# Manchester City Council Report for Information

**Report to:** Economy Scrutiny Committee – 7 September 2016

**Subject:** Working Well update

Report of: Head of Work and Skills

### **Summary**

Working Well is an employment support programme delivered across Greater Manchester, designed and jointly funded by the Greater Manchester Combined Authority (GMCA) and the Department for Work and Pensions (DWP). The Working Well Pilot supports Employment Support Allowance claimants who have completed two years on the Work Programme without moving into employment. The Working Well Expansion is a separately commissioned programme which builds on the Working Well Pilot to support a wider range of benefit claimants, and began taking referrals in April 2016.

This paper provides an update on both Working Well programmes. It also provides an update on plans for the DWP Work and Health programme, and arrangements for GMCA co-commissioning of the programme as part of the GM Devolution Agreement.

Representatives from Big Life and the Work Company will be in attendance as the providers of the Working Well programmes in Manchester. Big Life and the Work Company have also provided some client case studies which are attached in the appendices. There will be a representative from New Economy to discuss the future commissioning of the Work & Health programme.

### Recommendations

Members are requested to note and comment on progress to date.

Wards Affected: All

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# Background documents (available for public inspection):

Working Well Economy Scrutiny Paper - 24<sup>th</sup> September 2014

Working Well Economy Scrutiny Update - 11<sup>th</sup> March 2015

Working Well Economy Scrutiny Update - 15<sup>th</sup> October 2015

SQW Annual Report and Interim Evaluation of Greater Manchester Working Well Programme – available on request

### 1.0 Introduction

- 1.1 The Working Well Pilot was co-designed between the Greater Manchester Combined Authority (GMCA), Central Government and the Department for Work and Pensions (DWP) to test whether a locally developed and delivered model of welfare to work can deliver better outcomes for Greater Manchester residents with multiple barriers to work, when compared with nationally commissioned programmes such as the Work Programme. Drawing from good practice in other reform programmes (such as Troubled Families), Working Well has been designed around the principles of intensive and holistic support from a key worker who draws on, sequences and integrates other public service interventions to support a person's journey back to work.
- 1.2 Ongoing evaluation of the Working Well Pilot was built into the commissioning of the programme and is of central importance. The evaluation role is delivered by the research agency SQW who work closely with the Working Well providers both for the pilot and for the expanded programme. This has enabled learning and best practice to be applied to the Working Well Expansion, which incorporates larger numbers of claimants and a wider range of benefit types.
- 1.3 The Working Well Expansion is a separately commissioned programme to the Working Pilot, and is built around a wider 'eco-system' of provision. As well as working closely with local partners in the same way as the Working Well Pilot, additional services to support clients with mental health issues and skills have been commissioned alongside the providers of the Working Well keyworker service. This builds on the findings that mental health issues and low skills were amongst the primary barriers for clients to move into work. Fundamentally, the services are expected to take a co-case management approach to supporting clients to ensure that their support is coordinated and sequenced appropriately. More detail on these services is in sections 5 and 6 below.
- 1.4 The DWP announced its intention to commission a national Work and Health programme in early 2016. The Work and Health programme will form part of a new package of support for benefit claimants delivered by Jobcentre Plus alongside commissioned partners. As part of the GM Devolution deal, GMCA will be co-commissioning the Work and Health programme in partnership with DWP, allowing for a local approach to supporting residents and integration with local partners and structures, and using the evaluation of Working Well to deliver the most effective approach. Please see section 9 for more information.

# 2.0 Working Well Pilot in Manchester

2.1 The Working Well Pilot supports Employment Support Allowance (ESA) WRAG (Work Related Activity Group) claimants who have exited the Work Programme after two years without moving into work. All referrals are made by Jobcentre Plus Work Coaches. The programme provides up to two years of support for clients to move into work, and a year of in-work support. The contract for the service is split between two providers across GM - Big Life in Manchester, Salford and Trafford; and Ingeus across the rest of GM. Referrals

from Jobcentre Plus started on 26th March 2014 and ended on 31<sup>st</sup> March 2016.

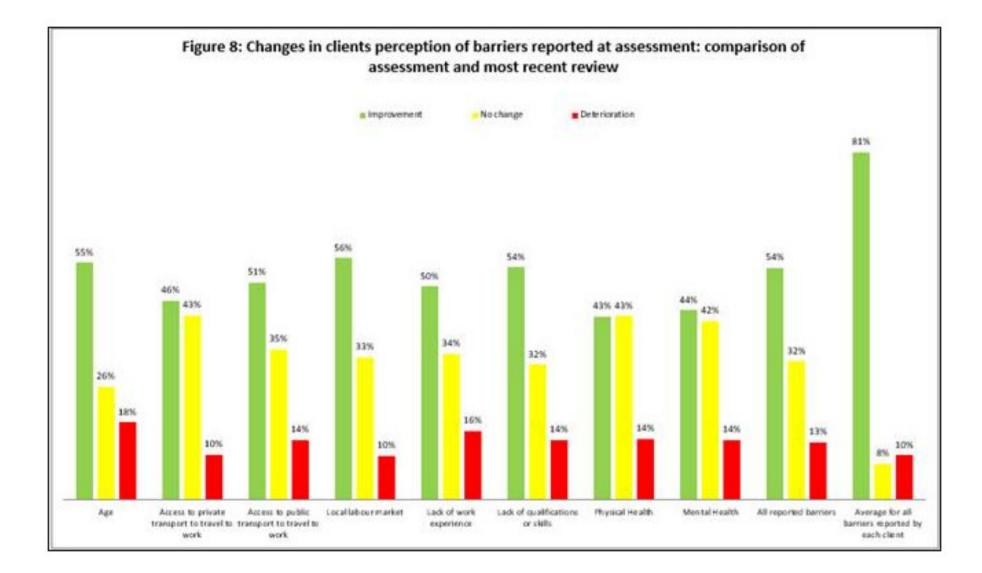
- 2.2 Big Life also subcontract elements of their service in Manchester to Pathways CIC, who have an established presence in Manchester through delivery of the Fit for Work service and are experienced in supporting people with health problems back into work.
- 2.3 Big Life's delivery model helps people with health needs to live better lives and achieve job outcomes through a combination of Motivational Interviewing and Supported Employment techniques. Each client is allocated a key worker who helps them set goals to improve their resilience and motivation to change, supporting them to identify actions and changes to their behaviour which will help them to achieve these goals. The aim is for clients to see employment as an achievable goal, commit to seeking work, and identify an appropriate job goal for their skills, experience, circumstances and aspirations.
- 2.4 Clients are regularly assessed and placed into one of three groups depending on how far they are from moving into employment, with tailored support for each group. Specialist Employability Support Officers assist those closer to employment with 1:1 interventions, linking them with opportunities including job vacancies, work placements, work experience and apprenticeships. Once in work, clients receive ongoing support as needed to ensure that they can sustain employment. The key workers can also assist employers in their recruitment and management of the client.
- 2.5 For clients who are coming to the end of their two years on the programme and have not moved into work, Big Life key workers identify a client's ongoing needs and help them move on to other support. The City Council will assist Big Life with clients leaving the programme who have particularly complex needs through the Working Well Integration Board, drawing on the expertise of partners (see section 8).
- 2.6 Big Life regularly assess client barriers at the beginning and during their time on the programme. Many of the clients starting the programme have severe and multiple barriers to employment, having already been supported through two years on the Work Programme. The table below shows the main barriers for Manchester clients where they reported that the barrier is 'severe'.

Barrier	% clients reporting as a severe barrier
Mental health	71%
Physical health	65%
Lack of qualifications/skills	49%
Access to public transport to travel to work	47%
Access to private transport to travel to work	39%
Bereavement	35%
Age	30%
Local labour market	28%
Debt/finances	26%
Housing issues	22%
Chaotic family lifestyle	19%
Substance misuse	18%
Lack of work experience	17%
Divorce/relationship break-up	15%
Family support	13%
Convictions	13%
Care responsibilities for children	10%
Care responsibilities for other family members or non-family individuals	8%

# 3.0 Working Well Pilot – Progress Update

- 3.1 The Working Well Pilot was expected to support 5,000 clients across Greater Manchester, with 1,200 referrals anticipated in Manchester. When the programme closed for referrals in March 2016, Big Life had received 1,227 referrals in Manchester, of which 1,138 clients have formally 'attached' to the programme.
- 3.2 The Working Well Pilot has a GM target to move 20% of clients into work and 15% of clients sustaining work for longer than a year. Job outcome profiles have been developed for the two contract areas based on when clients join the programme and when we would expect them to move into work. This enables ongoing monitoring of the programme to ensure that outcomes are on track.
- 3.3 By the end of July 2016, 387 job outcomes have been achieved across the whole of GM against the expected profile of 459. For Manchester, 76 job outcomes have been achieved against an expected profile of 113. In Manchester job outcomes have been slower than anticipated, which has also been the case in Salford and Trafford. Big Life are working closely with Local Authorities and the GMCA Working Well Programme Office to address this. The Manchester Working Well Integration Board (see section 8), and separate case management meetings, will help analyse and address clients' barriers and address any system issues which may be causing problems in getting clients the support they need. Big Life are actively linking with opportunities in the city including apprenticeship and work experience placements.

- 3.4 A higher than expected number of clients have left the Working Well Pilot early without moving into work. This has had an effect on the job outcomes achieved against the job profile. One of the main reasons for this is that clients have been re-assessed by DWP and moved on to the ESA Support group due to deteriorating health conditions. Other reasons include clients moving out of the GM area or going to prison. Whilst Big Life encourage clients to remain on the programme where appropriate, clients will be under different requirements at Jobcentre Plus. A total of 194 clients in Manchester have left the programme early, accounting for 36% of all clients leaving the Working Well pilot early across GM.
- 3.5 Big Life regularly monitor how clients' perception of their barriers change during the programme, highlighting that whilst job outcomes may be lower than expected, clients are moving closer to work. The table below shows the change in the most reported barriers for Manchester clients.



# 4.0 Working Well Expansion in Manchester

- 4.1 The Working Well Expansion key worker service was commissioned across GM with the same two contract areas as the pilot. The Work Company was awarded the contract for Manchester, Trafford and Salford; and Ingeus was awarded the contract for the rest of GM. Referrals opened to the programme in April 2016.
- 4.2 In Manchester, The Work Company has subcontracted Big Life and Armstrong Works to deliver the full service in certain areas as follows:

Jobcentre Plus office	Provider
Alexandra Park	The Work Company
Cheetham Hill	The Work Company
Chorlton	Big Life
Didsbury	Armstrong Works
Longsight	Armstrong Works
Newton Heath	The Work Company
Openshaw	Armstrong Works
Rusholme	The Work Company
Wythenshawe	Big Life

- 4.3 In addition, Pathways CIC are subcontracted to deliver activity specifically around mental health support and are leading on the GP referral route (see section 5).
- 4.4 The Working Well Expansion is open to a wide range of benefit claimants via referral from their Jobcentre Plus Work Coach. Eligible clients include Jobseekers Allowance, Employment Support Allowance (WRAG and Support group), and Lone Parents on Income Support. Some referrals place a mandatory requirement on the client to attend their first meeting with the Working Well provider, whilst others are entirely voluntary. However after the first appointment, it is at the client's discretion whether they wish to continue with the programme, meaning that the provider must emphasise the benefits of the Working Well offer and encourage the client to take part.
- 4.5 The Working Well Expansion provider will allocate each referred client a key worker who will work closely with them through their journey. The client will be invited to attend initial engagement sessions which could include 1-1 or group activities such as sport or art. Alongside this the key worker carries out appropriate assessments with the client to ascertain their barriers and needs, and works with them to identify their goals and priorities. The key worker will look to address the issues which are causing the client the most immediate problems, and identify a package of interventions for the client, drawing on partners and other services within the Working Well 'eco-system' as needed (see sections 6-8). Once clients move closer towards work, they can undertake specific activity to prepare them for job vacancies, work placements and apprenticeships.

- 4.6 Across GM, 4,998 referrals have been made as of end of July 2016, which is slightly lower than the expected volume at this point of 5,325. In Manchester there have been 921 recorded referrals to the programme, however a large proportion of GM referrals have not yet been seen by the provider and are therefore not matched against a local authority area, so this figure may be higher in reality. Currently the breakdown of referrals in Manchester is fairly evenly split between Jobseekers Allowance, Lone Parents on Income Support and Employment Support Allowance. The highest proportion of referrals in Manchester is currently JSA claimants who have completed the Work Programme.
- 4.7 The Work Company, Big Life and Armstrong Works are working closely with Jobcentre Plus Work Coaches to ensure that the programme is well marketed to clients so that they understand the benefits of the programme and can see the value in taking part. This will maximise 'attachment' rates onto the programme. As the programme progresses, further analysis will be available on the barriers to work that clients on the programme are reporting, and how the providers are addressing these.

## 5.0 Working Well Expansion – GP referral route

- 5.1 The GM Local Authorities and GMCA recognise the important link between health and work. An example of a service specifically designed around this principle is the Healthy Manchester service, commissioned by the City Council and delivered by Pathways CIC, which supports patients referred by GPs where the GP considers that moving into work would help improve the client's health problems.
- 5.2 The GP referral route into Working Well builds on this activity. Manchester, alongside Tameside, Wigan and Bury, is piloting this approach for up to 1,000 clients across the four areas. Identified GP surgeries within these areas can refer patients to Working Well where the patient is out of work and the GP feels that they would be in a position to move into work with some intensive and holistic support. Each of the four Local Authority areas has established a Working Well 'GP Link Worker' role who works within the GP surgeries and can discuss the service with the patient, referring on to Working Well if appropriate. The referral must still be checked by Jobcentre Plus to ensure that they are in receipt of an out of work benefit, however the DWP has agreed that most of the Working Well eligibility criteria can be relaxed for these referrals (the primary exception being if they are already on the Work Programme).
- 5.3 The Working Well GP Link Worker role in Manchester is undertaken by Pathways CIC, who already have well established relationships with GPs across the city. Pathways are also subcontracted by the Work Company to deliver the full Working Well service for these clients, and therefore patients referred by GPs receive a seamless service.
- 5.4 It is anticipated that 400 clients in Manchester will be referred through this route by the end of the Working Well programme. The referral route went live in June 2016 and outcomes will be analysed as clients begin to move through the programme.

## 6.0 Talking Therapies

- 6.1 The Working Well Pilot highlighted that mental health problems were the primary barrier to clients moving into work. The important link between mental health and employment, and the evidence that work is good for health, indicated that a more coordinated approach between the two services could be tested to see if outcomes for clients could be improved.
- 6.2 The Talking Therapies service was commissioned separately but as part of the wider Working Well 'eco-system'. It is delivered by Greater Manchester West Mental Health NHS Foundation Trust. The service provides access solely to clients on the Working Well Expansion to IAPT therapies for mild to moderate mental health issues. It is partly funded through the government's Mental Health Trailblazer programme which aims to improve employment and health outcomes for people on out of work benefits who face barriers due to a common mental health condition.
- 6.3 The Talking Therapies service is delivered from centres across GM, colocated with the Working Well key workers as well as based in GPs surgeries and other public service providers. It is important that clients can easily access the service from their home and do not face barriers to accessing the service, such as childcare or travel costs (which can be reimbursed by the service).
- 6.4 Clients are assessed for mental health issues by their Working Well key worker, who have received training from the Talking Therapies service in assessing clients, and as appropriate will make a referral to Talking Therapies. The service allocates the client to the most appropriate mode of therapy depending on their issues. The client's therapist and their Working Well key worker are encouraged to work together to co-case manage the client's action plan, helping to streamline support and identify and address problems which may be hindering their mental health recovery and vice versa.
- 6.5 Talking Therapies began taking referrals in June 2016 and will deliver therapeutic interventions for 1200 clients. The research partner SQW is working closely with the service to analyse outcomes for clients and evaluate the service.

### 7.0 Skills for Employment

7.1 The Skills for Employment programme was commissioned by GMCA and funded by the Skills Funding Agency. It started delivery in February 2016. The programme is open to out of work residents in Greater Manchester for whom low skills is a barrier and who meet the criteria for support through the European Social Fund. Whilst the programme's criteria is wider than Working Well, it is a central part of the offer to Working Well clients to improve their chances of sustainable work and the providers of the services work in partnership to coordinate a client's journey towards employment.

- 7.2 The Skills for Employment programme is delivered across GM by the Work Company. In Manchester, delivery has been subcontracted to the same providers that are delivering the Working Well Expansion (see 4.2) in the City.
- 7.3 The programme offers a keyworker service to clients to support them to overcome skills and wider barriers to moving into work. The Work Company work with a range of skills providers across Greater Manchester (including the Manchester Adult Education Service) to match clients with skills provision according to their needs and ambitions, and commission specific courses to address gaps. Alongside this, clients undergo work preparation activity and are matched with work placement opportunities.
- 7.4 As of 18<sup>th</sup> August, the Work Company and their subcontractors have 107 clients who are fully engaged with the programme in Manchester. Of these 40% are Working Well clients. Other referral sources for the programme in Manchester include the Probation Service, Jobcentre Plus and the National Careers Service. The Skills for Employment team have also been supporting Work Clubs in Manchester including at the Central Library.
- 7.5 In Manchester 34 clients have started or completed an accredited qualification, including courses with Pennine Acute Hospital Trust and Amazon. Local skills partners include the Manchester Adult Education Service, the Manchester College and the Skills Company. In Manchester 13 clients have started work experience, of which 4 have gone on to secure permanent employment. These opportunities have been with a range of employers including One Manchester, Pennine Acute Trust, and construction partners. A total of 12 Manchester clients have started work, with a number of other clients due to start in August and September.

## 8.0 Integration

- 8.1 Integration with other services is a key feature of the Working Well design, to ensure that clients receive a coordinated service and partners are able to contribute to a client's action plan. Wider integration also ensures that issues in the system, for example blockages in accessing services, can be addressed. In Manchester, this model is overseen by the Working Well Integration Board which includes representatives from a range of partners including Registered Housing Provider representation, Manchester Mental Health Trust, Jobcentre Plus, Early Help Hubs, Probation services, The Manchester College and other City Council services.
- 8.2 Big Life are based one day per week within the Manchester Employer Suite, working closely with the JCP staff to identify job opportunities for clients and ensure that they have the necessary preparation. The Work Company and Armstrong Works have been linked in with the Employer Suite for Working Well Expansion clients. All Working Well providers are kept up to date with vacancies and other opportunities through the Work and Skills team's weekly bulletin, and are proactively encouraged to put clients forward for opportunities within the City Council such as the recent apprenticeship recruitment, and the new approach to work experience.

8.3 Big Life monitors their partnership working with other services and where referrals are made by keyworkers and/or other services are involved in the client's action plan. Over half of all their Working Well Pilot clients have at least 3 other services, with GPs being the most frequently used service, linked to their Working Well action plan or a service has been identified which needs to be involved. The independent evaluation of Working Well will show whether it is the key worker & person centred approach and/or the integration of other services or a particular combination of both that is critical to the delivery of sustainable job outcomes.

## 9.0 Work and Health Programme

- 9.1 In early 2016 the Department for Work and Pensions (DWP) announced its intention to commission a Work and Health Programme to support people on out of work benefits who are experiencing complex barriers to work including health problems. This will form part of a wider new approach where Jobcentre Plus will support claimants for a longer period before referral. The current Work Programme will stop taking new referrals in March 2017.
- 9.2 The Work and Health Programme, which has been significantly reduced in scale, scope and funding as compared with the Work Programme, will be commissioned nationally by the DWP by regional contract package areas, similarly to the Work Programme. However as part of the devolution agreement, Greater Manchester will be a distinct contract package area and the programme will be jointly commissioned and funded by a number of sources in GM and the DWP. DWP will part fund the programme, and GMCA are currently pulling together a package of local funding to enhance the reach of the programme.
- 9.3 The aim of the programme will be to provide holistic and integrated support for clients, bespoke to their needs and sequenced appropriately. The programme will build on the Working Well approach by fundamentally changing how the skills, health and employment support service function together, utilising the reforms taking place in health and skills as part of the devolution agreement.
- 9.4 Clients will be assessed by Jobcentre Plus for the programme based on their barriers and needs, and Jobcentre Plus will be the primary referrer and gatekeeper for the programme. GMCA are exploring how referral/ identification processes could be put in place with other services such as health partners, housing providers and other reform programmes such as Troubled Families.
- 9.5 GMCA and DWP are currently designing the specification for the programme, with the aim for the first stage of commissioning to start in late 2016 and the programme will go live in October 2017. The evaluation of the Working Well programmes, along with input from Local Authorities and partners, will be used in development of the specification for the Work and Health programme.

### 10.0 Conclusion

- 10.1 The Working Well Pilot works with clients who have severe barriers to employment. The programme is ambitious in trialling new approaches to supporting those who have not been able to move into work through previous programmes. Whilst job outcomes have not yet met the level expected at this point, it is important to note the progress that clients have made towards reducing their barriers and moving closer to employment through activities such as volunteering and work placements. The integration of a wide range of services, through the Manchester Integration Board, with Working Well clients' action plans has also led to many individual positive outcomes for clients.
- 10.2 It is still a little early to evaluate progress for the Working Well Expansion, however learning from the Working Well Pilot is being applied to how Manchester integrates services locally and supports the providers. Delivery of the Working Well Expansion is likely to experience different issues since those who are eligible will be on a variety of benefits and at different stages of their journey to work. The GMCA programme office and the Manchester Integration Board will continue to monitor progress against targets and impact.
- 10.3 As the programme is a priority for GMCA and the City Council, it is important that Working Well clients are seen as a priority group for opportunities arising with the City Council and its partners. The City Council's HROD team have proactively alerted Big Life to apprenticeship opportunities and provided feedback on client applications, and the Work and Skills team are working with Big Life to ensure that their clients access work experience opportunities with the City Council.
- 10.4 The detail on how the Work and Health programme will be commissioned is still being worked through. However, it is positive that the Contract Package Area will be GM, as this is the only LEP area in the country where the CPA will be coterminus. It allows for greater alignment and integration with existing programmes in GM and for the GMCA to invest in ensuring that the Work & Health programme has a further reach than it would otherwise have.

# <u>Appendix: Manchester client case studies from the Working Well Pilot and Working Well Expansion</u>

## Case Study 1: Working Well Pilot (Big Life)

## Client characteristics and challenges

This female client was 55 when she joined Working Well. She lived on her own in social rented housing in Longsight. The client reported 9 severe barriers to employment (bereavement, relationship break-up, lack of work experience, age, lack of qualifications, local labour market, physical health, mental health, stress and anxiety about employment). She had been unemployed for 10+ years and had no qualifications. The client had been an alcoholic. She suffered from problems with her legs and back and said she was extremely depressed and stressed with her personal life, experiencing panic attacks. She has high blood pressure and high cholesterol. The client desperately wanted support to find work and wanted to achieve this within 6 months.

# Support received

The client set goals to improve her health and wellbeing and find employment during her first action planning sessions. She wanted to work but felt that she had not been offered help in the past. The key worker and client decided to address employment goals from the outset. Because the client had not worked for so long she was unsure of what type of work she should seek and not confident about employment generally. The key worker conducted vocational planning activity with the client after which she accessed employability training. Following this our Employer Engagement Team secured a placement at a city centre hotel where the client worked as a room cleaner. She was offered work after this however turned it down as the role was too physical and exacerbated her physical health condition. Her confidence increased significantly following this job offer and a short while later she secured permitted work (under 16 hours) as a cleaner.

The client had good engagement with health services already and the key worker made contact with the GP and also the client's partner who was supportive. The client accessed the local alcohol detox service and the key worker monitored this activity with the client. She accessed a local job club and the key worker worked closely with the Big Life group Employment Worker.

This client started the programme with the statement 'find me work'. She knew that she faced significant barriers and had not been supported to achieve employment by any other services she accessed.

This is a good example of a client that was already receiving effective support from other services (physical health and alcohol recovery). What was missing was the final outcome of employment which she was not able to achieve herself or with their support. The key worker was able to make himself know to the GP and Alcohol Support Worker and take responsibility for employability work which operated alongside and complemented their activity. This allowed rapid progress to be made and the client reported their barriers to work decreased significantly.

### **Outcomes**

At her most recent review the client reported 5 severe barriers to employment and all had improved except her perception of age. She reported significant improvement against physical and mental health rating both as a 3 (down from 6). The client gained work as a cleaner and is settled into and enjoying her job. She started initially doing permitted work at less than 16 hours. This allowed her to gradually gain confidence in herself and make sure that she was still able to manage her health. Her key worker communicated with the employer and the client to arrange for her hours to be increased. He undertook better off in work calculations to identify the number of hours the client should aim for to give her the income she wanted and she gradually increased them to this point (30 hrs/wk). She has been off benefits for 7 months now and there are no concerns over her employment.

### Overall feedback

The client is now working 35 hours a week and her pay has increased to £7.20 hr. She said that Working Well had 'really helped her', 'been brilliant' and thinks she would have still been unemployed without the help of Working Well. Being able to turn down the first position she was offered and wait for something that suited her health condition was important and she is happy in her job and enjoying it. She also reported no barriers to her staying in work.

## Case Study 2: Working Well Pilot (Big Life)

# Client characteristics and challenges

This male client was 51 when he joined the programme. He lives alone in social housing in Cheetham Hill. He had been out of work for 11+ years and has no qualifications. He was an alcoholic from his teenage years and had liver damage as a result. He detoxed 6 months before joining the programme and a key goal for him was remaining alcohol free. He reported 10 barriers to employment and 7 of these were severe; (bereavement, relationship breakup, convictions, lack of work experience, age, skills, lack of transport, physical health, mental health, debt/finances). He reported mental health as his primary condition (anxiety, bipolar, thought of harming himself and others). He also reported physical health conditions (stroke/TIA, liver damage and damage to his spine).

The client has also had issues with destructive thoughts involving hurting others, which his key worker has had to address. In one particular incident, the client purchased a weapon to attack one of his friends, following a severe argument. His key worker, once informed by the client, took immediate action to control the situation, advising the client on the availability of crisis services and contacting his GP and psychiatrist.

Following conversations with a mental health worker and the GP, the key worker deemed the situation to be relatively low risk, as the client subsequently disposed of his weapon. Nevertheless, the key worker took action to book an earlier appointment for the client with his psychiatrist and a follow up appointment with his GP to monitor progress. Following this episode, the client has not reported any further inclinations towards violence.

### Support received

This client has multiple and complex needs and experiences regular stressful events to which his resilience was initially very low. Support at first was very practical and focused on helping him to organise his engagement with other services and immediate milestones. The keyworker also used motivational interviewing to help the client plan longer term goals and the sequence that was right for him.

These goals have included engaging with a dentist and receiving dentures, attending training courses at Back on Track, seeing family members and involvement with health services. He has experienced several crisis events including a bereavement and the deteriorating health of a family member which he has been able to cope with without drinking again. The key worker engaged early with this client's medical workers by phone and was able to help the client to re-arrange and attend his psychiatric appointments and adapt to changes in medication. She also shared information with the GP when the client reported thoughts of self-harm. Other services she has supported to the client to access and integrated support with include The Brian Hore Unit. Back on Track and his dentist.

He now reports much greater confidence and self-efficacy and is able to cope much better with challenges he faces. He is now able to complete the majority of actions agreed with his keyworker himself. Recent support has focused more on planning for the future and less on responding to day to day situations This client was already accessing multiple services when he joined Working Well, but often in a sporadic and uncoordinated manner. Access to health services remains high as the client's health changes regularly however key relationships such as with his GP and mental health worker are improved and he has achieved several medication reviews which have improved his management of long term conditions. He has also tackled issues with his teeth and a skin condition both of which would have progressed in the future. He is an established client of Back on Track where he has completed several courses and is commencing with volunteering, a key step towards greater employability. Crucially for this client he remains alcohol free after 18 months with Working Well. This client benefited enormously from key-worker support which coordinated his engagement with service providers, helped him to attend his appointments and take his medication as prescribed.

#### **Outcomes**

At a recent review he reported between 6 barriers to employment of which only one was severe (Physical health). His most recent wellbeing assessment saw positive responses to 16 out of 17 questions. He has much greater control over his day to day life and remains alcohol free. He has re-engaged with his family and is starting to volunteer, talking about work in the future. He has not found work yet, however he has taken significant steps towards this with volunteering, and his confidence in being successful in work has increased from 0 to 3.

### Overall feedback

'I've got huge support from Working Well. They treat me with respect and listen to me as if I'm important to them. I never had such a warm response elsewhere. Through my keyworker's support I managed to register with the dentist, got dentures fitted in. This helped me to regain my confidence. I've given up on drinking alcohol, living a better life. I now attend courses at Back on Track and am looking for voluntary work to help others do the same'.

## Case Study 3: Working Well Expansion (The Work Company)

Andy was suspicious of the programme when he first arrived and was unsure of the help he would receive that would assist with his current situation. There were several issues to consider, namely:

- Badly controlled diabetes affecting Andy's ability to cope with his circumstances
- Mental health concerns
- 6 children and one on the way, living in a 3 bedroom rented property
- Finding work that would pay enough for him to support his family
- Andy's wife's health issues
- Lack of responses to job applications

His Keyworker sought consent to speak to his diabetic clinic regarding booking an appointment and also offered to attend the appointment with him if he wished. The Keyworker advised Andy of the mental health services available through Pathways and Talking Therapies, but he had recently started taking anti-depressants and wanted to wait until he feels the full benefit of those before taking any further action. Andy's Keyworker contacted his current landlord and made a request for housing support. As a result of this the customer has sent them the relevant supporting documentation and is awaiting further contact from them.

A benefit calculation was also completed for Andy and this identified that he would be substantially better off by working 24 hours each week, which would also permit him to support his wife and allow for appointments to be arranged around his part-time working commitments. We have also suggested a meeting with the Money Advice Service to identify if there is any additional support that Andy may be able to access. The Keyworker and Andy have produced a CV that reflects Andy's skills, together with a cover letter, and have uploaded these to various job sites. His Keyworker has also arranged an appointment to meet with the National Careers Service in order to identify additional roles within Andy's skill set that he may find beneficial.

The customer is now more active in his job seeking activity and is becoming more confident on the programme.

## Case Study 4: Working Well Expansion (The Work Company)

When Rick first accessed our service he was reluctant about coming on the programme due to the fact that he had been on a number of programmes in the past and felt that he had got nowhere on them, or that the professionals delivering the services had no real interest or time to provide genuine help for him to move forward.

At his induction Rick presented as very guarded and his body language was very defensive, if not a little intimidating. His presenting barriers were low confidence and self-esteem due to the constant knock-backs he had experienced in life, and also his diagnosis of Lupus. He also felt that his lack of recent work experience and skills and qualifications were impacting on him.

Rick had been interested in social care/support work but had not had the opportunity to progress with this type of training. He had previous experience of working as a carer but no actual training/qualification in this field. His Keyworker discussed the Skills for Employment programme as they have access to training and work placements in the care sector at Pennine Acute Hospitals NHS Trust. Their 14 week programme involves 4 weeks in the classroom, studying subjects relevant to healthcare, and then 10 weeks on placement in clinical areas. The goal at the end of the programme is to have obtained a BTEC Level 1 Diploma in Vocational Studies, and possible employment.

Rick's Keyworker referred him to Skills for Employment and sought agreement from the customer's Jobcentre Plus (JCP) Work Coach for this. Rick was still reluctant and mistrusting of how this programme would benefit him, so his Keyworker and Learning Mentor on Skills for Employment worked to reassure, motivate and explain the opportunity to him. Working in parallel, both staff emphasised that, although his past experiences and feelings around these were valid, they could potentially hold him back from progressing further if he could not change his outlook.

Rick agreed to commit to the Skills for Employment programme, and from this point onwards he seemed to turn a corner. In his one-to-one sessions he was becoming a lot more relaxed and conversational, and less challenging. He has also complimented the Working Well and Skills for Employment services to management, JCP and other customers.

Rick has recently completed his first week of the Pre-Employment Programme and is receiving good feedback from the professionals delivering it. His Keyworker continues to engage with him on a fortnightly basis.

## Case Study 5: Working Well Expansion (The Work Company)

Salih joined Working Well as, although he had held several jobs in the past, they had never sustained long term and he was keen to find sustainable employment. On his assessment Salih did not disclose any major barriers that were holding him back from moving into work. Only after several appointments did it become clear that Salih was struggling with paper forms of communication and would need substantial help with application forms.

Throughout the next few months Salih often came into the office on an ad-hoc basis, if, for example, he had received letters about housing etc., that he did not understand. His Key Worker was able to resolve these queries quickly by taking the time to listen, and often picking up the phone to resolve the query. Now that he was getting support with application forms and letters that were causing distress, Salih was able to focus taking steps to find work. His Keyworker worked to review Salih's CV, which they amended and made improvements to the layout to increase appeal to employers. A Better Off calculation was completed, which confirmed financially the income that Salih would need to be earning in order to be better off so that he would not need to worry about paying rent if he went into work. He was also booked in for employability sessions with the job coach, which incorporated a mock interview and supported job searching sessions to assist his journey to find work.

Moving on from this, the next stage was to work with our internal Employer Engagement Consultant, who contacted employers on his behalf and also liaised with Salih directly to offer potential opportunities. Salih was supported to apply for several roles through the Employer Engagement Consultant, and, after a few unsuccessful attempts, Salih was successful in securing a permanent job with Iron Mountain (a records storage company).

As a result of his attendance on the Working Well programme Salih is now looking forward to financial independence where he will be in control of his life and can look towards a brighter future of contentment and progression. His Keyworker is currently supporting him to claim working tax credits and has already liaised with Salih's employer who has informed us of how well Salih is doing in the job.