, supported by Fair Finance

When we requested that the enforcement agent put the account on hold, the enforcement agent asked us to contact the office and the office would ask us to contact the enforcement agents. This happened several times and we were never provided with a helpful response. We believe it is a delaying tactic to allow enforcement agents to take money from clients in the interim. As it was proving difficult to get the account to be put on hold and sent back to the council we put in a complaint to the council and the enforcement agents.

We also found out that as Abena was a spouse of a student and had no recourse to public funds, she should have been exempt from paying council tax. We sent proof to the council that Abena had no recourse to public funds and no right to work. We did not receive a response promptly so we had to send a reminder email. As we still had not received a response we sent another email stating that we would escalate it to the Ombudsman because the Local Authority were not cooperating. We finally received a response that the accounts had been taken back by the council; the debt was written off as our client was exempt; that any payments the client made would be refunded. Our client received a refund of £1,511"

Case Study #6: Ariane, supported by CAB

Ariane had recently arrived in the UK from Holland with her son aged 8, was living with friends and doing an online training course. She was seeking advice on employment, housing, benefits and schooling for her son, which she was provided with over several months. This resulted in her commencing full time work, applying for tax credits and securing a place for her son in a local school.

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**Positive Steps
Thamesmead:
the story so far**