



Department  
for Work &  
Pensions



# Evaluation of the Personalisation Pathfinder Trial

Supporting people with health conditions and  
disabilities into employment

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June 2018

## Research Report 957

A report of research carried out by IFF Research Ltd on behalf of the Department for Work and Pensions

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# Executive summary

The purpose of this research was to evaluate the Personalisation Pathfinder trial, which was introduced in April 2015 in three Districts: South West Wales, Surrey and Sussex and Greater Wessex<sup>1</sup>. The Personalisation Pathfinder offered tailored support to those with a disability or health condition who are unemployed and aimed to investigate the impacts of an approach focused on personalisation, flexibility, peer support, and integration with local support.

This report discusses findings from two waves of a quantitative survey with claimants on the Personalisation Pathfinder as well as from qualitative interviews with claimants and Pathfinder stakeholders. It also includes observations of Journey 2 Employment (J2E) job clubs and interviews with Community Employment Specialists.

Jobseeker's Allowance (JSA) claimants with a known health condition or disability accounted for the greatest proportion of participants on the Pathfinder (50 per cent), followed by ESA pre-Work Capability Assessment (WCA) claimants (38 per cent). Only around one in eight (12 per cent) participants were ESA Work Programme (WP) Completers. Most individuals (96 per cent) described themselves as having multiple health conditions or disabilities.

Staff and claimants identified the additional time dedicated to participants as the most important and impactful element of the Personalisation Pathfinder. This facilitated stronger relationships between Coaches and claimants and a more holistic experience for individuals, which went beyond work-focused goals and scheduled meetings with their regular Work Coach. As a result of the additional time, the stronger relationships and the more holistic experience, the support offered was overall felt by both claimants and staff to be more personalised and tailored than that which was previously offered.

Feedback from Community Employment Specialists, Pathfinder stakeholders and claimants showed that Journey 2 Employment was viewed very positively and was seen to increase levels of confidence and work readiness among participants. Eight in ten claimants who said they took part in group sessions rated these as helpful in moving closer to employment, and nine out of ten claimants who met with a Community Employment Specialist felt this was helpful.

Three in ten claimants were in work twelve months after joining the Personalisation Pathfinder. ESA pre-WCA claimants were most likely to have found work while on the trial. ESA WP Completers were the least likely to have found work, but the ones who did were more likely than the other claimant groups to credit the support they received from the Pathfinder in moving them into work. ESA WP Completers were also more likely to feel they needed health related support the Pathfinder could not offer and that this prevented them from moving closer to employment. Employment outcomes were more common among those who had experienced an improvement to overall wellbeing.

There is further qualitative and quantitative evidence to suggest the Pathfinder has improved claimants' work readiness, as indicated by increases in number of applications made and interviews attended, as well as attitudes towards work. Survey data, as well as qualitative interviews with staff and with claimants on the trial, shows

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<sup>1</sup> Greater Wessex has since changed its name to Dorset, Wiltshire, Hampshire and Isle of Wight. Throughout this report it will be referred to as Greater Wessex.

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that for some claimants the Pathfinder had a positive impact on feelings of confidence and motivation to find work, overall wellbeing and ability to manage their health condition on a day to day basis.

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# Glossary of terms

**Personalisation Pathfinder** – a trial scheme offering tailored support to those with a disability or health condition who are unemployed.

**Specialist Health and Disability Coach** – a specialist member of staff employed as part of the Personalisation Pathfinder programme who can offer more tailored support to claimants with health conditions or disabilities than a regular Work Coach, as well as spending more hours per week with each claimant.

**Specialist Health Disability Partnership Managers** – a specialist member of staff employed as part of the Personalisation Pathfinder programme who works to build partnerships with local organisations and procure specialist provision in the local area for claimants recruited onto the Personalisation Pathfinder programme.

**Jobseeker's Allowance (JSA)** – a type of unemployment benefit paid to people who are out of work and actively seeking work.

**JSA Caseload / JSA Support** – the sample of JSA claimants for this research was divided in two. The JSA Caseload group received support exclusively from a Specialist Health and Disability Coach while the JSA Support group continued to receive support from their existing Work Coach with additional advice from the Specialist Health and Disability Coach.

**Employment and Support Allowance (ESA)** – a type of unemployment benefit offering financial support to people who are out of work due to long-term illness or disability.

**Work Capability Assessment (WCA)** – a requirement of every ESA claim, this assessment measures the extent to which illness or disability affects one's ability to work.

**Work Programme (WP)** – a welfare-to-work scheme delivered by a range of providers with the aim of helping long-term unemployed JSA and ESA claimants find employment.

**Journey 2 Employment (J2E)** – peer support job clubs delivered by organisations who support sick and disabled people.

**Community Employment Specialist (CES)** – a member of J2E staff with a lived experience of disability who, in addition to developing links with local employers and other support organisations, supports participants both at the peer support job club and in the Jobcentre.

**World Health Organization Well-Being Index (WHO-5)** – a well-being index used to measure general well-being and screen for depression.

# Abbreviations

## Abbreviations

AA – Alcoholics Anonymous

BME – Black and Minority Ethnic

CATI – Computer Assisted Telephone Interviewing

CBT – Cognitive Behavioural Therapy

CES – Community Employment Specialist

CSR – Corporate Social Responsibility

CV – Curriculum Vitae

DASO – Diary Administration Support Officer

DEA – Disability Employment Adviser

DHES – Disability Health Employment Strategy

DPULO – Disabled People's User Led Organisation

DWP – Department for Work and Pensions

ESA – Employment Support Allowance

FSF – Flexible Support Fund

GP – General Practitioner

HR – Human Resources

ICD – International Statistical Classification of Diseases and Related Health Problems

IT – Information Technology

J2E – Journey 2 Employment

JSA – Jobseeker's Allowance

LMS – Labour Market System

LVP – Low Value Provision

MI – Management Information

NHS – National Health Service

PIP – Personal Independence Payment

SHDC – Specialist Health and Disability Coach

WCA – Work Capability Assessment

WHO – World Health Organization

WP – Work Programme



# Summary

The 2010-2015 coalition government made a commitment to helping disabled people and people with health conditions get into work. Following the Sayce Review<sup>2</sup> and the subsequent consultation on the recommendations, efforts were made to shift resources towards providing more tailored and personalised support. The Disability and Health Employment Strategy<sup>3</sup>, published in 2013, set out a vision for future specialist disability employment support. It stated that such support should include:

- Greater personalisation and more choice for disabled people in the support they receive.
- Better integration of services at local level.
- Greater use of peer support.

Following this, the Personalisation Pathfinder trial was introduced in April 2015 in three Districts: South West Wales, Surrey and Sussex and Greater Wessex<sup>4</sup>. The Personalisation Pathfinder offered tailored support to those with a disability or health condition who are unemployed and aimed to investigate the impacts of an approach focused on personalisation, flexibility, peer support, integration with local support, and a general move away from a 'one size fits all' approach. The Personalisation Pathfinder had a total budget of £6.6 million.<sup>5</sup> The Personalisation Pathfinder ran for two years and included the following key components:

- **Dedicated Specialist Health and Disability Coaches** – offered more time and tailored employment support to claimants.
- **Specialist Health Disability Partnership Managers** – worked to build partnerships and procuring specialist provision in the local area.
- **Journey 2 Employment (J2E)** – peer support job clubs delivered by voluntary organisations through a Community Employment Specialist (CES), and a member of J2E staff with a lived experience of disability.
- **Personalisation Fund** – additional funding to procure tailored provision that could not be covered by existing funding.

The trial also aimed to evaluate the impact of early intervention by engaging Employment Support Allowance (ESA) claimants before their Work Capability Assessment (WCA)<sup>6</sup> as well as new Jobseeker's Allowance (JSA) claimants with a health condition or disability. A further objective was to build on the Work Programme (WP) by testing whether additional, and alternative forms of support are useful for ESA WP Completers.

The Pathfinder was introduced alongside an active change and implementation agenda which included Universal Credit national rollout and the implementation of the Work Coach Delivery Model (introducing a process where individual Work Coaches deal with claimants regardless of benefit type).

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<sup>2</sup> *Getting in, staying in and getting on: Disability employment support fit for the future*. June 2011. Review to Government by Liz Sayce. Published by Department for Work and Pensions.

<sup>3</sup> Disability and Health Employment Strategy 2013: [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/266374/disability-and-health-employment-strategy-easy-read.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/266374/disability-and-health-employment-strategy-easy-read.pdf)

<sup>4</sup> Greater Wessex has since changed its name to Dorset, Wiltshire, Hampshire and Isle of Wight. Throughout this report it will be referred to as Greater Wessex.

<sup>5</sup> <http://www.parliament.uk/business/publications/written-questions-answers-statements/written-question/Commons/2017-02-07/63525/>

<sup>6</sup> The Work Capability Assessment is a test carried out by the Health Assessment Advisory Service to determine the extent to which the claimant's health condition or disability affects their ability to work.

## Evaluation of the Personalisation Pathfinder Trial

This report discusses findings from two waves of a quantitative survey with claimants on the Personalisation Pathfinder, 3,326 claimants were interviewed in the first wave and 1,901 were re-interviewed in the second wave. Qualitative interviews with claimants, staff and Pathfinder stakeholders were also undertaken alongside observations of J2E job clubs. As the first quantitative survey was carried out four months after claimants joined the Pathfinder it is possible that some changes associated with the trial had already occurred. The second survey was carried out eight months later.

### Characteristics of claimants taking part in the Personalisation Pathfinder

JSA claimants with a health condition or disability accounted for the greatest proportion of participants on the Pathfinder (50 per cent), followed by ESA pre-WCA claimants (38 per cent). Only around one in eight (12 per cent) participants were ESA WP Completers.

Nearly all individuals (96 per cent) described themselves as having multiple health conditions or disabilities. Some respondents had multiple physical health conditions or multiple mental health conditions; three quarters (75%) said they had both a physical and a mental health condition. In qualitative interviews, staff and participants talked about mental health conditions being brought on or exaggerated by factors such as long-term unemployment, loneliness, isolation and a lowered sense of ability. Three in five claimants (62 per cent) however felt that they were able to manage their health conditions well early on in the trial.

ESA WP Completers reported a higher density of health concerns, particularly in terms of mental health conditions. Ninety-seven per cent reported that they had at least one mental health condition. ESA WP Completers also considered these health conditions to have a greater impact on their day-to-day life, to be harder to manage and to a greater extent described these to be long-term conditions than other participants.

Early on in the trial, nearly three quarters of individuals on the Personalisation Pathfinder reported low levels of general wellbeing, as indicated by the World Health Organization (WHO) 5 wellbeing scoring system. A similar proportion also reported high levels of social isolation. For example, over a third of claimants reported never or rarely seeing family or friends. Low levels of wellbeing and high levels of social isolation were particularly prevalent among ESA WP Completers.

The majority of participants had been in employment at some point before joining the Pathfinder (76 per cent). Six in ten had left their previous employment due to health-related reasons and more than seven in ten regarded their health as a key barrier to returning to work.

Participants claiming JSA were generally less likely to perceive their disability as impacting on their employment before joining the Pathfinder. They were also less likely to believe their health condition or disability limited their ability to return to work. They tended to report fewer barriers to returning to work and were therefore generally more positive about this prospect.

Conversely, those joining the Pathfinder having completed the WP as ESA claimants regarded their health condition or disability as a considerable obstacle to returning to work and were more likely to rule out employment as a viable option.

### Set-up and recruitment

The level of training delivered to staff working on the Personalisation Pathfinder was largely dependent on their prior experience and job role. Recruitment staff and Partnership Managers did not think their roles required extensive training, as they were not felt to differ significantly from their previous roles. A few of the Specialist Health and Disability Coaches (SHDCs) who did not have prior experience working with claimants with health conditions and disabilities said more training to prepare them for this would have been helpful. For the majority of SHDCs, however, previous experience in Disability Employment Advisor (DEA) roles was felt to prepare them for the role in the Pathfinder trial.

Staff indicated that use of the Personalisation Fund was much lower than originally anticipated. The fund was intended for provision that could not be secured through existing funds but SHDCs reported that there was some confusion around the types of support they could access the fund for. In most cases, it was found that provision could be secured through existing funding routes such as the Flexible Support Fund FSF and Low Value Provision (LVP) (and some was available free of charge).

Recruitment processes across all Districts largely retained the fundamental characteristics of the intended structure and processes were only adapted to address issues perceived to be detrimental to the levels of uptake:

- Changes were made to the original phone script and letter used for making first contact. These were felt to be too heavily focused on the voluntary nature of the programme and movement towards employment (as opposed to softer outcomes, such as improved confidence) and it was felt that changing the script enabled recruitment staff to reach a greater number of claimants.
- Introductory group information sessions, intended for all ESA pre-WCA claimants, were eventually abandoned in many offices due to very low attendance, perceived incompatibility with the claimant group (due to the prevalence of social anxiety), and comparative success of one-to-one introductory meetings.
- In two Districts, there was a shift in responsibility for making first contact with potential participants from recruitment staff to SHDCs. This was because SHDCs had deeper knowledge of the support available and were better equipped to describe the Pathfinder to claimants.

Recruitment of ESA pre-WCA claimants was time-consuming due to the volume of targets, difficulty reaching individuals, high levels of refusals and high levels of claimants agreeing to attend a meeting but subsequently not attending.

Staff felt they were much more successful in recruitment when they were able to establish an open dialogue. This was the case across all claimant types. Once an open dialogue was established SHDCs were able to fully explain how the support offered through the trial could be tailored to each claimant, which was felt to be important to secure buy-in. Making initial contact and ensuring the claimant attended the first appointment was described as the greatest challenge to recruitment, particularly with regards to ESA pre-WCA claimants. As such, staff felt that making the initial appointment mandatory would have yielded more successful results.

The need for support and a desire to return to work were key drivers in claimant uptake of the programme; 39 per cent joined the Pathfinder because they liked the idea of receiving additional help and support, 38 per cent believed it could help them back to work, and 30 per cent liked the idea of having support more tailored to their needs.

### Experience of the Pathfinder

One-fifth (19 per cent) of claimants incorrectly thought that the Personalisation Pathfinder was mandatory; this proportion rose to 36 per cent for ESA WP Completers. While the voluntary nature of the programme was felt by some Pathfinder staff members to be difficult to communicate clearly upon recruitment, claimants who said they were aware of the Pathfinder being a voluntary programme were more positive about their experience.

Staff and claimants identified the additional time dedicated to participants as the most important and impactful element of the Personalisation Pathfinder. This facilitated stronger relationships between Coaches and claimants and a more holistic experience for individuals, which went beyond work-focused goals and scheduled meetings with their regular Work Coach. As a result, the support offered was overall felt to be more personalised and tailored.

Two thirds of claimants in the quantitative survey rated their meetings with their Work Coach as useful and felt the Coach was understanding of their needs.

The types of support on offer from Coaches on the Pathfinder were not felt to differ greatly from those offered through the conventional process. However, stronger relationships and more time spent on exploring barriers and building trust allowed appropriate activities and support to be more successfully identified for each individual. Combined, staff felt these changes contributed to a more personalised experience for most individuals on the programme, comparative to previous support provided through the Jobcentre.

The Personalisation Pathfinder was meant to offer support to claimants for up to 12 months, but among those who did not find work while on the trial, only 48 per cent stayed on it for the full 12 months. Reasons for leaving the trial earlier often involved a deterioration in health or a change to the claimant's benefit situation.

### Journey 2 Employment

Although the J2E job clubs were only able to accommodate a small number of participants, these were generally regarded very positively by both staff and claimants, and were perceived to increase levels of confidence and work readiness among participants. Eight in ten claimants who said they took part in group sessions rated these as helpful in moving closer to employment, and nine out of ten claimants who met with a Community Employment Specialist (CES) felt this was helpful. A third said the group sessions had helped them find work or a work placement and six out of ten said they felt more confident looking for work. There is evidence that J2E was particularly beneficial to younger claimants, who in the survey were more positive about the sessions and reported feeling more confident as a result of taking part. Seventy-four per cent of 16-24 year olds agreed that J2E made them feel more confident looking for work compared with 58 per cent of all other age groups.

The group setting was found to be particularly important in moving claimants closer to employment. One-to-one support, provided by the CES, was found to ensure participants with different needs were able to work together and progress as a group. CESs reported being constrained by the time limitations of the job and that this particularly affected the employer engagement element of their role.

### Partnership Working

Stakeholders were overall positive about the working relationship with Specialist Partnership Managers and the Specialist Partnership Managers appear to have made considerable efforts to engage Specialist Health and Disability Coaches. Specialist

## Evaluation of the Personalisation Pathfinder Trial

Partnership Managers reported that limitations in the time allocated to their job role and the geographical spread of their area prevented them from engaging as much as could have been hoped with local provision and employers. Employer engagement was found to be particularly challenging due to limitation of time and geographical distances. In two out of three Districts SHDCs agreed that the geographical spread of the role meant the Specialist Partnership Managers were spread too thin. In two Districts, engagement with local health services was felt to have been particularly effective, especially with regards to the proportion of claimants accessing mental health support and Cognitive Behavioural Therapies (CBTs).

### Employment outcomes

Three in ten claimants were in work twelve months after joining the Personalisation Pathfinder. From this research it is difficult to establish how many of these outcomes would have been achieved without involvement with the Pathfinder but qualitative evidence from both staff and claimants points to the Pathfinder having played a large role for at least some claimants.

ESA pre-WCA claimants were most likely to have found work while on the trial. ESA WP Completers were the least likely to have found work, but the ones who did were more likely than the other claimant groups to credit the support they received from the Pathfinder in moving them into work. Positive employment outcomes appear to be influenced by:

- severity of health condition (those whose health did not limit day-to-day activities and were better able to manage their condition were more likely to move into employment)
- having previous work experience
- improvements in general wellbeing whilst on the pathfinder.

At the Wave 2 survey, 41 per cent of respondents agreed the Pathfinder had moved them closer or into work. Those who had taken part in group sessions or met with a CES were particularly likely to say the Pathfinder had moved them closer to work.

Of those who did not feel the Pathfinder had moved them closer to work, the most frequent reason given was they had a need for medical help the Pathfinder could not provide. This reason was particularly prevalent amongst ESA WP Completers.

Employment outcomes were more common among those who had experienced an improvement to overall wellbeing.

Survey data, as well as qualitative interviews with staff and with claimants on the trial, shows that the Pathfinder had a positive impact on feelings of confidence and motivation to find work. Nearly half of claimants reported an improvement in this regard, and this was particularly prevalent among JSA Caseload claimants (those who met with a SHDC).

Improvements to confidence and motivation, as well as soft skills such as communication skills, were more commonly found among:

- Those who felt able to manage their health condition and did not feel it impacted on their day-to-day life.
- Those who saw an improvement in their general wellbeing (as measured by WHO-5).
- Younger claimants (16-24 year olds in particular but also those aged 25-34).
- Those without any prior experience of employment.
- Those who took part in group sessions or met with a CES.

### Health outcomes

Between the Wave 1 and Wave 2 survey points (four months and 12 months after joining the Pathfinder), the proportion of participants stating that they were able to manage their health condition well increased slightly (from 62 to 68 per cent).

The survey explored general wellbeing using the WHO-5 scale. Between the Wave 1 and Wave 2 surveys, half of participants reported an improvement in their WHO-5 score (52 per cent) while 37 per cent reported a deterioration.

Some claimants also reported increases in the frequency with which they left the house, saw family/friends or went out and met new people between the Wave 1 and Wave 2 surveys (29%, 29% and 28% respectively). However, the proportions reporting that they did this less often were only slightly smaller, suggesting that on balance, across the whole participant population there was only a slight increase in levels of social interaction.

### What drives positive outcomes?

Multivariate analysis techniques were used to understand what factors were able to 'predict' claimant outcomes. Results show that a range of factors predicted positive outcomes in terms of employment status, perceived confidence to find work and attitudes towards returning to work. The factors that predicted positive outcomes were a mix of demographic and behavioural factors, as well as factors related to the delivery of the Pathfinder, such as specific forms of support the claimant may have received.

The most important factors predicting positive employment outcomes were all related to a perceived (lack of) barriers to work, for example whether or not difficulties travelling to work was seen as a barrier.

The most influential factors in terms of confidence to find work on the other hand were all related to support the claimant may have received or activities they may have undertaken while on the Pathfinder. In terms of improvements to attitudes to work, the most influential factors were a mix of factors related to the delivery of the Pathfinder and demographic and behavioural factors, such as nature of health condition and perceptions of how working would impact their financial situation.

### Conclusions

The main conclusions that can be drawn from the evidence collected in this evaluation are that:

#### In terms of delivery:

- Recruitment for the Pathfinder was time-consuming, particularly with regards to ESA pre-WCA claimants, due to the volume of targets, difficulty reaching individuals, high levels of refusals and high levels of claimants agreeing to attend a meeting but subsequently not attending.
- The voluntary nature of the trial was felt to improve engagement among claimants once they had agreed to take part in the Pathfinder.
- The Pathfinder reached very vulnerable claimants, who often struggled with a combination of health conditions and social isolation, by providing additional time and flexibility to SHDCs.
- The Pathfinder led to some very positive experiences which – in line with policy intent – felt genuinely personalised.

## **Evaluation of the Personalisation Pathfinder Trial**

- With the exception of mental health services, such as CBT, it was only in a minority of cases that Pathfinder experiences involved any external content related to the management of health conditions.
- Although the J2E job clubs were only able to accommodate a small number of participants, these were generally regarded very positively by both staff and claimants.
- Engagement with employers among staff was limited due to a perceived lack of time and too large of a geographical area to cover.
- And across the three Districts the Pathfinder achieved less than was intended in terms of improving local integration of the Jobcentre with other local employment and health services, both in terms of establishing new contacts and in terms of making greater use of existing relationships, due to limitations in time allocated to the Partnership Manager job role and the geographic spread of the roles.

### **And in terms of outcomes:**

- Both staff and claimants themselves often felt that they had seen an improvement in their confidence and self-esteem through their experiences on the Pathfinder.
- Some claimants achieved employment outcomes (but it is not possible to assess from this research what proportion of claimants would have achieved these outcomes without the assistance of the Pathfinder).
- There are indications of work-readiness improving among those who did not find work.
- Improvements in wellbeing and social isolation were more modest.
- The evidence is mixed in terms of the extent to which staff obtained better knowledge of local provision through the Pathfinder.
- There is some evidence of early intervention with the ESA pre-WCA group having a positive impact. This group was most likely to have found paid employment and to have returned to a previous employer. They were also the most likely to have experienced improvements to general wellbeing.

# 1 Introduction

## 1.1 Background

### 1.1.1 Policy context

The 2010-2015 coalition government made a commitment to helping disabled people and people with health conditions get into work. Following the Sayce Review<sup>7</sup> and the subsequent consultation on the recommendations, efforts were made to shift resources towards providing more tailored and personalised support. Efforts were also made to provide support which could enable disabled people to undertake employment in the open market rather than in protected or segregated employment.

The commitment to personalisation was further evident in the Department for Work and Pensions (DWP) Disability and Health Employment Strategy (DHES), published in 2013. The DHES proposed a number of ways to provide specialist disability employment support including:

- Greater personalisation and more choice for disabled people in the support they receive.
- Better integration of services at the local level.
- Better links with occupational health and other healthcare professionals.
- Greater use of peer support.
- Support for self-employment.
- Improvements to the Work Programme (WP).

In addition, offering the right support early on is increasingly considered to be key. The longer a disabled person or an individual with a health condition is unemployed, the harder it is for them to return to work. For example, those in the Employment Support Allowance (ESA) work-related activity group are twice as likely to have claimed an out of work benefit for at least three years of the last four as those claiming Jobseeker's Allowance (JSA)<sup>8</sup>. Under the current ESA system claimants have limited engagement with Jobcentre Plus until after their Work Capability Assessment (WCA), at least 14 weeks after making their claim. In addition to early engagement of JSA and pre-WCA ESA claimants, there is also a desire to improve the support offered to longer term ESA work-related activity group claimants who return from the WP. Achieving a job outcome has been far less common amongst ESA WP returners than among JSA claimants.

### 1.1.2 The Personalisation Pathfinder Trial

One year on from the DHES, the DWP reported the launch of the Personalisation Pathfinder trial. This trial was one of several which examined the viability of different models in terms of value for money, effectiveness and employment outcomes. The

<sup>7</sup> Getting in, staying in and getting on: Disability employment support fit for the future. A review to Government by Liz Sayce. (June 2011, DWP).

<sup>8</sup> Duration on working-age benefits, Great Britain (April 2015, DWP). <https://www.gov.uk/government/statistics/duration-on-working-age-benefits-april-2010-to-march-2014>



## Evaluation of the Personalisation Pathfinder Trial

Personalisation Pathfinder aimed to provide an opportunity to observe the impacts of an approach focused on personalisation, flexibility, peer support, integration with local support, and a general move away from a 'one size fits all' approach.

The trial also aimed to evaluate the impact of early intervention by engaging ESA claimants before their WCA as well as new JSA claimants who have a health condition or disability. A further objective was to build on the WP by testing whether additional, and alternative forms of support are useful for ESA WP Completers.

In April 2015, the Pathfinder programme was rolled out in three trial Districts: South West Wales, Surrey and Sussex, and Greater Wessex<sup>9</sup>. Compared to other ESA trials, a distinctive feature of the programme was the introduction of two new job roles:

- Specialist Health and Disability Coaches (SHDCs) – Work Coaches with experience and expertise in supporting claimants with health conditions and disabilities. These Coaches were given more time to work with each claimant and greater autonomy and flexibility in the support they provided.
- Specialist Health and Disability Partnership Managers – tasked with ensuring better integration of local provision, creating employment opportunities and supporting SHDCs.

In addition to these new job roles, additional funding in the form of the Personalisation Pathfinder Fund was allocated to refer claimants to local provision not available through the existing District Provision Tool.

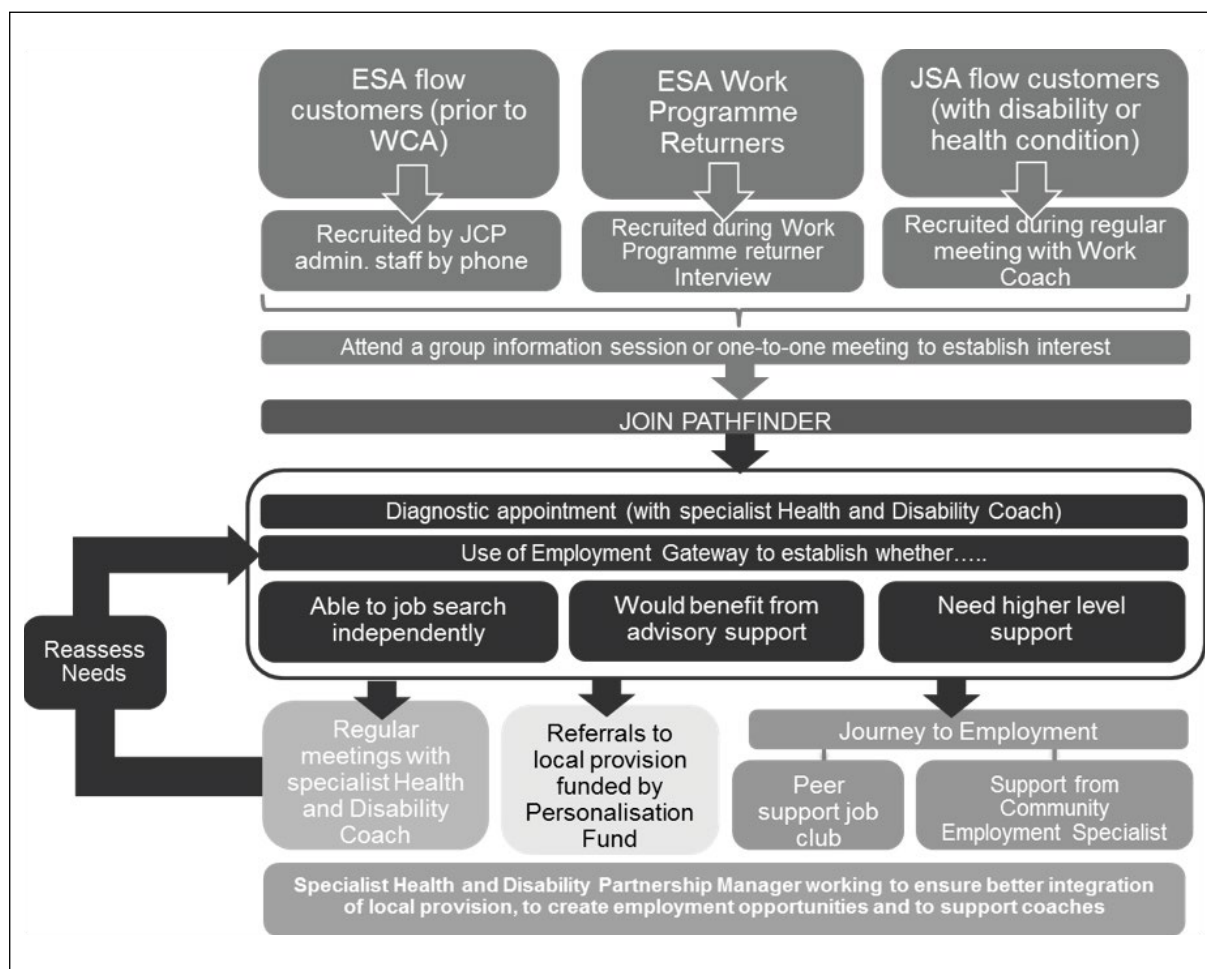
Finally, nine Disabled People's User Led Organisations (DPULOs) and voluntary sector organisations were given funding to deliver person-centred job clubs through a scheme called Journey 2 Employment (J2E). These job-clubs took place away from the Jobcentre and utilised both work-related Coaching sessions and peer-support to build confidence, change attitudes towards employment, and ultimately move participants closer to a job outcome.

As part of the J2E delivery, funding was also allocated for DPULOs and voluntary sector organisations to employ a Community Employment Specialist (CES). CESs had a lived experience of disability and, in addition to developing links with local employers and other support organisations, would support participants both at the job club and in the Jobcentre.

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<sup>9</sup> Greater Wessex has since changed its name to Dorset, Wiltshire, Hampshire and Isle of Wight; throughout this report it will be referred to as Greater Wessex.

**Figure 1.1 Flowchart showing the different elements of the Personalisation Pathfinder programme**



The Personalisation Pathfinder was available to three distinct groups of claimants:

- ESA claimants, pre-WCA.
- JSA claimants with a known health condition or disability. JSA claimants on the Pathfinder were further split into two groups:
  - o JSA Caseload: These claimants received support from a SHDC.
  - o JSA Support: These claimants received continuing support from their existing Work Coach with additional advice from the SHDC.
- ESA WP Completers.<sup>10</sup>

<sup>10</sup> Individuals currently receiving ESA, who have completed the WP and are still unemployed. The WP is a long-term investment both in individual participants, and in the overall welfare-to-work market. Individual participants will stay on the programme for up to two years, and will stay in contact with their provider once they move into work.

**Table 1.1 Number of starts on the Personalisation Pathfinder split by group type and district (rounded to the nearest 10)<sup>11</sup>**

	JSA caseload	JSA support	ESA Pre-WCA	ESA WP Completer	Total
Total	3,710 (35%)	1,580 (15%)	3,990 (38%)	1,320 (12%)	10,600
Surrey and Sussex	780 (29%)	550 (20%)	1,070 (40%)	300 (11%)	2,700
Greater Wessex	1,410 (29%)	690 (14%)	2,000 (41%)	790 (16%)	4,890
South West Wales	1,520 (50%)	340 (11%)	920 (30%)	230 (8%)	3,010

## 1.2 Research Objectives

IFF Research was commissioned by the DWP to evaluate the Personalisation Pathfinder and its component parts. The research aimed to establish whether the Pathfinder worked in moving out-of-work individuals with a disability and/or health condition closer to employment and, if so, how and why it achieved this. Specifically, the objectives of the research were to understand:

- Take-up of the Pathfinder programme – detailing the profile of individuals who joined the scheme in terms of employment history, claimant group, nature of health condition etc., as well as exploring the reasons and motivations for taking part.
- The nature of the delivery experience including: the format and content of Coaching sessions; the types of external support claimants were referred to; the extent to which support was flexible and tailored to individuals’ needs; the balance between support provided to manage health conditions and support to improve employability as well as the perceived effectiveness of peer-support elements.
- The impact on outcomes for claimants. This includes both ‘hard’ impacts such as claim status and employment outcomes as well as ‘soft’ impacts such as attitudes towards work, levels of job-seeking activities, and perceptions of ability to manage health conditions.
- Reasons why the trial may have been less effective for certain groups or individuals and reasons for leaving the trial early.
- Lessons learnt by staff and Coaches involved in the delivery of the scheme as well as suggested improvements in terms of operational challenges, recruitment of claimants and use of local provision.
- Value for money.
- Any impacts on the reputation of DWP and/or Jobcentre Plus among claimants.

<sup>11</sup> Data sources used were the DWP Labour Market System (LMS) pilot marker dataset and other DWP administrative data. A small number of participants did not have any recorded pathfinder meetings.

## 1.3 Methodology

This research consisted of both quantitative and qualitative elements:

- A quantitative telephone survey conducted with claimants shortly after joining the programme to establish baseline information on employment history, health conditions, and attitudes to work.
- A follow-up quantitative telephone survey with claimants twelve months after joining the programme. The purpose of this follow-up survey was to measure 'distance travelled' towards work during the programme, as well as to measure impact on general wellbeing, social isolation, ability to manage health condition and confidence and motivation to find work.
- Depth interviews, both face-to-face and via telephone, and focus groups with Coaches, managers, and external stakeholders involved in the delivery of the programme.
- Face-to-face depth interviews with claimants to discuss their experience of being on the programme.
- Observations of J2E job clubs and face-to-face depth interviews with CESs.

### 1.3.1 Theory of Change

Prior to the design of the main fieldwork elements, a small-scale exercise among senior stakeholders was conducted in June 2015 in order to develop a logic model to explain the Theory of Change underpinning the programme. Specifically, this exercise involved seven telephone interviews lasting approximately 45 minutes each:

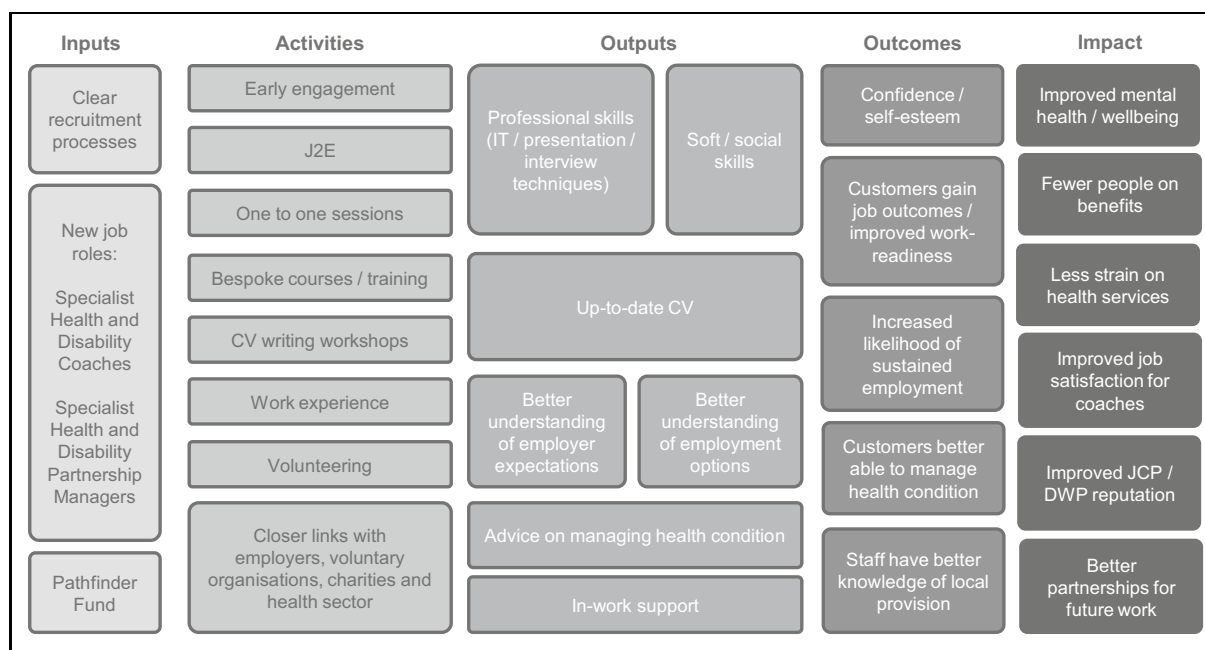
- Three interviews with Pathfinder Project Managers (one in each trial District).
- Two interviews with Specialist Health and Disability Partnership Managers.
- Two interviews with SHDCs.

The purpose of developing the model was to summarise the following:

- The inputs which have been implemented or enabled in order to facilitate the activities and processes available to claimants.
- The activities and processes that comprise the support offered.
- The outputs (immediate outcomes from the support offered).
- The outcomes (medium-term outcomes resulting from the outputs).
- The longer-term impact of these outputs on the claimant, Jobcentre Plus/DWP as well as wider society.

The Theory of Change model underpinning the Personalisation Pathfinder programme is summarised in Figure 1.2.

Figure 1.2 A summary of the Theory of Change Model



### 1.3.2 Quantitative methodology

The quantitative element of the research involved a longitudinal survey of two Waves.

Ideally the first Wave of the survey would have been conducted very soon after participants joined the Pathfinder in order to collect baseline data against which progress could be measured at Wave 2. In practice, arrangements for access to contact details meant that Wave 1 took place around four months after participants joined the Pathfinder and then Wave 2 took place around 12 months afterwards (as the Pathfinder was intended to last around 12 months if participants did not leave early).

Participants who joined the Pathfinder programme in its first month, April 2015, were excluded from the research as their experience may have been atypical.

In the first Wave, 3,326 participants were interviewed. These interviews were carried out between January 2016 and May 2016 and lasted an average of 26 minutes.

2,927 respondents (88 per cent) agreed to be re-contacted for the second wave of research. 1,901 claimants (65 per cent) were interviewed between June 2016 and January 2017 and these interviews lasted on average 24 minutes.

Even though Wave 1 interviews were conducted some time after participants joined the Pathfinder, the questionnaire still collected some baseline data about the period before joining. For some question areas such as general wellbeing it was not possible to do this and the questionnaire asked about participants' situation 'currently', i.e. at the six month point. The Wave 2 questionnaire was designed to capture changes or improvements to personal circumstances, as well as experiences and perceptions of the Personalisation Pathfinder. Table 1.2 outlines the areas covered in both questionnaires. Due to the first survey being carried out four months after claimants joined the Pathfinder it is possible that some changes associated with the trial had already occurred and are therefore under-reported in this survey. The analysis of the two surveys should therefore not be interpreted as 'pre' and 'post' intervention data.

**Table 1.2 Question areas in Wave 1 and Wave 2 questionnaires**

<b>Topic Area</b>	<b>Wave 1</b>	<b>Wave 2</b>
Recruitment and reasons for joining the programme	X	
Employment / benefit status	X	X
Employment history	X	
Job search activity and attitudes towards returning to work	X	X
General wellbeing	X	X
Contact with the health sector	X	X
Experience and perceptions of the Personalisation Pathfinder		X
Demographic information	X	X

### 1.3.3 Qualitative methodology

To supplement the quantitative work with claimants and explore aspects of the Pathfinder trial in greater depth, a series of qualitative interviews, teledepths, focus groups and observations were conducted with claimants, Coaches, staff and external stakeholders. Table 1.3 details the types of interviews conducted with the various stakeholders in each District.

**Table 1.3 Breakdown of the number of interviews by stakeholder type and region<sup>12</sup>**

	<b>South West Wales</b>	<b>Greater Wessex</b>	<b>Surrey and Sussex</b>
Project Manager	1 face-to-face interview	2 face-to-face interviews	2 face-to-face interviews
Specialist Health & Disability Coaches	2 focus groups	2 focus groups	2 focus groups
Specialist Partnership Managers	2 teledepths	2 teledepths	2 teledepths
Work Service Managers	2 teledepths	2 teledepths	2 teledepths

<sup>12</sup> In Surrey and Sussex recruitment was carried out by Work Coaches and focus groups with recruitment staff were therefore not carried out. Greater Wessex did not identify relevant external stakeholders and these interviews were therefore not completed. Observations of Coaching sessions were only carried out in South West Wales.

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	South West Wales	Greater Wessex	Surrey and Sussex
Recruitment Staff	1 focus group	1 focus group	-
External Stakeholders	2 teledepths	-	2 teledepths
Observations of Coaching sessions	4 observations	-	-
J2E CES	3 interviews	3 interviews	2 interviews
J2E Trainers	1 interview	1 interview	2 interviews
J2E Job Club Observations	1 observation	1 observation	1 observation

These discussions covered:

- Recruitment.
- Nature of delivery.
- Quality of experience.
- Claimant attitudes.
- Employment outcomes.
- Local integration / Partnership working, including employer engagement.
- Training and support of Pathfinder staff.
- Lessons learnt.

In addition to the stakeholder interviews, 90 face-to-face interviews were conducted with claimants on the Personalisation Pathfinder from July to early September 2016. The interviews explored a range of topics including:

- Personal circumstances and entry onto the Pathfinder.
- Support received.
- Experience of working with SHDC.
- Experience of the J2E programme (where applicable).
- Employment outcomes.
- 'Soft' outcomes (e.g. confidence, attitudes to work).

Thirty interviews were conducted in each of the trial Districts. Over the three Districts the 90 interviews were split between the three claimant groups in the following way:

- 20 interviews were conducted with ESA WP Completers.
- 35 interviews were conducted with ESA pre-WCA claimants.
- 35 interviews were conducted with JSA claimants (20 Caseload, 15 Support).

## 1.4 About this report

This report presents findings collected from all elements of the evaluation of the Personalisation Pathfinder, including the longitudinal interviews with claimants.

All findings have been tested for significance using z-tests. All findings reported are statistically significant at the 95% confidence level unless otherwise stated.<sup>13</sup>

## 1.5 Report outline

**Chapter 2:** This chapter outlines the profile and characteristics of individuals on the Personalisation Pathfinder programme. It presents demographic information, including claimant type and District, and explores health conditions and related issues (such as wellbeing and socialisation).

**Chapter 3:** Explores the claimants' previous employment, their attitudes towards working, and barriers they face in joining or returning to employment.

**Chapter 4:** Outlines training received by Jobcentre Plus staff members to prepare them for their roles on the Pathfinder, as well as the introduction and experiences of using the Personalisation Fund.

**Chapter 5:** Focuses on the processes around recruiting claimants onto the Personalisation Pathfinder, exploring stakeholder and claimant views on initial communications, introductory sessions, how the programme was presented and reasons for joining.

**Chapter 6:** Explores the experience of being on the programme, including the relationship between Specialist Health and Disability Coach and participant, activities undertaken, and the extent to which the Pathfinder felt personalised.

**Chapter 7:** Summarises the experiences of Journey 2 Employment job clubs, including what outcomes were achieved as a result of participation in a J2E club.

**Chapter 8:** Focuses on the local integration aspect of the Personalisation Pathfinder, including the experiences of Specialist Partnership Managers engaging with local providers and employers.

**Chapter 9:** Outlines findings related to employment outcomes, including perceived work readiness and impact on job search activity.

**Chapter 10:** Outlines findings related to confidence and motivation, as well as soft skills such as communication.

**Chapter 11:** Outlines findings related to ability to manage health condition, general wellbeing and social isolation.

**Chapter 12:** Summarises results from a statistical regression analysis, focusing on what factors predicted positive outcomes for claimants participating in the Personalisation Pathfinder.

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<sup>13</sup> In tables and charts, statistically significant differences (at the 5% level) are indicated by \*



## 2 Claimant Profile and Characteristics

### Chapter overview

This chapter will provide an overview of the respondents who took part in the Personalisation Pathfinder survey. This includes a breakdown by claimant group, age and gender. It also includes a discussion of the prevalence of physical and mental health conditions and claimants' perceived ability to manage their health condition or disability. In terms of age, gender, claimant type and the proportion of claimants from each district, the survey is broadly representative of the Personalisation Pathfinder claimant population as a whole.

### 2.1 Demographics

As outlined in the previous chapter, individuals were eligible for the Personalisation Pathfinder programme if they fell under one of the following categories, within the Districts of Surrey and Sussex, Greater Wessex and South West Wales:

- Employment and Support Allowance (ESA) claimants, pre-Work Capability Assessment (WCA).
- Jobseeker's Allowance (JSA) claimants with a known health condition or disability. For JSA claimants with a health condition or disability there are two levels of support available:
  - Continuing support from their existing Work Coach with additional advice from the Specialist Health and Disability Coach (SHDC) (JSA Support).
  - Support exclusively from a SHDC (JSA Caseload).
- ESA (WP) Completers.<sup>14</sup>

Although the shared characteristic across the claimant groups is the presence of health conditions and disabilities (the details of which will be explored later in this chapter), it is important to note that these conditions may not always be the basis for the benefit claim.

As shown in Figure 2.1, claimants from Greater Wessex accounted nearly half (47 per cent) of all respondents, with the remaining respondents fairly evenly split between Surrey and Sussex and South West Wales (26 and 28 per cent, respectively).

Half the respondents (50 per cent) were JSA claimants with a known health condition or disability, two-fifths (38 per cent) were ESA pre-WCA, and the remaining 12 per cent were ESA WP Completers. It was more common for JSA respondents to receive the 'caseload' arm of the programme (where they are transferred to a new, SHDC than the 'support' arm (35 and 15 per cent).

Figure 2.1 also illustrates how the respondent profile by claimant group differed by District. In Greater Wessex, a higher proportion of participants were from the ESA pre-WCA group compared to Surrey and Sussex and South West Wales (42 per cent versus 39 and 32 per cent, respectively), and also from the ESA WP Completers group (16 per cent compared to nine per cent and seven per cent). South West Wales

<sup>14</sup> Individuals currently receiving ESA, who have completed the WP and are still unemployed.

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had a notably higher proportion of JSA claimants with a known health condition or disability and specifically those receiving the caseload arm (50 per cent compared to 30 and 29 per cent in Surrey and Sussex and Greater Wessex). It is difficult to be sure whether this is a reflection of differing claimant profiles between the three Districts or result of different targeting approaches. Qualitative interviews with recruitment staff and project managers revealed that targeting claimants was partially influenced by individual discretion among recruiters and it is therefore likely that there were differences in approaches.

**Figure 2.1 Demographics: District and Claimant Type**

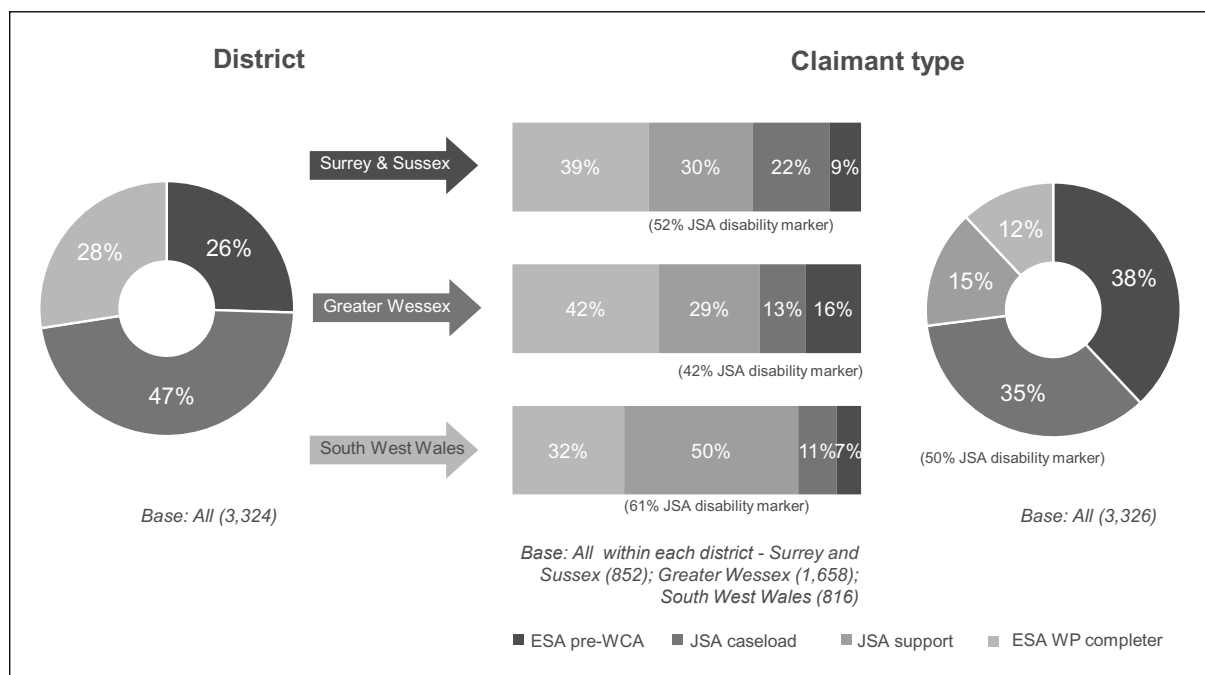


Figure 2.2 provides some information on the demographic profile of participants. The gender balance of participants was reasonably even (54 per cent men and 46 per cent women). In all groups except ESA WP Completers there was a slightly higher proportion of men than women.

Those between 35 and 49 years old accounted for around a third of participants (35 per cent). ESA WP Completers had a slightly older age profile than the other groups (only six per cent of participants in this group were 16 to 24, while more than two-fifths (43 per cent) were aged between 35 and 49).

On age and gender, the survey respondents are broadly representative of all those who participated in the trial. In most cases the proportions of different age and gender groups who responded to the survey are within two to three percentage points of the equivalent groups in the Personalisation Pathfinder claimant population.<sup>15</sup>

<sup>15</sup> Information provided by DWP from analysis of administrative data.

Figure 2.2 Demographics: Age and gender by claimant group



Across all claimant groups, a small minority of participants were black or minority ethnic (BME). Overall, this equated to there being one in twenty (five per cent) BME participants.

## 2.2 Health condition

### 2.2.1 Nature of health condition

Table 2.1 summarises the incidence of specific health conditions and disabilities, and the broad classification groupings.

Table 2.1 Classification of health conditions and disabilities

Health condition / disability	All	ESA pre-WCA	JSA Caseload	JSA Support	ESA WP Completer
	Base: (3,326)	(1,350)	(1,129)	(494)	(353)
	%	%	%	%	%
<b>Any mental health condition</b>	<b>85</b>	<b>85</b>	<b>84</b>	<b>80</b>	<b>97</b>
Stress or anxiety	76	77	72	69	90
Depression	66	67	63	61	82

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Fatigue or problems with concentration or memory	57	56	54	51	72
Other mental health condition	13	13	11	11	19
Problems due to alcohol or drug addiction	8	7	7	9	15
<b>Any physical health condition</b>	<b>87</b>	<b>87</b>	<b>86</b>	<b>90</b>	<b>91</b>
Problems with neck or back	51	48	51	52	60
Problems with legs or feet	51	49	49	53	59
Problems with arms or hands	39	36	38	42	50
Problems with bowels, bladder, stomach, liver, kidneys	34	33	31	33	45
Chest or breathing problems	34	31	33	34	44
Heart or blood pressure problems	28	28	26	25	33
Skin conditions or allergies	24	23	22	25	32
Difficulty with seeing (while wearing spectacles or contact lenses)	16	14	16	19	22
Difficulty with hearing	16	13	17	17	18
Diabetes	9	8	9	8	11
Other physical health or disability issue	7	8	6	8	7
Epilepsy	4	2	4	3	7
Arthritis	3	2	3	4	5
Thyroid issues	1	1	1	1	2
<b>Learning / Socialisation / Other conditions</b>	<b>36</b>	<b>29</b>	<b>41</b>	<b>38</b>	<b>45</b>
Other learning difficulties or disabilities	20	15	25	22	22
Speech problems	10	9	10	9	16
Other progressive illness (not covered elsewhere)	8	7	7	8	13
Autism or Asperger's syndrome	4	3	5	6	4
Other (not covered elsewhere)	4	3	4	3	5

The vast majority of participants (87 per cent) described themselves as having one of the physical health conditions, and only a slightly lower proportion (85 per cent) described themselves as having one of the mental health conditions, as shown in Table 2.1. Around a third (36 per cent) described themselves as having a learning, socialisation or other health condition. Three quarters (75 per cent) of participants had both physical and mental/other conditions.

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In qualitative interviews, staff and participants often talked about mental health conditions being brought on or exaggerated by factors such as long-term unemployment, loneliness, isolation, and a lowered sense of ability (all of which interact and *could* be by-products of initially suffering from a physical health condition).

*'Mental health is high up there I would say. If it's not a primary health condition, maybe it's a secondary. Depression is quite pervasive because they're used to doing things and they can no longer be busy and be their masters of their own destiny.'*

SHDC

There was some variation in the likelihood to have any physical health condition, any mental health condition or any other condition by claimant group (see Table 2.1). Most markedly, almost all ESA WP Completers (97 per cent) described themselves as having a mental health condition, and likelihood of having any physical or other health conditions was also highest among this group (91 and 45 per cent, respectively).

Although JSA Caseload participants were less likely than average to have any physical or mental health conditions (86 and 84 per cent), more than two-fifths (41 per cent) had a learning, socialisation or other health condition, significantly more than average. ESA pre-WCA participants were the least likely to have a learning, socialisation or other health condition (29 per cent).

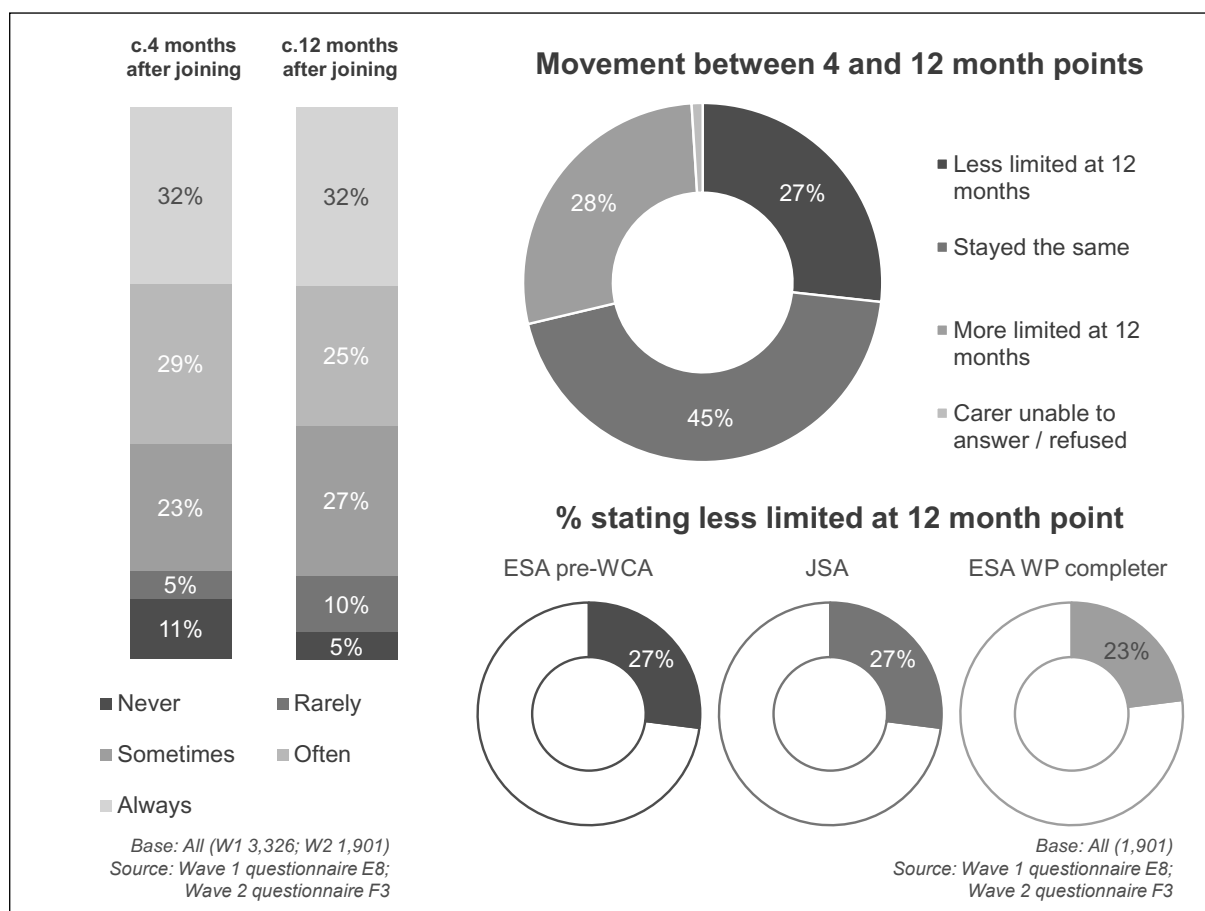
Although the likelihood of having *any* physical health condition was slightly higher than having a mental health condition, when looking at specific health issues, stress/anxiety was the most commonly cited, with around three-quarters doing so (76 per cent).

Just under four-fifths (78 per cent) of participants indicated that their health condition or conditions were long-term. This was slightly less common among ESA pre-WCA claimants (75 per cent), and considerably more common for ESA WP Completers (92 per cent).

At both waves of the survey, participants were asked about how often their health conditions limited the amount or kind of activities that they could do (Figure 2.3). Across the participant group as a whole, the situation was similar at points both four months after joining the Pathfinder (Wave 1) and 12 months afterwards (Wave 2). Twelve months after starting, almost one third (32 per cent) felt they were always limited by their health condition, and a quarter (25 per cent) were often limited. Only one in 20 (five per cent) never felt they were limited by their health condition, while a further ten per cent were rarely limited by it.

Participants' answers to the same question across both waves were compared in order to calculate distance travelled while on the Pathfinder, as measured by two surveys conducted four and 12 months into the trial. Results show that just under a third reported that their health condition limited them to a greater extent (28 per cent), while a similar proportion felt they were less limited (27 per cent) and nearly half saw no change. JSA claimants were most likely to experience a change in this regard; 31 per cent reported that their health condition limited them to a greater extent. This compared to 24 and 25 per cent of ESA pre-WCA and Work WP Completers, respectively.

Figure 2.3 How often participants are limited by their health condition(s)



## Key findings

### Summary of key demographics:

- JSA claimants with a known health condition or disability accounted for the greatest proportion of participants (50 per cent), followed by ESA pre-WCA claimants (38 per cent). Only around one in eight (12 per cent) participants were ESA WP Completers.
- Greater Wessex was more likely to have ESA claimants on the programme (42 per cent pre-WCA and 16 per cent WP Completers). South West Wales had more JSA claimants (61 per cent).
- Overall 54 per cent of participants were men and 46 per cent were women. ESA WP Completers were slightly more likely to be women than the other two groups (52 per cent female). They also had a slightly older profile.

### Characteristics of health condition(s) and related issues:

- Ninety-six per cent of claimants reported having multiple health conditions or disabilities. Nearly nine in ten reported having a physical condition (87 per cent) and a similar proportion reported having a mental health condition (85 per cent).
- Three in five claimants (62 per cent) felt that they were able to manage their health conditions well at a point around six months after joining the Pathfinder.

## Evaluation of the Personalisation Pathfinder Trial

- ESA WP Completers demonstrated a higher density of health issues, particularly in terms of mental health conditions (97 per cent reported that they had at least one). Their health conditions were also considered by this group to have a greater impact on their day-to-day life, and be harder to manage (47 per cent felt able to manage their health condition well, compared to 62 per cent average). Health conditions among this group were also more likely to be long-term; 95 per cent of ESA WP Completers stated that this was the case, compared to 83 per cent of all participants.

## 3 Claimant Employment History

### Chapter overview

This chapter will discuss employment history across the three claimant groups, including what proportion had been in paid employment and details of previous employment. It also discusses individuals' reasons for leaving work.

### 3.1 Employment history

#### 3.1.1 Incidence and nature of employment

Three-quarters (76 per cent) of all Pathfinder participants had been in some form of employment (including paid and unpaid work as well as self-employment) at some point prior to joining the Pathfinder programme. Those who had never worked were typically younger and more likely to say that they lacked the right qualifications, skills or experience to find work (54 per cent of those who had never worked compared with 38 per cent of those who had). There were no differences between those who had never worked and those who had in terms of impact of health condition and ability to manage health conditions.

As shown in Figure 3.1, rates of previous employment were highest among Employment Support Allowance (ESA) pre-Work Capability Assessment (WCA) claimants (86 per cent) and lowest among ESA Work Programme (WP) Completers (66 per cent).

Those who had been in employment at some point before the Pathfinder, were asked about the nature of their most recent job (also shown in Figure 3.1).

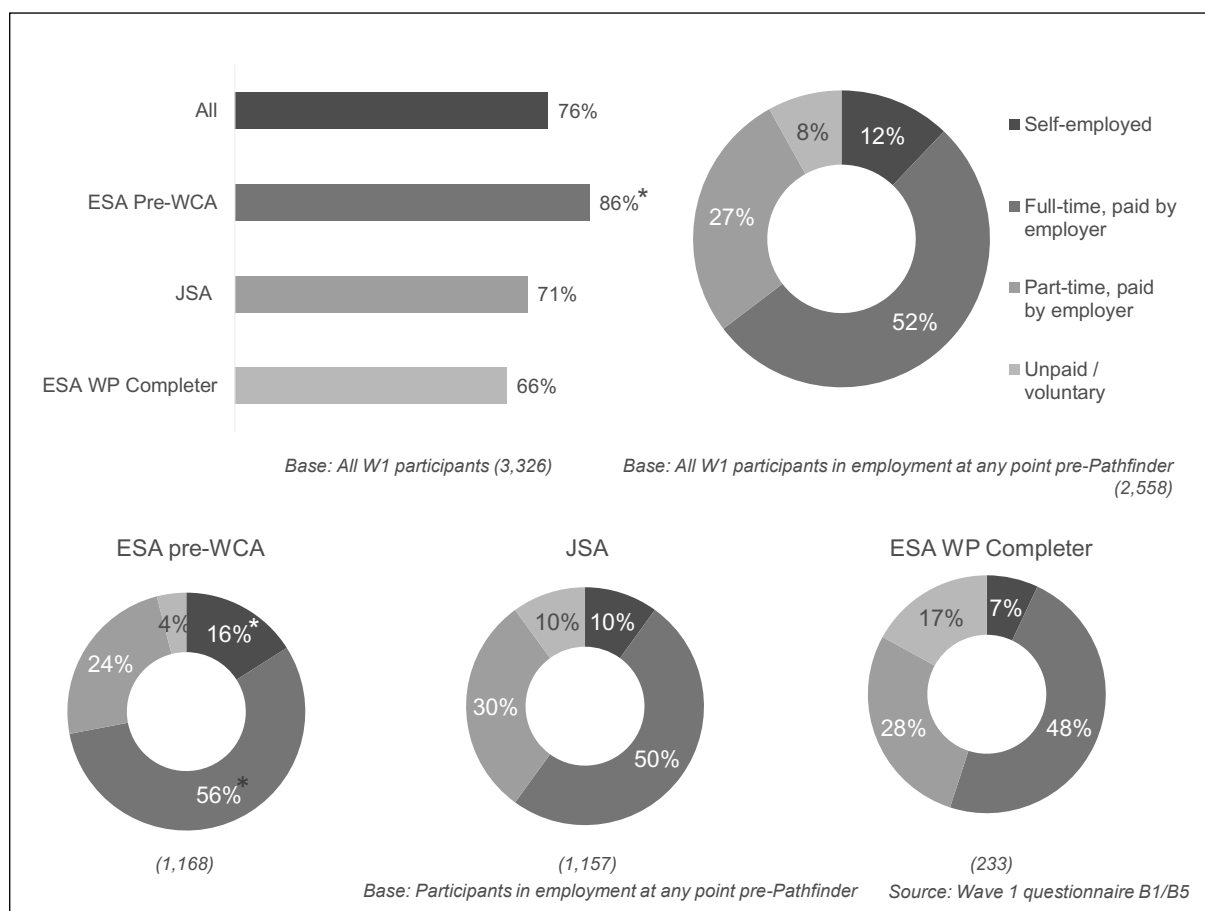
Of this group, just over half (52 per cent) were most recently employed on a full-time contract and more than one quarter (27 per cent) part-time. Smaller numbers cited self-employment (12 per cent) or unpaid or voluntary work (eight per cent).

The nature of participants' previous employment varied depending on their route onto the Pathfinder; while higher proportions of ESA Pre-WCA participants (who also tended to state they had been in employment more recently than the other claimant groups) reported full-time employment (56 per cent), ESA WP Completers were much more likely to have worked in an unpaid or voluntary capacity (17 per cent).

Nature of employment also varied by gender; while male participants were more likely to have worked full-time for an employer (60 per cent) or to have been self-employed (17 per cent), female participants tended to have worked in part-time roles (41 per cent) or in an unpaid/voluntary capacity (ten per cent).



**Figure 3.1 Incidence and nature of previous employment**



Reflecting that full-time employment was most common, the majority worked 30 hours or more per week in their last job (61 per cent) and this was highest among ESA pre-WCA claimants (68 per cent). As well as being less likely to have worked before the Pathfinder as a group, where they did work, ESA WP Completers were more likely to have worked fewer hours (28 per cent worked fewer than 16 hours per week compared to 16 per cent overall).

Most commonly, participants who had had some form of employment before the Pathfinder worked in relatively low skilled occupations – one quarter said they last worked in elementary occupations (25 per cent). The spread of occupations was relatively consistent across each of the three claimant groups as show in Table 3.1.

**Table 3.1 Occupation last worked in**

<b>Occupation</b>	<b>All %</b>	<b>ESA pre-WCA %</b>	<b>JSA %</b>	<b>ESA WP Completer %</b>
<i>Base: Those who worked before the Pathfinder</i>	(2,558)	(1,168)	(1,157)	(233)
Elementary occupations <sup>16</sup>	25	21	30	26
Caring, leisure and other services	14	16	12	13
Sales and claimant service occupations	13	12	14	16
Skilled trades occupations	13	16	11	12
Process, plant and machine operatives	10	10	10	11
Administrative and secretarial roles	7	6	7	7
Associate professional and technical roles	6	7	6	4
Professional occupations	6	7	4	5
Managerial directors and senior officials	5	5	5	7

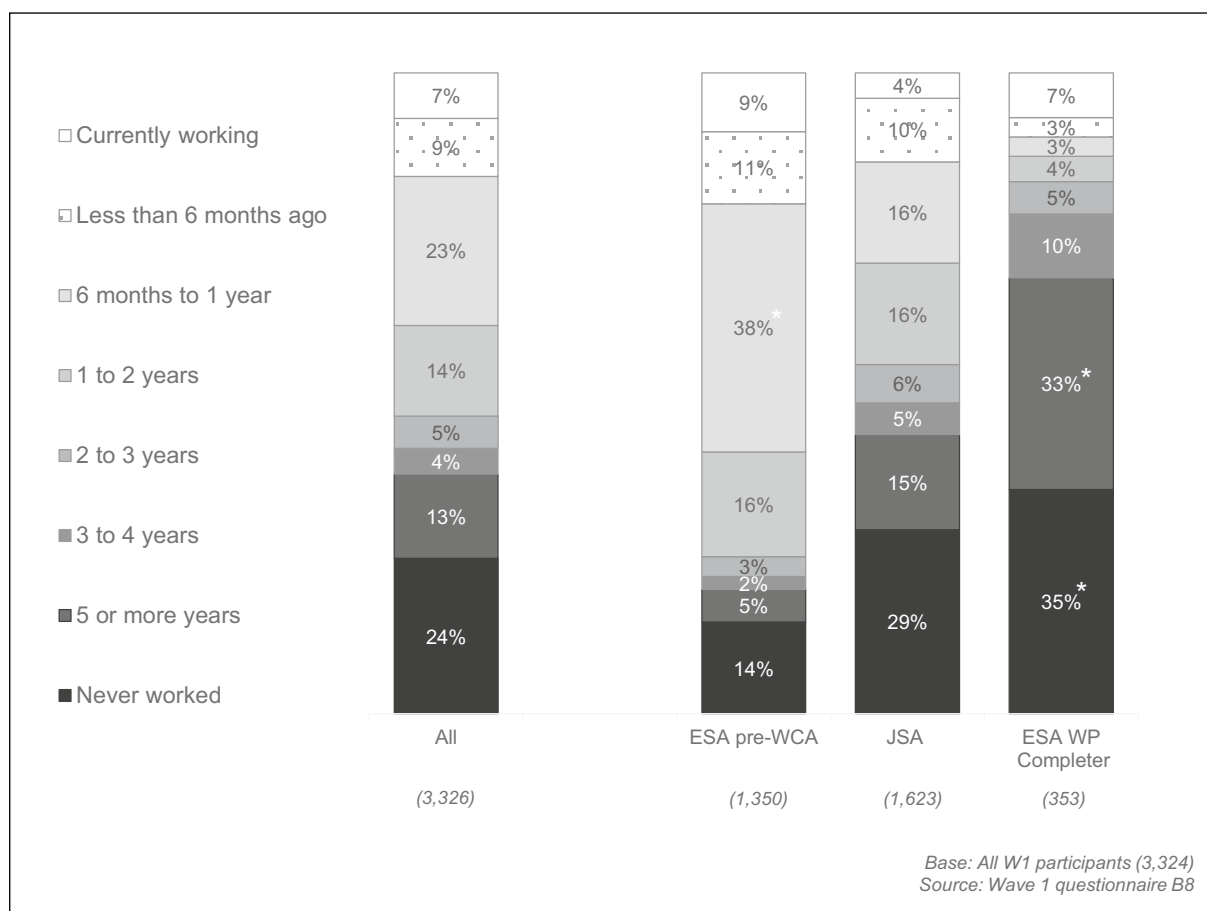
### 3.1.2 Length of time since last worked

Participants were also asked about the length of time since they were last in employment to gauge how far removed from the labour market they were (shown in Figure 3.2).

ESA WP Completers, who by the time of joining the Pathfinder had completed a two-year cycle of the WP and, as shown in the previous chapter, were most likely to have a long-term health condition, were most likely to report that a longer period had elapsed since they were last in employment; one-third, 33 per cent, stated they had not worked for a period of five years or longer which compared to just 13 per cent of all participants. This is in addition to roughly another third of ESA WP Completers (35 per cent) who had never worked at any point prior to the Pathfinder.

<sup>16</sup> Occupations which require the knowledge and experience necessary to perform mostly routine tasks. Most occupations in this major group do not require formal educational qualifications but will usually have an associated short period of formal experience-related training.

Figure 3.2 Length of time since last worked

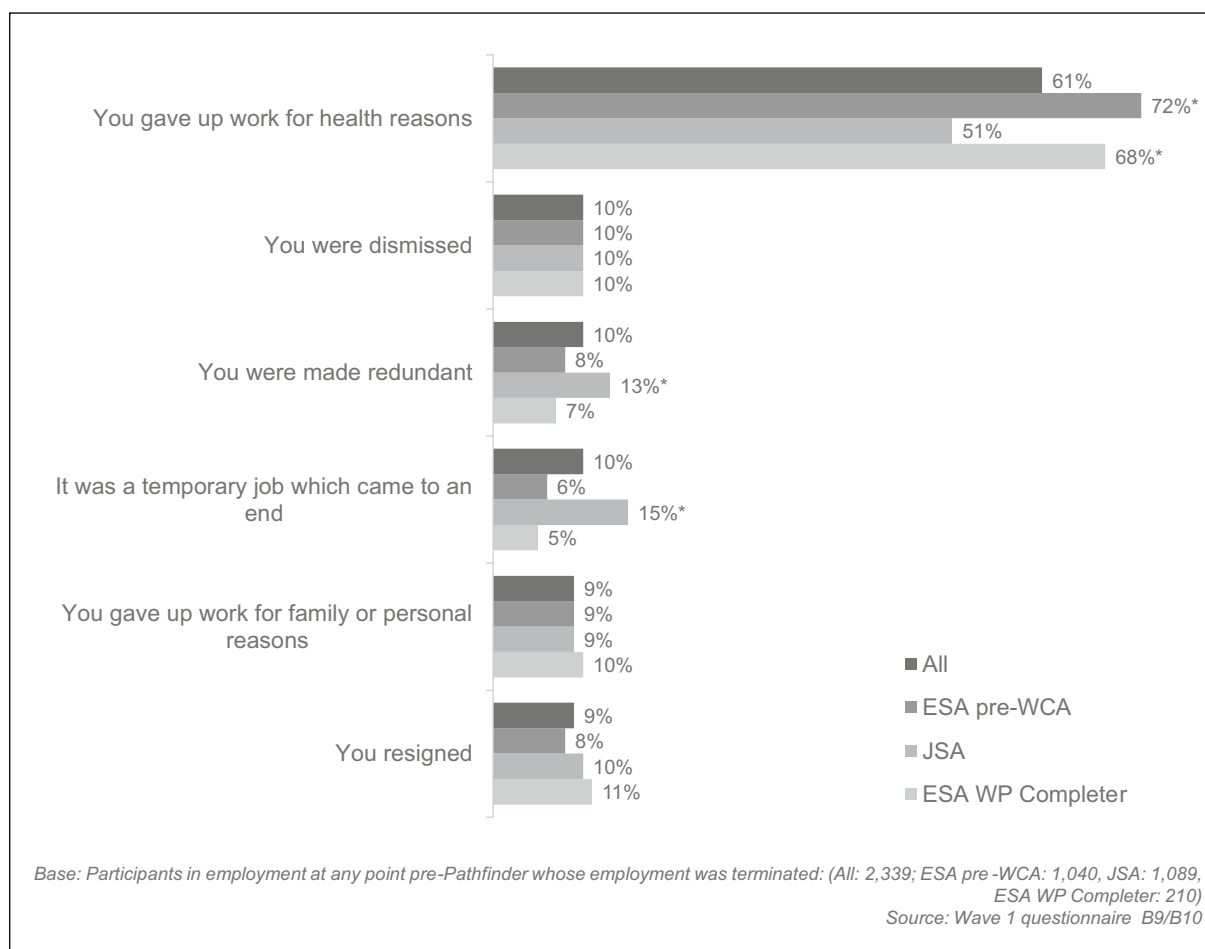


ESA pre-WCA claimants were the group who had the most recent interaction with the labour market – almost two-fifths (38 per cent) had worked between six months and a year prior to starting the programme. A further one in ten (11 per cent) had only stopped working in the six months before joining the Pathfinder.

### 3.1.3 Reasons for leaving most recent employment

Those participants who had worked before joining the Pathfinder but had stopped working in that job by the time of the research were asked why this was the case. In the majority of cases (61 per cent), participants had stopped working because of their health condition or disability. Roughly equal proportions stated they left their previous role because they were made redundant or were dismissed, it was a temporary job that had come to an end, they resigned or left for family/personal reasons (each cited by roughly one in ten).

Figure 3.3 Reasons for leaving most recent employment



## Key findings

The employment history across the three claimant groups was diverse, reflecting their respective routes onto the Pathfinder and the various work related activities they may have been involved in as part of their benefit claim immediately before joining the programme. That said, the majority of participants had been in employment (paid or unpaid) at some point before joining the Pathfinder (76 per cent). Those who had never been in employment prior to joining the Pathfinder were typically younger and could therefore be argued to have had less time to work.

The majority had left their previous employment due to health-related reasons (61 per cent) and regarded their health as a key barrier to going back to work (74 per cent).

Conversely, those joining the Pathfinder having completed the WP as ESA claimants (the vast majority of whom reported having a long-term health condition) regarded their health condition or disability as a considerable obstacle to returning to work, cited more barriers to entering into work and as such were more likely to rule out employment as a viable option.

# 4 Set-up of the Personalisation Pathfinder

## Chapter overview

This chapter includes qualitative findings related to the set-up and delivery of the Personalisation Pathfinder. This includes an overview of the job roles introduced as part of the trial, details of training provided to staff, and use of the Personalisation Fund.

## 4.1 Training for Jobcentre staff

### 4.1.1 Recruitment staff

Jobcentre Plus administrative staff were only utilised in the selection and recruitment of Employment Support Allowance (ESA) pre-Work Capability Assessment (WCA) claimants, as this was the claimant group requiring proactive contact to be made; Jobseeker's Allowance (JSA) claimants and ESA Work Programme (WP) Completers were recruited via scheduled and/or mandatory meetings. Their primary role was to make first contact with potential claimants – usually via the phone and with the aid of a provided script - and invite them into an introductory session about the Personalisation Pathfinder.

While recruitment staff were not provided with any formal training for the role, they were given a background introduction and guidance documents to support them. Due to their previous experience with speaking to claimants, few felt the need for further training to prepare them for the role, as much of it was intuitive.

*'We were just given a basic rundown of what the pilot was all about. There were a couple of exchanges [in relation to] the letters that went out originally, to get the correct format [and decide] how it was to be worded. And then we were just told this is how you do it, that was it.'*

(Recruitment Staff)

Some recruitment staff felt that the guidance documents provided around selecting appropriate individuals for the Pathfinder were 'woolly' and unspecific; they usually relied on their own experience to determine who was appropriate or not, as well as support from the Coaches if needed.

### 4.1.2 Specialist Health and Disability Coaches

The Specialist Health and Disability Coach (SHDC) (also referred to as the 'Work Coach') role was introduced as a novel element of the Pathfinder. The role was intended to combine the previous Disability Employment Allowance (DEA) and ESA adviser roles, but with greater time and flexibility available to claimants. Work Coaches were responsible for working closely with claimants through frequent meetings to

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identify support needs, and were to be a consistent point of contact for individuals on the Pathfinder. Their overall goal was to get claimants into employment, and improve their general wellbeing and ability to manage their health condition or disability. To address this, their role included:

- Building a background file and action plan for each claimant to record personal history and information;
- Referring individuals to relevant additional support, such as career advisors, Journey 2 Employment (J2E) (if available) or health professionals; and
- Exploring what support claimants need and communicating this to Partnership Managers to ensure provision was in place if possible.

Approaches to preparing individuals for their new roles were largely dependent on previous experience working with claimants with health conditions and disabilities. That said, all Work Coaches should have attended an initial launch event to raise awareness of the Personalisation Pathfinder, and set out the new approaches and logistical factors around helping claimants.

It was also typical for Work Coaches to receive training from a Work Psychologist around active listening, motivational interviewing, persuasive technique, and treating claimants with autism from a Jobcentre Plus perspective.

Beyond this, differences in the support and training offered to Work Coaches tended to be dependent on District:

- In South West Wales, staff varied somewhat in relation to previous experience working with claimants with health conditions. While some were previously DEA advisers, others had worked solely with JSA claimants, and therefore had no prior experience providing health-related support. Training needs were typically identified through a skills audit, with appropriate training subsequently built into staff's development plans and objectives. Training offered included appropriate Coaching on language and behaviour, mental health and domestic abuse awareness and healthy lifestyles.

*'They've done a lot of getting people to come in and give us information on different health conditions and things like that as well. So that's been quite good to sort of see that side of things, and have that kind of training. The awareness: they've done a lot of building awareness of different health conditions and things and what's available for those people – the organisations that are around and things like that.'*

SHDC

- As most Coaches in Greater Wessex had previous experience of working with health issues, either through previous schemes such as Early Intervention or their roles as ESA advisers, training largely focused on recruitment and partnerships with external organisations such as Access Dorset (J2E provider).

*'I've been on the health and disabilities team for ten years now. We had done the early intervention pilot locally, which is quite similar to Pathfinder in some ways. So, it wasn't a huge change, really.'*

SHDC

- Similarly, in Surrey and Sussex most Coaches had prior experience of working with claimants with health conditions. As such, they focused training on the cultural challenges of the Pathfinder – getting Coaches to understand how to listen to claimants in a way they might not have before, and explore issues beyond employment (such as family issues and their health condition). Staff

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members who had previous experience working with health conditions and disabilities (i.e. DEAs and ESA Coaches) were often utilised to support those with less experience working on the Pathfinder.

*'We were already working with those claimants [with health conditions], to be honest with you, so for us it was just a transfer for pilot markers because we were already doing a lot of work around that.'*

SHDC

Training was sometimes felt to be insufficient, particularly for individuals who had no prior experience of working with claimants with health conditions. There was also a sense that the aims of the Pathfinder and specifics about certain elements were not communicated as clearly as possible at the start of the project. That said, Coaches tended to seek support and guidance in these areas as the Pathfinder progressed, and felt, for the most part the resource was there for them to do so.

### 4.1.3 Partnership Managers

The Specialist Partnership Manager was a new role introduced as part of the Personalisation Pathfinder trial. Each District participating in the trial had two Specialist Partnership Managers, tasked with developing relationships with local employers, services and key partners, such as local authorities, specialist employment support, health services, education providers and social care. The Partnership Managers were also responsible for raising disability awareness among local employers and for representing DWP on local boards such as the local authority, health providers, local enterprises and mental health trusts. Specialist Partnership Managers were further tasked with ensuring the District Provision Tool was kept up to date on provision and services available to support people with health conditions or disabilities.

It was rare for Partnership Managers to have received training ahead of starting their role. Most had previous experience managing or working with local provision in their Districts, and felt as there was *'no blueprint for the role'* training was not needed – they predominantly learnt on the job.

Where Partnership Managers were comparatively inexperienced they received some training and support from partnership teams external to the Pathfinder, typically around building relationships.

## 4.2 Personalisation Fund

Additional financial resource, known as the *Personalisation Fund*, was allocated to each District delivering the Pathfinder programme. This was intended to be used in addition to provision funded locally via the Flexible Support Fund<sup>17</sup>, to enable

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<sup>17</sup> The 'Flexible Support Fund' (FSF) gives Jobcentre Plus Districts greater freedom to tailor back-to-work support to individual and local need. Working within local guidelines and priorities, Jobcentre Plus advisers have discretion to decide how to help individuals move closer to or into work. The FSF also includes a grant funding mechanism, enabling Jobcentre Plus District Managers to award funding to local 'partnerships' to address barriers to work. There is no exhaustive list of the needs that may be met by the FSF, but examples include travel expenses, training courses and clothing for interviews. The FSF is available to assist all Jobcentre Plus 'claimants' that are awarded a qualifying benefit. (Source: <http://researchbriefings.parliament.uk/ResearchBriefing/Summary/SN06079>)

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claimants to have access to a much wider range of local health and disability specialist support providers. The aim was for participants on the Pathfinder to exercise greater choice and control over their support package.

Staff perceived the uptake of the Personalisation Fund to be fairly low, due to:

- **Confusion over its intended use** - Staff had differing views on the types of support they could utilise the fund for. While many were under the impression that the fund could be used to address *any* barriers to employment, others understood that it should only be drawn for barriers specific to a claimant's health condition or disability. Furthermore, many felt that when Personalisation Fund requests were submitted within the scope of their understanding, they were often rejected.
- **Prioritisation of other funding routes** - Many commented that they had been instructed to pursue free provision and usual funding routes, such as the Flexible Support Fund (FSF) and Low Value Provision (LVP)<sup>18</sup>, before calling on the Personalisation Fund as a '*last resort*'. In most cases, these channels addressed funding needs, and the Personalisation Fund was not required. That said, some Coaches commented on how the process for LVP funding felt too prolonged considering the needs of some claimants.

*'No [I didn't use the Personalisation Fund]. They move the goal posts. Originally it was sold as we could use this for training for our claimants and then when we asked about training for our claimants we were told it was only for health-related things for treatments and support which mostly is the sort of stuff that's actually available out there already and our claimants are involved in, so I didn't actually use any.'*

SHDC

*'We tried to access this pot of money but we can't seem to get access to it for anything. [If something] wasn't being met by the £150 Flexible Support Fund, which was separate from this Personalisation Pathfinder pot of money, we [were] then having to go through the LVP route. I never heard of anybody being able to access this amount of money that had been set aside for Pathfinder. It was just like we were with everybody else with what we could pay for with all the mainstream claimants. I don't know where that money was or who to go to because everything we tried was just through the normal flexible support fund as every other adviser had access to, so, bit of a mystery, really.'*

SHDC

*'We did pay for the Gamelan<sup>19</sup>. That was two weekly courses. I never put in a bid myself for an individual case, because you have to go through the other options first. I did try once and it didn't happen. It was turned down.'*

SHDC

Due to the issues faced when attempting to utilise the Fund, many staff felt clearer communications around its availability and precise purpose were needed.

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<sup>18</sup> Low Value Provision (LVP) is used to provide short vocational and occupational training to claimants who have a job offer or need training to be able to compete for vacancies in their local labour market. (Source: <https://www.gov.uk/government/publications/low-value-provision-lvp-online-application-and-guidance>)

<sup>19</sup> A music workshop centred around traditionally Indonesian percussion instruments.



## Key findings

The level of training delivered to staff working on the Personalisation Pathfinder was largely dependent on prior experience and job role. While recruitment staff and Partnership Managers did not feel their roles required more extensive training, some felt that the training did not sufficiently address the fact that not all Specialist Health and Disability Coaches (SHDCs) had prior experience working with claimants with health conditions and disabilities.

Staff indicated that use of the Personalisation Fund was much lower than originally anticipated; this was related to uncertainty around the types of support they could access the fund for, some bids being rejected, the prioritisation of former funding routes such as the Flexible Support Fund (FSF) and Low Value Provision (LVP) and the fact that some provision was already available free of charge.

# 5 Recruitment onto the Pathfinder

## Chapter overview

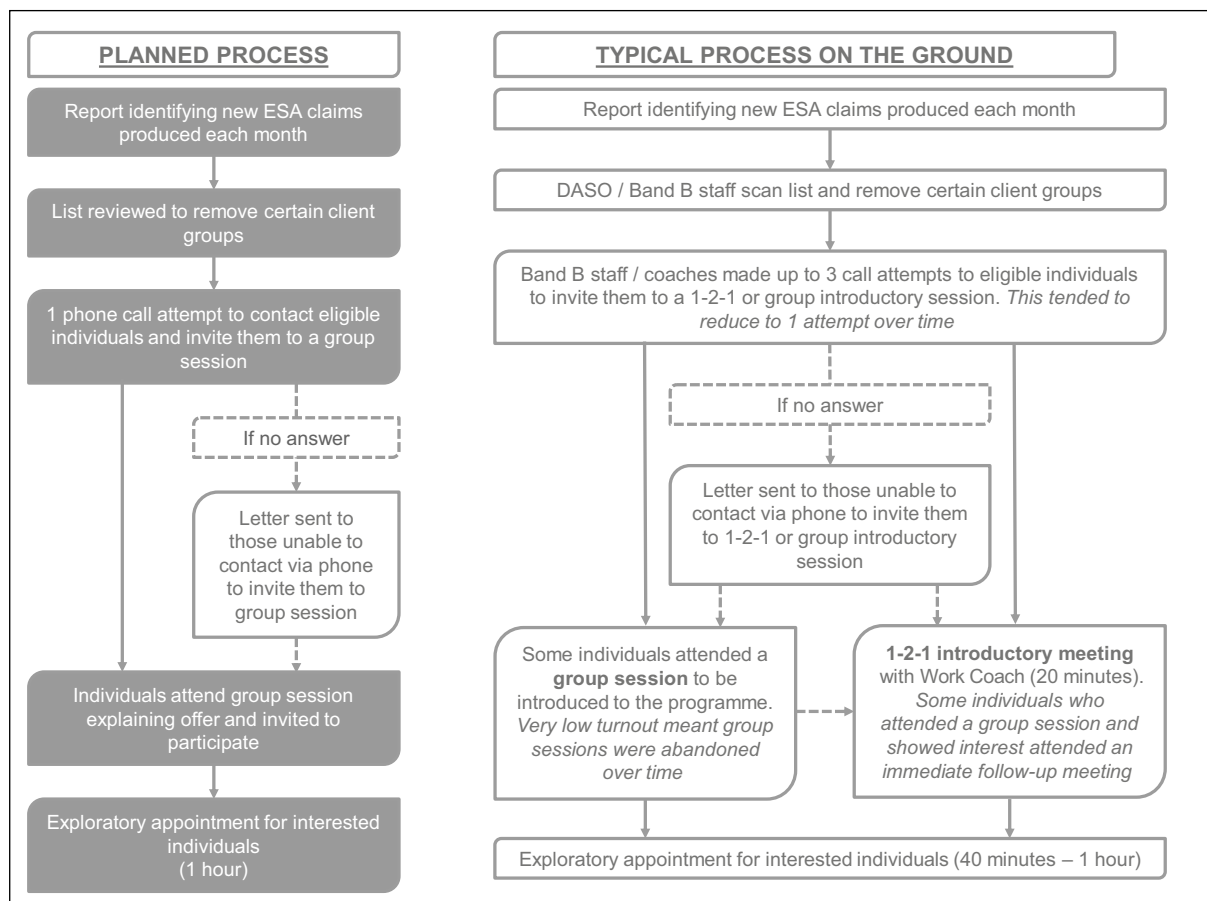
This chapter will discuss qualitative and quantitative findings related to recruitment of claimants onto the Pathfinder. It will discuss staff approaches to and experiences of recruitment; including what challenges they faced. This chapter also includes qualitative and quantitative findings related to claimants’ motivations for signing up to the trial.

### 5.1 Claimant recruitment

#### 5.1.1 Overview of recruitment processes

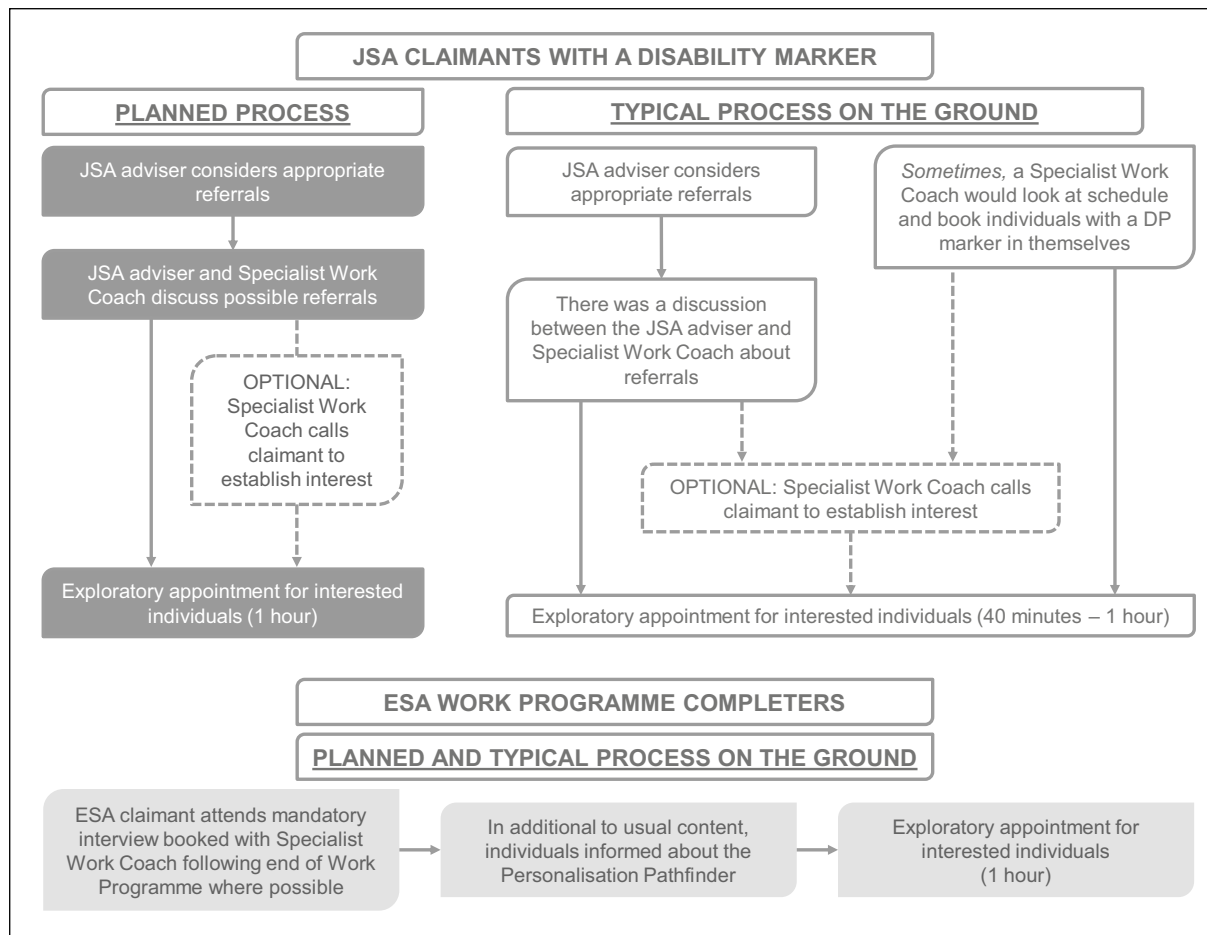
When the Personalisation Pathfinder was first launched, Department for Work and Pensions (DWP) set out the processes to be followed for recruiting each claimant type onto the programme. As shown in Figures 5.1 and 5.2, the reality of recruitment processes, as described by stakeholders, was largely in line with core structure of the original plans.

**Figure 5.1 Process for recruiting ESA pre-WCA claimants**



Deviations were attributed to the continued development of the approaches to optimise uptake – these will be explored in greater detail throughout this chapter.

**Figure 5.2 Process for recruiting JSA claimants with a known health condition or disability and ESA Work Programme Completers**



### 5.1.2 Identifying claimants

The process for initially identifying claimants for the Pathfinder programme was fairly similar across each District, and, in the main, followed the intended structure.

For Employment Support Allowance (ESA) pre-Work Capability Assessment (WCA) claimants, recruitment staff would receive a list of new ESA claimants each month, which they would review and remove unsuitable candidates from. Individuals were usually considered unsuitable for the programme if they were severely or terminally ill, diagnosed with cancer, or approaching pension age. Other factors sometimes taken into consideration were their parental status and age of children.

As per the original plan, most Jobseeker’s Allowance (JSA) claimants were selected for the programme by their JSA adviser. Specialist Health and Disability Coaches (SHDCs) commented that referrals were likely to be made for those with health conditions, who JSA advisers felt would particularly benefit from the extra time, support and flexibility offered through the Pathfinder. Surrey and Sussex was the only District in which staff expressed a slight deviation from this process; some Work Coaches indicated that as referrals began to reduce (due to lowered priority among JSA advisers), they found it more effective to identify relevant JSA individuals themselves, and assign upcoming appointments with these claimants to their own schedule.

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Across all Districts, Coaches generally took a ‘catch all’ approach to Work Programme (WP) Completers; the programme was typically pitched to all individuals who attended their mandatory WP Completer interview.

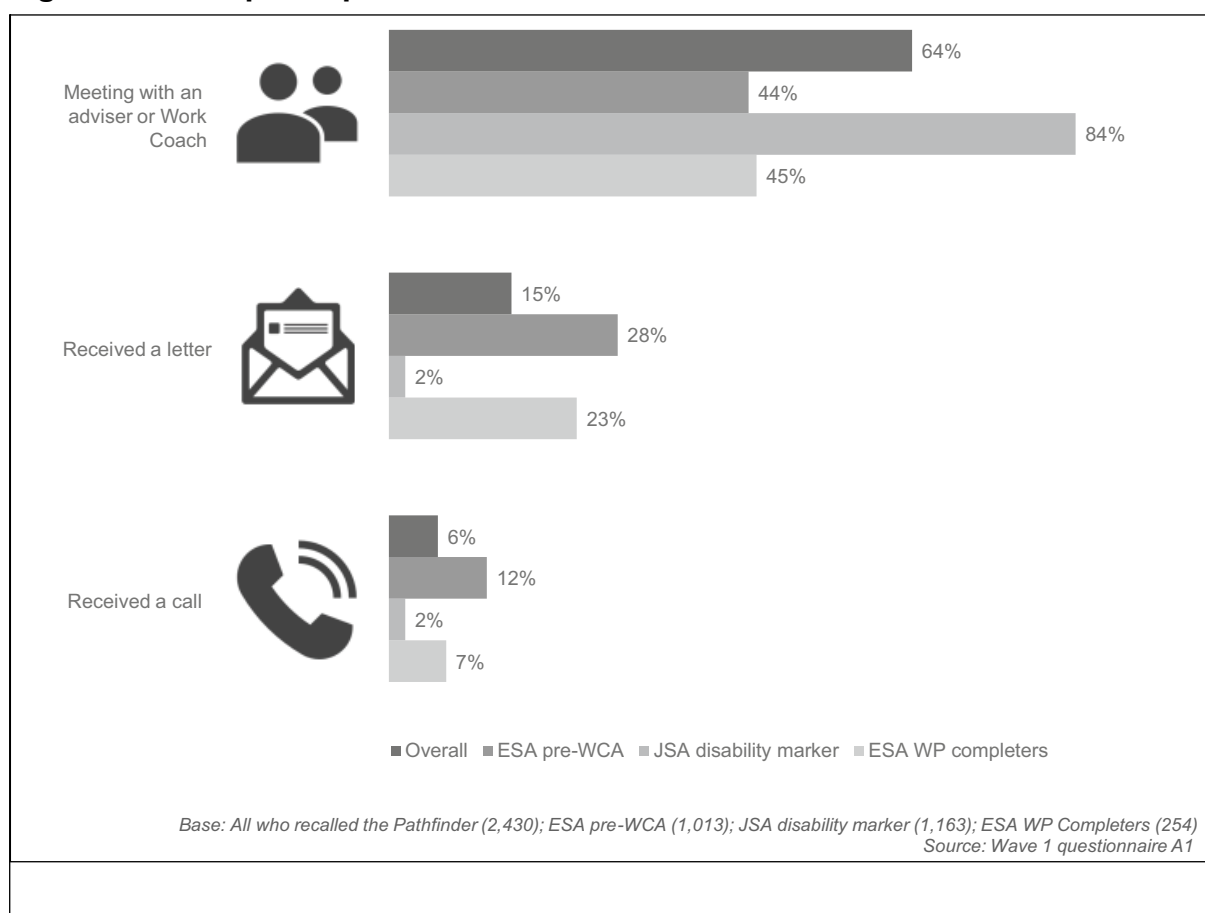
### 5.1.3 Experience of recruitment

#### First contact

Once potential participants for the Personalisation Pathfinder had been identified, they were either invited into the Jobcentre (via phone call or letter) for an introductory session, or informed about it at one of their mandatory/pre-scheduled meetings.

Most participants (64 per cent; see Figure 5.3) stated that they first heard about the Personalisation Pathfinder during a meeting with a Jobcentre adviser or Work Coach. Only 15 per cent recalled receiving a letter, and six per cent a phone call.

**Figure 5.3 How participants first heard about the Pathfinder**



Letters and phone calls were comparatively more common among both ESA groups, particularly ESA pre-WCA participants (28 per cent received a letter and 12 per cent received a call). These higher proportions (comparative to JSA claimants) are in line with the different claimant approaches outlined by staff in regards to recruitment, however the fact that these individuals were still more likely to state that they first heard about the Pathfinder through a meeting indicates these initial communications may have been more ‘light touch’ than informative.

## Evaluation of the Personalisation Pathfinder Trial

Overall, just over half (54 per cent) of the participants who recalled receiving a phone call or letter felt the communication was clear in terms of explaining the aims of the personalised support and informing them about what would be available. Participants who received a phone call were considerably more positive in terms of clarity; 71 per cent described the call as clear compared to 46 per cent who received a letter.

Those who received a letter implied that their own focus had been on the appointment element, as opposed to the additional information about the Pathfinder. They felt the information did not sufficiently introduce the programme itself.

*'I wish the programme had been a bit clearer rather than just a piece of paper. Some people don't take that in, they just see I'm on benefits if I don't turn up do I lose my money?'*

(ESA WP Completer claimant, Surrey and Sussex)

Staff also expressed a preference for establishing first contact via a phone call rather than by post (indeed, for most the latter was only used as a last attempt to contact individuals). This preference was rooted in the effectiveness they experienced in establishing an open dialogue with individuals from the start. They felt that conversation was the best approach for selling the programme successfully, and conveying its personalised nature.

Across all Districts, staff involved with initial recruitment described the process as time consuming and onerous, particularly when dealing with ESA pre-WCA claimants. They attributed the magnitude of the task among these claimants to ambitious targets, difficulties in establishing first contact, and high levels of refusals and 'no shows'.

Refusals were often health-related, with some staff commenting that many individuals had suffered injuries or illnesses that meant support was being offered too soon into recovery, while others did not want to be contacted at all while they were ill.

*'When we were able to get hold of them, some didn't want to be bothered because they were ill. I found that they didn't want to be contacted in any way, I felt it was too soon to contact them for some cases. Some refused straight away, they didn't want the help, it didn't matter what we were offering, they didn't want the help.'*

(Recruitment Staff)

Other refusals were said to stem from individuals not feeling the need for any additional help, either because they were already receiving support, or they had a job to return to. The latter was particularly relevant for many ESA pre-WCA cases.

*'Some were already receiving help from other organisations, particularly people who either had alcohol or drug dependency, or people who had psychiatric issues, they tended to be receiving outside help. Others had a job hopefully to return to, so they were confident that once their condition had improved they would be returning to that job.'*

(Recruitment staff)

Some felt claimants were passively agreeing to the appointment to 'get them off the phone' - these cases often resulted in a failure to attend.

*'When we did explain, some of them I felt just went along with it just to please you. Just get through the phone call, book the appointment and then perhaps they wouldn't turn up.'*

(Specialist Health and Disability Coach)

## Evaluation of the Personalisation Pathfinder Trial

Staff also felt that underlying the poor response rate were issues with the original script and letter they were instructed to use during recruitment. These initial communications were seen to be:

- Too work-focused;
- Too wordy and bland (nothing to 'grab attention');
- Lacking in concrete examples of opportunities on the programme; and
- Too strongly emphasising the voluntary aspect of the initial appointment.

Although staff referred to both the provided script and letter when discussing these issues, most problems, particularly in terms of the emphasis placed on the voluntary nature of the programme, were felt to be more detrimental on uptake for those who received the letter. Furthermore, it was the voluntary element which was felt to have had the most negative impact on responses. Individuals were felt to lose interest as soon as they realised the appointment was not mandatory.

*'When they found out it was voluntary not mandatory, they didn't want to know. They said if it's mandatory well yes I'd have to come along now listen, because it is not, and so especially the younger age range, why would I waste my time?'*

(Recruitment Staff)

Changes to the communications to address these issues were often made by staff, and tended to result in improved uptake.

*'We started off with the script that we were given, which didn't really work at all. It's about it being voluntary. I think it said it twice, it might have been more than that. And once they heard that they said 'No, I'm not interested. Bye.' and that was the end of it. We re-worded that completely, and did seem to get results.'*

SHDC

*'The letters for Pathfinder had it clearly stated that this was a voluntary interview, to such an extent that we did revise it as time went on to try and reduce the impact of it. It was still in there but it wasn't the main focus; it was farther down in the letter rather than at the top... The result was that [individuals] did start to turn up.'*

SHDC

Another adaptation that improved recruitment was a movement towards Work Coaches making the initial contact themselves as opposed to Recruitment staff. Even those who did not make this change concluded that this approach would have been more effective, as they felt Recruitment staff lacked the knowledge to be able to respond readily to issues raised and provide good insight into the support available.

*'There should have been a team of Work Coaches, advisers, who are making the calls because they were the ones who at the end would be helping them. They have a lot more information to give them and are able to listen to them longer and to help them more. We weren't giving them the full service that we probably would have liked to have given. Whereas the Work Coaches, if they had phoned them they might have had a bit more success.'*

(Recruitment staff)

Among those who had utilised this approach, it was also seen as an important tool for building rapport between the Work Coach and individual.

## Evaluation of the Personalisation Pathfinder Trial

*'We felt that it was about that relationship, so it was important that the Work Coach would make that initial enquiry. We always feel that, as the Work Coach, the minute you have that interaction you are starting that relationship.'*

SHDC

### Introducing the Pathfinder programme

#### ***Introductory session***

Sessions to introduce the Personalisation Pathfinder were carried out by Work Coaches, either in a group setting or one-to-one meeting:

- Group information sessions usually consisted of a PowerPoint presentation with an opportunity for group discussion and questions.
- One-to-one meetings tended to last around 20 minutes. They were either used in isolation, or as a tool to secure recruitment of interested claimants immediately following a group session.

Most participants (83 per cent) said that they attended an interview with a Jobcentre Plus adviser to learn more about the Personalisation Pathfinder, while only five per cent attended a group session, and four per cent experienced both.

Six per cent of ESA pre-WCA claimants attended a group, a slightly higher proportion than among JSA claimants (four per cent) and ESA WP Completers (three per cent).

As shown in Figure 5.1, the original intention was for the group information sessions to be utilised among all ESA pre-WCA claimants. Indeed, many staff alluded to the necessity to speak to claimants in groups in the first instance, purely to accommodate the large volume of claimants within the confines of limited diary space and staff capacity. As the trial progressed, however, most group sessions were abandoned due to very poor attendance rates across all Districts and the perceived effectiveness of one-to-one sessions.

Staff felt that low attendance at group sessions was driven by their voluntary nature and the typical characteristics of potential participants – particularly the prevalence of anxiety or other mental health issues, meaning the prospect of a group session and divulging personal information to strangers was daunting. This view was supported in claimant qualitative interviews; individuals who decided not to attend a group information session, and even those who did, often remarked on the anxiety it had induced.

*'There were very few comfortable with the group sessions. I think there was about two in the whole of the time I did it that said they didn't care that they were in a group session. A lot of them didn't turn up even if they said they would, because they felt it's like an AA meeting, they'd have to talk about themselves and what was wrong before they'd get help and they did not want that. It is very personal, whatever is wrong.'*

(Recruitment Staff)

Almost three-quarters (74 per cent) of those who experienced the group session felt that information about support on the programme was presented clearly.

Staff expressed mixed views on the effectiveness of group sessions (when claimants did attend them). Some commented that they felt the group setting was incongruous with the essence of the programme being to offer personalised support, while others experienced good conversion rates off the back of them (despite generally low

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attendance at group sessions). That said, successful conversion was usually in the context of following up with interested individuals immediately after the session with a one-to-one meeting.

Views on one-to-one sessions were, overall, much more positive. Staff felt they were a far more effective tool in recruiting participants, as they were better able to put claimants at ease and ensure individuals had a good understanding of what the programme entailed.

In line with this, over four-fifths (81 per cent) of individuals who attended a one-to-one meeting felt that the information provided about the personalised support they could receive was clear. This was significantly higher than the 74 per cent citing clarity in relation to the group sessions.

Claimants described the meetings as personal and relevant, and relayed how Coaches were knowledgeable, friendly and reassuring.

*'[The meeting was] brilliant. My Work Coach was amazing about it. She was explaining that it's going to be a comfortable environment, it was non-judgemental, and that if I felt like it was getting too much I could always walk out.'*

(JSA Caseload claimant, South West Wales)

Staff felt that a lot of the issues they faced during recruitment could have also been addressed by making the first meeting a *mandatory* session at the Jobcentre. They stated that this would be much more effective, particularly among ESA claimants who do not otherwise need to come into the Jobcentre, and result in much higher conversion rates, as many were convinced only after hearing more about the programme.

*'The voluntary letters didn't work as well as if they'd actually been spoken to on the phone, which is why it would be fantastic if every new ESA person had a mandatory appointment at the beginning just to be told about what support's there. Because they have no idea. As far as they're concerned, they're sick; they can't work. Someone's told them they can't work so I'm going to sit here and wait until I've got a mandatory appointment in the Jobcentre. So if they had that appointment in the beginning, just to tell them about what's available.'*

SHDC

### **Presenting the Pathfinder**

How the Pathfinder was pitched to claimants was thought to be key in successful recruitment. Although Work Coaches tended to have their own nuanced approaches to this, common themes - considered to be particularly useful - included:

- Focusing on the softer goal of 'moving them forward' as opposed to 'into employment';
- Emphasising that the journey was not 'pre-mapped', less pressurised, and would be tailored to their individual needs;
- Establishing that they would be a consistent contact at the Jobcentre Plus; and
- Offering advice and guidance on their benefits.

Staff felt that by focusing on its aim of improving overall quality of life, and only mentioning movement towards work '*softly*' and towards the end resulted in a less pressurised introduction to the Pathfinder, and prevented people from prematurely concluding that it was not right for them and their situation at the time.



## Evaluation of the Personalisation Pathfinder Trial

Particularly among ESA pre-WCA claimants, staff emphasised the importance of presenting the Personalisation Pathfinder as extra support from a dedicated individual at the Jobcentre, should they need it. They believed that having a consistent point of contact and letting individuals know that they would not be '*forgotten about*' was crucial in reassuring them that their best interests were in mind.

Offering advice and guidance on their benefits was another technique employed primarily among ESA pre-WCA claimants. This was due to the fact that many of these individuals were new to the process of claiming, and lacked knowledge of the stages that would follow. From experience, Work Coaches knew that the process could be confusing for many and, drawing on this, they found that offering support for this alongside the notion that they would be a consistent contact was a good way of attracting claimants to the programme.

### **Awareness of the voluntary nature**

Although the majority of participants (73 per cent) were aware of the voluntary nature of the programme, it was still quite common for people to think it was mandatory; this was the case for nearly one-fifth of participants (19 per cent).

ESA WP Completers were the most likely to think they had to take part (36 per cent), while ESA pre-WCA claimants were the least (14 per cent). One-fifth of JSA claimants (19 per cent) thought the programme was mandatory.

Participants in South West Wales appeared better informed that the programme was voluntary; only 13 per cent believed the contrary, compared to 21 per cent in Greater Wessex and Surrey and Sussex.

Common reasons for believing the support was mandatory included:

- A general assumption that this was the case (31 per cent);
- Believing that the coach/adviser suggested the programme was mandatory (25 per cent);
- Because their previous benefits experience suggested that activities tended to be mandatory (20 per cent); and
- A belief that the initial letter suggested that it was mandatory (13 per cent).

Of those who believed the programme was mandatory, ESA pre-WCA claimants were most likely to have just assumed they had to take part in the programme (38 per cent compared to 31 per cent JSA with a known health condition or disability and 22 per cent ESA WP Completers).

Qualitative interviews revealed that an assumption that the programme was mandatory was rooted in inexperience among ESA pre-WCA claimants (they thought it was '*part of the usual process*' of signing-on to ESA), and the inverse for ESA WP Completers and JSA claimants (i.e. previous dealing with the Jobcentre Plus that *had* been mandatory). ESA WP Completers admitted to '*not taking all the information in*' during recruitment and being fearful of their benefits being taken away, while JSA claimants had often not distinguished between the mandatory nature of their usual meetings at the Jobcentre and the Personalisation Pathfinder.

The qualitative interviews also revealed that beyond the recruitment stage there were many participants who understood the programme's voluntary nature that felt that this was an important characteristic of the support. It was described by participants as giving them a greater sense of control and feeling less pressured than previous support they had received through the Jobcentre Plus.

## Evaluation of the Personalisation Pathfinder Trial

*'The Work Coach said to me 'You don't have to do [these courses], but they still might be benefit. It's up to you'. There was no pressure so that made me feel really good, more relaxed because it was all up to me and my decision if I wanted to go through with it all or not.'*

(ESA WP Completer, Greater Wessex)

This was echoed by staff, and felt to be particularly applicable to ESA WP Completers who were used to *'being forced into doing things'*. Staff commented on the importance of establishing that this would not be the case with the Pathfinder, and the positive effect this had on claimants' responsiveness.

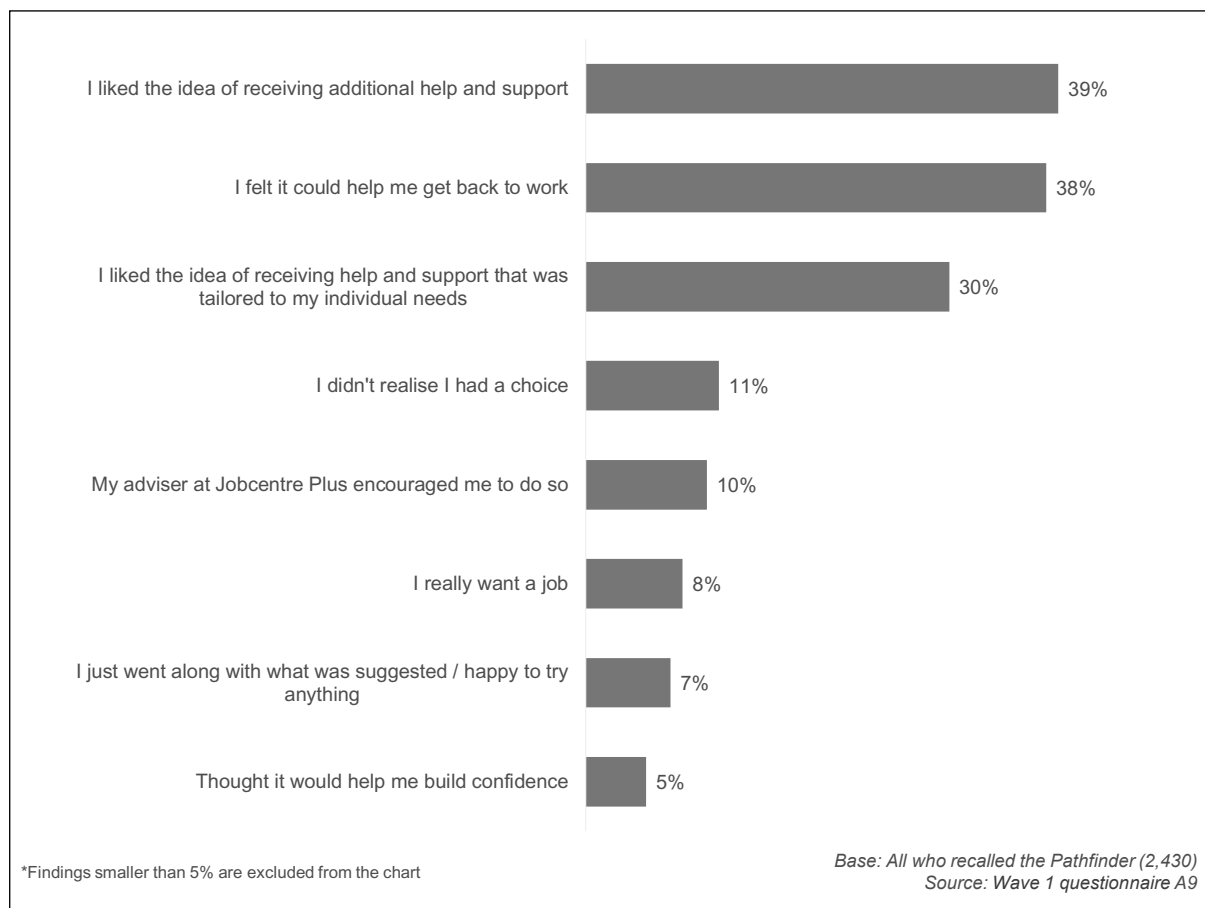
*'The voluntary issue is quite interesting actually, because I have had people who have come back from the Work Programme, have sat down in front of me and you can tell have arrived expecting me to say, 'Right, you're going to do this/you're going to do that/you're going to do this', and they've been quite defensive, and they've said, 'You know I can't work. So when I've said, you know, 'That's fine, you don't have to. This is a voluntary programme', they've almost said, 'Oh don't walk away. I'm interested', you know. The voluntary thing has definitely produced a different reaction from people.'*

SHDC

### 5.1.4 Reasons for taking part

Participants most commonly joined the Pathfinder in order to receive additional help and support (39 per cent), because they felt it could help them get back into work (37 per cent) and because they liked the idea of receiving help and support which was tailored to their needs (30 per cent).

**Figure 5.4 Reasons for taking part in the Personalisation Pathfinder**



Qualitative interviews with claimants highlighted the importance of the more indirect impacts of joining the Pathfinder, such as getting out the house, adding structure to their life, social interaction and confidence.

*‘They just said they will identify your needs and put you on as many courses as you want. I thought ‘great, bring it on’, because I was sat in these four walls and too scared to go out and because I would have somewhere to go on a Wednesday it gave me some structure in my life’*

(JSA Caseload claimant, Surrey and Sussex)

Participants, particularly ESA WP Completers and to some extent JSA claimants, also implied that they were fearful of the impact not taking part would have on their benefits, even if they were aware that the programme was not mandatory.

*‘I did not feel I could say no to the Pathfinder, because if we don’t do what they say, they’ll stop our money.’*

(JSA Caseload claimant, Surrey and Sussex)

## Key findings

Recruitment processes across all Districts largely retained the fundamental characteristics of the intended structure; processes were only adapted to address issues perceived to be detrimental the levels of uptake:

- Changes were made to the original phone script and letter used for making first contact, as these were felt to be too heavily focused on the voluntary nature of the programme and movement towards employment (as opposed to softer outcomes, such as improved confidence).
- Introductory group information sessions, intended for all ESA pre-WCA claimants, were eventually abandoned due to very low attendance, perceived incompatibility with the claimant group (due to the prevalence of social anxiety), and comparative success of one-to-one introductory meetings. They were also felt to be incongruous with the personalised nature of the programme.
- There was a shift from recruitment staff to Work Coaches in terms of who established first contact. This was rooted in the notion that Work Coaches had deeper knowledge of the support available and were better equipped to describe the programme to claimants.

Recruitment of ESA pre-WCA claimants was time-consuming due to the volume of targets, difficulty reaching individuals, and high levels of refusals and non-attendance.

Across all claimant types, staff felt they were much more successful in recruitment when they were able to establish an open dialogue. As such, they felt that making the initial appointment mandatory would have yielded much more successful results.

Nearly one-fifth (19 per cent) of claimants thought that the Personalisation Pathfinder was mandatory; this proportion rose to 36 per cent for ESA WP Completers.

The need for support and a desire to return to work were key drivers in claimant uptake of the programme; 39 per cent joined the Pathfinder because they liked the idea of receiving additional help and support, 38 per cent believed it could help them back to work, and 30 per cent liked the idea of having support more tailored to their needs.

## 6 Experience of the Pathfinder

### Chapter overview

This chapter will discuss qualitative and quantitative findings related to claimant experience of the Pathfinder. This includes experiences of interacting with Work Coaches, the nature of contact and the impact of the increased flexibility and time offered to claimants as part of the Pathfinder. It also discusses the types of support and activities claimants undertook while on the Pathfinder and the perceived usefulness of these. This chapter also includes findings related to length of time spent on the Pathfinder and reasons for leaving the trial earlier than the intended 12 months.

### 6.1 Contact with Coaches

#### 6.1.1 Exploratory sessions

Following the introductory session, the first formal meeting between Work Coach and claimant was an in-depth exploratory meeting. The overall aim of these sessions was to get to know the claimant, their lives, and the barriers they faced in starting or returning to employment. The session was seen as a fundamental stage in setting foundations for a more personalised experience for the claimant, and establishing what support individuals might need while on the Personalisation Pathfinder.

Staff and participants described the meetings as lasting, on average, 40 minutes to an hour. They would usually cover:

- Employment history;
- Interests and hobbies;
- Health issues and how this impacted on their day-to-day and work-related abilities;
- Barriers to employment;
- Goals and aspirations; and,
- Opportunities the Pathfinder could offer, suited to their needs (e.g. courses, health support, work-related guidance etc.)

*'It's that first conversation. It's finding out what have they done before? Can they still do that? If they can't, why can't they do that? What can they do now? And, you know, what are their hobbies as well? I always asked about hobbies because I had a lot of claimants going self-employed.'*

(Specialist Health and Disability Coach)

Work Coaches stressed the importance of taking time with each exploratory session, as it was the first stage in building rapport and trust with the claimant. They felt it was important to put the claimant at ease, and impress the idea that they could move at their own pace throughout.

## Evaluation of the Personalisation Pathfinder Trial

*'It was the starting point to decide at what pace you were going to go with, with that claimant. Most of the time in the exploratory it was just one-to-one, face-to-face. It was more about getting to know them, and them getting to know you.'*

SHDC

The allotted time tended to be an hour, however claimants were not necessarily with staff for the entirety of the slot; staff said that any additional time allowed them to complete related admin, or follow up on discussions for the claimant through internet searches or by making phone calls.

As many Employment Support Allowance (ESA) pre-Work Capability Assessment (WCA) claimants were new to the process of claiming ESA, some Work Coaches indicated that they would also use the exploratory session to go over the different stages of an ESA claim with these claimants and 'what happens next' in the process. For example, they would explain the various forms and administrative tasks that would follow.

Claimant accounts of their initial meetings with their Work Coach were positive, and predominantly in line with what Coaches said they sought to achieve. Many commented on how they felt immediately at ease, and gave positive feedback on their experiences.

*'The meeting was about an hour. It gave me the opportunity to explain what was hindering me getting back to work. She was interested in the side effects of my condition and not just which tablets, but the symptoms and certain jobs I wouldn't be able to do. She seemed like quite knowledgeable on other things I could do that wouldn't affect my benefit so she was more not trying to get me off the ESA but, 'this is what we can do for your peace of mind ... while you're staying on benefits try and help out so in the future if you do feel you can go back to work you've got this behind you' Long term goals. I just felt respected, this woman realises, empathy.'*

(ESA Work Programme Completer claimant, South West Wales)

*'The first meeting was very good; the lady was very good, so I was happy with that. I wasn't expecting a lot that she got me at ease and I was far happier afterwards.'*

(JSA Support claimant, Greater Wessex)

### 6.1.2 Nature of contact

Of the survey participants, six per cent stated that they never met with a Specialist Health and Disability Coach (SHDC).<sup>20</sup> Those who never met with a (SHDC) were asked why this was. Around half (52 per cent) said they were never asked to see anyone or that they were not aware of the (SHDC). One in ten (ten per cent) said their health condition made it too difficult, while four per cent said they found work before their first meeting or that they no longer met the criteria for the Pathfinder.

Excluding those who never met with the Coach, just over half of claimants (53 per cent) met with their Coach seven times or more over the time that they spent on the Pathfinder. This increased to 66 per cent of those who spent the full 12 months on the Pathfinder. In total, Jobseeker's Allowance (JSA) claimants and ESA Work

<sup>20</sup> Questions about meeting with a SHDC were only asked of JSA Caseload claimants, as JSA Support claimants would have continued meeting with their regular Coach.

## Evaluation of the Personalisation Pathfinder Trial

Programme (WP) Completers were more likely to have a greater number of meetings (63 per cent of JSA claimants and 61 per cent of ESA WP Completers had seven or more meetings, compared with 40 per cent of ESA pre WCA claimants).

Qualitative interviews suggested that claimants tended to meet with their SHDC fortnightly, but that this varied depending on their personal circumstances. This was confirmed by the quantitative survey, in which four in ten claimants (43 per cent) said they usually met with their Coach about once every two weeks. One in ten claimants (ten per cent) met every week and this was slightly more common among JSA claimants (14 per cent). ESA WP Completers were more likely to have met less frequently, 37 per cent met once a month.

Qualitative interviews showed that not only the frequency with which Work Coaches and claimants met but also how long they met for, varied considerably and depended primarily on the claimant's needs. This degree of flexibility was also evident in the quantitative survey. One in three claimants (31 per cent) said their meeting typically lasted between 30-44 minutes, while a quarter (24 per cent) said their meetings lasted less than 20 minutes. One in five claimants (22 per cent) said their appointments usually lasted between 20-29 minutes while 16 per cent said their appointment usually lasted more than 45 minutes. The mean length of appointments was 26 minutes.

JSA claimants overall reported shorter typical appointment lengths compared with ESA pre-WCA and ESA WP Completers, perhaps reflecting that the two latter groups did not previously engage regularly with the Jobcentre and therefore found it necessary to spend more time with the Coaches. ESA WP Completers reported the longest appointments (29 minutes, compared with 26 minutes among ESA pre-WCA claimants and 24 minutes among JSA claimants).

Meetings with the SHDC largely took place in Jobcentre Plus offices. Ninety-three per cent of claimants reported meeting with a Coach here. However, more than a quarter of claimants (27 per cent) also had meetings with their Coach over the phone. This was the case for half of all ESA WP Completers (50 per cent) and one in three (29 per cent) of ESA pre-WCA claimants. Only 16 per cent of JSA claimants met with their Coach in this way.

Although JSA claimants continued to attend the Jobcentre at least fortnightly (as per their minimum requirements), Coaches in qualitative interviews said they had more flexibility on the Pathfinder to adjust to claimants' varying situations by extending the length of these meetings.

Meetings with ESA claimants were seen to be much more ad hoc and flexible, compared to those with JSA claimants. Although meetings typically occurred once or twice a month, staff alluded to some cases where they wouldn't see claimants for up to six weeks; contact would still be made with the participant between sessions, however, via phone calls or email. Among ESA claimants, Coaches predominantly allowed the participants themselves to dictate the frequency and length of meetings.

*'It's really depending on the person sat in front of you what you do with them. I did a lot of booking by asking, 'Okay, when do you want to come and see me next? I'll book that in. If you want to come in earlier, if you want to put it off for a couple of weeks, let me know.'*

*The ones on JSA, because they still had to have JSA conditions properly covered, they still had to come in at least fortnightly and sign and there were certain activities they had to have that didn't go away because of Pathfinder.'*

SHDC

## Evaluation of the Personalisation Pathfinder Trial

According to participants and staff factors such as health status, perceived vulnerability of the claimant and activities such as courses, work experience and volunteering were taken into account when scheduling meetings.

Coaches were also able to adapt face-to-face meetings in ways other than frequency and length, in order to suit individual needs. For example, some scheduled appointments for those with social anxiety outside of usual commuting hours, so that they could avoid travelling on crowded transport. Others ensured that private rooms were reserved for sessions with those whose health condition predisposed them to nervousness or distraction in busy environments.

Staff also allowed some meetings to take place by telephone or email, if this was preferential for the participant.

*'It was useful being able to update them on my progress on the fly without having to worry about words and sounds from the telephone and such. I just prefer email – being able to type and think what I want. It made me feel that if, while I wasn't here at the Jobcentre, that they were still helping.'*

(JSA Support claimant, Greater Wessex)

Outside of scheduled meetings, Coaches would usually phone or email claimants to 'check in', to see how individuals were progressing and whether any meetings or additional support was needed. This was seen as particularly important in situations such as those outlined above, when the usual frequency was disrupted or altered due to individual circumstance.

*'Two weeks ago, I was feeling I don't want to do anything in life anymore and she phoned me for two days for 10 minutes to see if I was all right and then she told me I didn't have to come in because I was feeling the way I was. I emailed her and she phoned me to reassure me. She was lovely.'*

(JSA Caseload claimant, South West Wales)

Coaches also provided claimants with their email address, direct line or mobile number with the reassurance that they could get in touch via these routes should they need. Although claimants appreciated having the option (and felt that this demonstrated considerable commitment on the part of their Coach and a sense that they were going 'above and beyond'), few said that they utilised these details.

### 6.1.3 Action plans

New action plans were introduced for the Personalisation Pathfinder, with the main purpose of providing a detailed log of aims set out in each session, and thus mapping progress and the journey each participant travelled while on the programme.<sup>21</sup> Aims could be detailed in the plans alongside the actions needed to address them - these could fall into the remit of the claimant or Work Coach. The intention was for Work Coaches and claimants to work together to decide on aims which accommodated both short and long-term aspirations.

Just over half (51 per cent) of participants reported using an action plan as part of their meetings with a Work Coach. In qualitative interviews, however, even when participants were not explicitly aware of action plans, they still mentioned that goal setting and targets were discussed with their Work Coach.

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<sup>21</sup> Background information such as employment history and personal circumstances could also be recorded in the action plan.



## Evaluation of the Personalisation Pathfinder Trial

The vast majority of participants (83 per cent) who recalled developing an action plan felt this was a helpful activity in moving them back into or closer to work, with two-fifths stating that it was very helpful (42 per cent).

Those who were aware of their action plan tended to describe the approach taken to it as *'informal'* and *'unpressurised'*. The prominence of the document in meetings ranged from *'glossing over it'*, to referring to it in every meeting and detailing targets for the next session. Participants described the approach to setting targets as *'collaborative'*; although they said that the Coaches usually made the suggestions, most individuals felt they had good control over which targets were ultimately added to the action plan.

These depictions of how action plans were used by participants largely reflected the differing approaches taken by staff. For example, some Work Coaches tended to adopt a *'light touch'* approach to the action plans<sup>22</sup>, using them as more of a *'narrative'* for internal use as opposed to a document looked at and updated with claimants in each meeting. In contrast, others outlined quite involved uses, describing the action plan as a *'living document'*, updated at every contact to monitor and set targets.

Echoing the participants' opinions, regardless of how formalised action plans were, Coaches felt that decisions on goals and targets were the result of interaction between themselves and the claimants. Coaches encouraged participants to take ownership of their actions by guiding discussions around what they aimed to achieve and how they could get there, even if the specific goals were ultimately suggested by the Coach.

In addition to aims related to improving employability, action plans usually also included goals focused on improving quality of life. Staff considered these to be equally important, given the distance some individuals were from employment. For example, individuals who suffered from agoraphobia or social isolation were tasked with leaving the house or going to the shops a certain number of times.

*'If somebody didn't go out a lot, it could be trying to go to your local shop once a week or every day to get the paper. To them, if they could leave their house, go to the local shop, get the paper and get back again, that was a big step for some people – and that was a long way away from getting back into work, but a lot of people have got mental health/anxiety/agoraphobia don't go out of the house or very rarely go out of the house, so if you can try and get them to – even those little steps are important on there.'*

SHDC

Some participants were positive about action plans, as they felt they added focus and increased their motivation. Those who were not as keen felt their action plan was not used in a collaborative or helpful way. One individual relayed how the number of targets felt burdensome, and resulted in undue pressure and a sense of failure when targets could not be achieved.

*'The action plan was a waste of time really. He had so many things on it. To me he should've gone a bit slower; put two things down and then concentrated [on those] two things. And then work through them. Then once they're completed move on. It seemed like a big list he was putting down. What's the point of*

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<sup>22</sup> For JSA claimants, all Work Coaches described using the 'Claimant Commitment' to monitor claimant journeys. It is important to note, however, that for ESA claimants, it was not always clear whether action plans used were specific to the Pathfinder or 'business as usual'.

*having all these goals that you're not going to achieve? To me it makes more sense to make your goals smaller, so when you achieve, it gives you that boost and brings your confidence up to move on to the next one.'*

(ESA pre-WCA claimant, Greater Wessex)

## 6.2 Claimant engagement

Qualitative findings show that claimant engagement on the Personalisation Pathfinder was fairly high. Staff felt that the voluntary nature of the programme meant participants had made the active decision to be there, and, as such, they were more engaged and motivated to make progress towards employment than on previous, mandatory programmes.

That said, levels of engagement were seen to vary by claimant group. JSA claimants were perceived to be the easiest group to engage with, as they were used to working with the Jobcentre, more readily 'open to suggestions', and happy to receive more personalised support than usual. ESA claimants, predominantly WP Completers, were comparatively disengaged. Staff indicated that a lot of WP Completers believed they were too far from the labour market due to the severity of their health condition and length of time since they last worked. Staff also felt that many of these individuals were used to minimal contact on the WP for two years and that therefore re-engaging them was challenging. For ESA pre-WCA claimants, lower engagement was attributed to the fact that some of these participants had jobs to return to.

Reasons for lower engagement included:

- **Only joining the programme through confusion about its voluntary nature:** This was particularly common among ESA WP Completers. These individuals tended to lack motivation on the programme due to their passive decision to participate. When they came to the clear realisation that they did not have to be there, some took the opportunity to reduce contact with their Work Coach, or even exit the programme.
- **Negative preconceptions of the Jobcentre:** A marred view of Jobcentre Plus, either based on experience or reputation, often prevented individuals from being open-minded to support offered on the Pathfinder. Some individuals expressed an aversion to visiting the Jobcentre; some felt demeaned by the presence of guards, while others simply disliked the stigma attached to signing-on.
- **Individuals did not feel the programme could offer what they specifically needed:** For example, some individuals felt all they needed to return to employment was funding for a particular certificate or licence. These participants struggled to see the benefits of alternative routes or support put forward by their Coach.

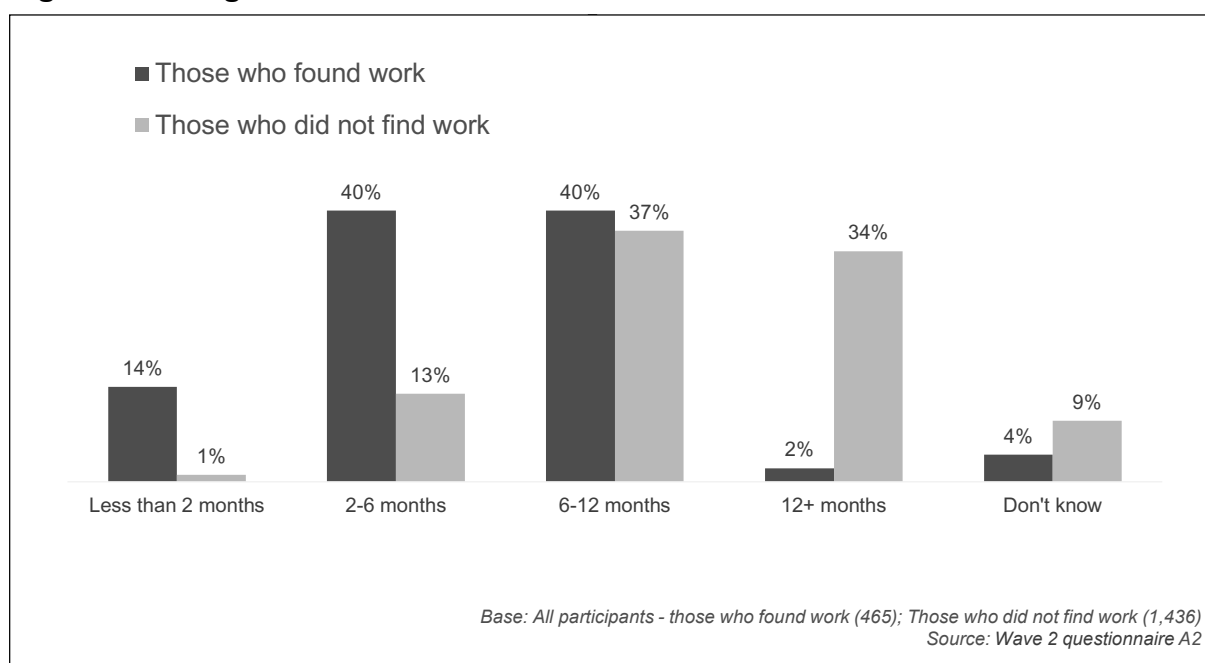
## 6.3 Length of time on the Pathfinder

The Personalisation Pathfinder was designed to offer support to claimants for up to 12 months. As would be expected, not all claimants stayed on for the full 12 months. In some cases, claimants left because they found employment but some left for other reasons (discussed in the next section).

Of those who found work, only two per cent received support for 12 months or more. Four in ten (40 per cent) said they received support for six to 12 months, while a similar proportion (40 per cent) said they took part for two to six months. Fourteen per cent of those who found work said they received support for less than two months.

Eight per cent of claimants overall were unsure of when they stopped receiving support through the Pathfinder.

**Figure 6.1 Length of time on the Pathfinder**



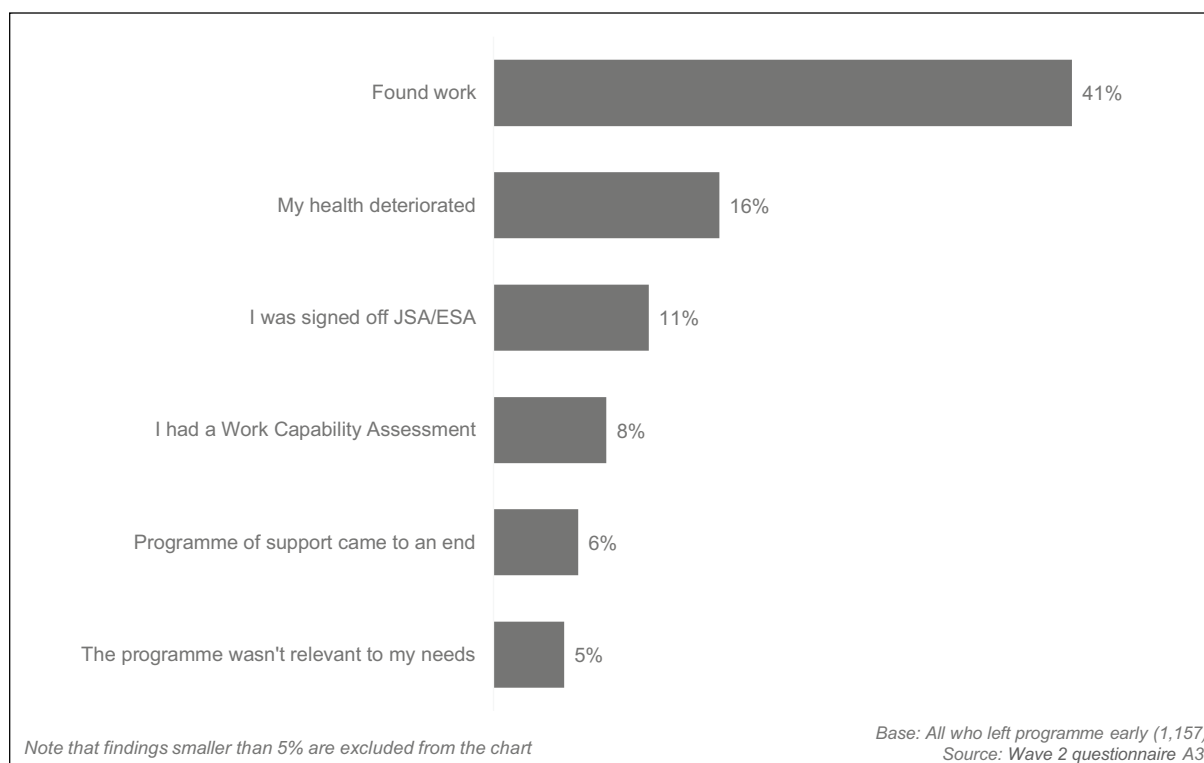
## 6.4 Reasons for leaving the Pathfinder

Among those who left the Pathfinder, four in ten claimants (41 per cent) said they did so because they found work. The nature of employment outcomes is discussed in more detail later on in this report.

Health related issues were the second most common reasons for leaving. One sixth of claimants (16 per cent) said they left because of a deterioration in their health. Changes to their benefit situation which caused the support to end was also a common reason. One in ten claimants (11 per cent) said they stopped receiving support because they were signed off JSA or ESA, while eight per cent said they had a WCA.

Six per cent said the programme came to an end, while five per cent said they left the pilot because it was not relevant to their needs.

**Figure 6.2 Reasons for leaving the Personalisation Pathfinder**



Reasons for leaving the programme early were also explored in qualitative interviews with claimants. Although only claimants who were recorded in the MI data as having been on the Pathfinder for at least a month were included in the qualitative research sample, some respondents reported only seeing a Work Coach a few times, before appearing to leave the programme altogether.

Qualitative interviews also found that changes to the claimant’s benefit situation or health condition were the most commonly given reasons for leaving the Pathfinder early. Changes to the claimant’s health condition or their personal circumstances sometimes meant the claimant was no longer able to focus on interactions with Jobcentre Plus. This included incidents such as the birth of a child or an event in the family. In other cases, it meant communication between Jobcentre Plus and the claimant broke down; for example, the claimant suddenly moving house or their phone line being cut off making it difficult for the Jobcentre to contact them. There were also a few examples of the claimant finding work independently of the Pathfinder early on in the scheme.

## 6.5 Relationships between claimant and Coach

### 6.5.1 Claimant satisfaction with Specialist Health and Disability Coach

Claimants taking part in the quantitative survey were asked how useful they found meetings with the Specialist Health and Disability Coach (SHDC). Overall, 64 per cent of claimants rated the sessions as useful, with 38 per cent saying they were very

useful. Satisfaction was fairly even across the claimant groups; 61 per cent of ESA pre-WCA found the sessions useful, as did 66 and 68 per cent of JSA claimants and ESA WP Completers, respectively.

Those who received support from the Personalisation Pathfinder for at least six months were also more positive about their meetings with the SHDC (69 per cent of those who received support for six to 12 months, 72 per cent of those who received support for 12 months or more, compared with 50 per cent of those on the Pathfinder less than six months)<sup>23</sup>. Claimants who were aware of the Pathfinder's voluntary nature were also more positive about their meetings with the Coach (69 per cent compared with 57 per cent of those unaware of the voluntary nature).

### 6.5.2 Claimant views on Specialist Health and Disability Coaches

Nearly two thirds (65 per cent) of claimants agreed that the SHDC was understanding of their needs. Agreement was higher among ESA WP Completers (73 per cent) compared with ESA pre-WCA (62 per cent) and JSA claimants (64 per cent). Agreement was, further, higher among JSA Caseload claimants (70 per cent), who met a SHDC, compared with JSA Support claimants (51 per cent) who met with their regular Work Coach.

As with satisfaction with their Coach, claimants who were on the Pathfinder for 12 months or more were more likely to agree that their Coach was understanding of their needs (74 per cent compared with 63 per cent of those who were on the Pathfinder less than 12 months) as were those who were aware that the programme was voluntary (72 per cent of those who knew the programme was voluntary said the Coach was understanding of their needs, compared with 55 per cent of those who did not).

Agreement was negatively correlated with age; 54 per cent of 60-65 year olds and 60 per cent of 50-59 year olds agreed that their Coach was understanding of their needs, compared with 66 per cent of 35-49 year olds, 67 per cent of 25-34 year olds and 73 per cent of 16-24 year olds.

Claimants who took part in qualitative interviews were overall very positive about their Work Coach<sup>24</sup>, including those who were negative about their wider experience on the programme. Coaches were frequently described as friendly and reassuring, which put even nervous claimants at ease from the initial meeting.

Claimants mentioned how knowledgeable Coaches were in terms of supporting people with health conditions and disabilities. They felt the barriers different conditions might create were understood, and Coaches knew the most appropriate approaches to overcoming them. Coaches were also seen to have valuable contacts in the field for supporting those with health conditions; they were often able to refer individuals to useful support.

*'She is very positive and helpful and does put you in a good frame of mind ... she has got a lovely bright and bubbly personality that makes you feel good about yourself ... reassuring and cared about me ... she has had a lot of experience so she knows which way to signpost you... she knows what she talks about and tries to help.'*

(JSA Caseload claimant, Surrey and Sussex)

<sup>23</sup> Duration data excludes those who left the Personalisation Pathfinder because they found work.

<sup>24</sup> Qualitative interviews included JSA Support claimants who met with their regular Work Coach instead of a SHDC.

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Their unpressured yet encouraging approach resulted in individuals doing things they believed they would not have done otherwise, such as signing up to a training course or attending a job interview. Claimants attributed this to Coaches treating claimants with respect and acknowledging their abilities – this instilled a sense of worth which many had not experienced before with the Jobcentre.

*'The Coach helped with boosting my confidence - I hadn't been in work for two years, and she made me feel worth something again. She talked to me as a person rather than someone who was below standards. She gave me lots of information and knew how to do this without talking down to me.'*

(JSA Support claimant, Surrey and Sussex)

Participants were very appreciative of the flexibility shown by Work Coaches when it came to the logistics of meetings, and the opportunity for continued support between or beyond sessions. Many were moved by the perception Coaches went out of their way to provide support; their adaptivity and dedication often strengthened the relationship between claimant and Coach.

*'When I did the Gamelan, the whole course culminated in giving a performance and she came to that as well as a couple of other members of staff. She treated it as if I was her child, when I came off the stage and she gave me a big hug and she was just so lovely.'*

(JSA Caseload claimant, Surrey and Sussex)

Claimants commented on how Work Coaches were receptive to the wider issues that they were facing, such as bereavement or financial issues.

*'I broke down and she said, 'Have you got food for this week?' I said, 'At the minute, no, but we'll get there'. She said, 'No, you need help today', so she sent us to CAB and they helped me with bills that had started collecting,*

(JSA Caseload claimant, South West Wales)

For many, the characteristics of Work Coaches were the principal reason for enjoyment of the programme. Positive relationships appeared to be related to higher engagement levels and uptake of activities.

*'Basically, having someone there who can talk to you rather than dictate to you, or a good relationship. You sort of build up a bit of trust with that person, which then obviously means you benefit in the long run from what they're doing.'*

(ESA pre-WCA claimant, Greater Wessex)

There were not many examples of negative experiences with Work Coaches. One individual did feel that theirs lacked understanding of mental health issues, and felt belittled and offended by his treatment.

*'I actually got very annoyed with the young lady ... she had one of the security guards sat behind me because she was worried ... all she offered me [made me feel] like I was a damned simpleton.'*

(JSA Caseload claimant, Surrey and Sussex)

### 6.5.3 Impact of increased time allocation and flexibility

Staff identified the additional time spent with claimants, beyond what was provided to similar claimants who were not participating in the trial, as the most valuable aspect of the Personalisation Pathfinder. From the offset, this allowed them to explore claimants' personalities, circumstances and barriers in greater depth than previously; they felt better able to build rapport and trust in the relationship as a result.

It was common for claimants to state that, for the first time, they felt as though they were being treated *'like a person not a number'*, and many credited this to the length of appointments and patience shown by their Work Coaches.

Coaches said that the strength of relationships built through the Pathfinder created an environment in which claimants were more willing to open up; this allowed them to better establish exactly what support would help improve individuals' quality of life and, if applicable, move them closer to employment.

Staff felt that veering away from the 'one-size fits all' approach to appointment scheduling was especially beneficial for more vulnerable claimants, as they were able to provide the focus and dedication needed to move the individuals forward. For example, they were able to spend whole afternoons carefully going through CVs and application forms with claimants who struggled with reading and writing.

Being able to work off-site allowed Coaches to support claimants in a wider variety of ways too. Some instances were described where Coaches had accompanied individuals to training centres to attend a course, or to meetings with employers.

*'There was more flexibility. Like being able to go out and about with them. We were actually going with our claimants to the training centres - they might not have gone unless we'd gone with them and got them engaged. We had the chance to do things like that and we don't now [that the Pathfinder has finished]. We did give claimants to an employer as well - we knew that they had learning difficulties but we took them to the employer so they could show them around.'*

SHDC

More time spent with claimants allowed the support to become more holistic as well – it spanned far beyond work-focused goals. Meetings provided *'real conversation'*, and for both claimants and Coaches alike they were often thought to be akin to counselling sessions.

*'Quite a few of them would like to keep coming in and seeing you because a lot of the time you're their only contact and maybe the only person they had any real conversation with and the only person that they thought really did take an interest in what was going on in their lives. I think with the longer appointments – you know, being flexible with the length of the appointment time – is quite supportive in that way. I know it wasn't necessarily getting people back into work but it was helping them.'*

SHDC

Staff were also able to dedicate more hours to working on cases outside of meetings – researching on the internet, making phone calls to external organisations and employers on behalf of claimants, and resolving any issues they faced. This was time Coaches said they did not have before.

*'It's nice that we had the time to be able to. If you didn't know the answer we could, you know, after they've gone, spend time on the internet making phone calls to try and resolve the issue which, ordinarily, we wouldn't have the time to do. Whether it's to do with homelessness issues or housing issues or getting them help with rent deposits or sometimes, you know, ringing local councils to make sure their assessments are being done right. It is very much what that individual needed to move them forward.'*

SHDC

## 6.6 Support and activities offered through the Pathfinder

Work Coaches offered a wide range of support to claimants on the Pathfinder, however much of this was available prior to the implementation of the programme. The biggest impact of the Personalisation Pathfinder on support and activities was felt to come from the greater allowances for time and flexibility. Coaches felt that, due to the increased time spent with each individual, they were better able to establish their specific needs, and thus more successfully identify the types of support to utilise.

Table 6.1 summarises the proportion of participants who reported undertaking each type of activity over the course of the Pathfinder programme.

**Table 6.1 Activities undertaken on the Pathfinder Programme**

<b>Activity</b>	<b>% undertaken</b>
Advice or guidance about what sorts of work or training you could do	61%
Help with writing/making changes to a CV	53%
Developing an action plan	51%
Information about other local support to help your condition or help you into work	48%
Training in how to look for work	48%
Help with job interview techniques	33%
Advice on how to manage your health condition / disability	26%
Help with IT skills	25%
Training or advice on communication skills	25%
Advice on money management (including benefits payments or debt)	21%
Support from Community Employment Specialist (CES)	21%
Training or advice about making general lifestyle changes	20%
Group sessions with your peers	20%
Work experience or a work placement	19%
In-work support	6%
<b>None of these</b>	<b>11%</b>

*Base: All unless never met with / spoke to a work or SHDC (1,796)*



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Overall, activities and advice specifically related to the Pathfinder programme were less common than 'business as usual' activities. Of the types of support that were particular features of the Pathfinder Programme;

- receipt of information about other local support to help health conditions or help claimants into work was the most commonly received (by 48 per cent of participants) although the proportion taking up this support was lower (23 per cent of participants);
- closer to a quarter of claimants received advice on how to manage their health condition (26 per cent);
- around one in five received support from a Community Support Specialist or attended group sessions with their peers (21 and 20 per cent, respectively).

Qualitative interviews indicated that confidence building courses were also very popular – participants gave numerous accounts of attending these, and they were felt to contribute to an improved mental state and attitude. Claimants also described how their Work Coaches had helped them understand how to introduce health conditions or disabilities to employers, if they chose to disclose it. They provided information on employer rights, and what reasonable adjustments could be made to workplaces to accommodate their health condition.

### 6.6.1 Health-related support

As shown in Figure 6.1, a quarter of participants (25 per cent) received advice about how to manage their health condition/disability (both in and out of the work environment). Four in five who had received this type of support felt that it had been helpful in moving them closer or back into work (84 per cent).

Stakeholders felt that the Pathfinder had a positive impact on the proportion of claimants accessing support for their condition from organisations outside of Jobcentre Plus and mental health support and Cognitive Behavioural Therapies (CBTs) in particular. Coaches felt that they were frequently offering to broker access to services such as CBT, counselling and anxiety management due to the prevalence of mental health issues.

From the survey:

- Twenty-eight per cent of participants stated that they accessed mental health services while on the Pathfinder (nine per cent as a direct result of conversations with their Coach) and;
- Twenty-five per cent reported that they accessed other specialist services specific to their health condition (six per cent as a direct result of conversations with their Coach).

Individuals accessing this support generally found it very useful. Of those accessing mental health services, 84 per cent found the support useful and of those accessing other specialist services specific to their condition, 80 per cent found it useful.

### 6.6.2 Financial support

Around one in five (21 per cent) participants reported receiving advice on money management (including benefits payments or debt) while on the Pathfinder Programme (Figure 6.1); the majority found this advice helpful in moving them closer to work (82 per cent).

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Work Coaches described how they commonly provided claimants with guidance around financial matters, such as Tax Credits and pensions. They also identified individuals who were eligible for other benefits, such as Personal Independence Payment (PIP), and guided them through the process of applying.

Coaches were able to signpost claimants to relevant organisations for advice they were not able to provide e.g. to Citizen's Advice Bureaux. For those in difficult financial situations, Coaches referred them to sources of financial support for attending interviews. These organisations would provide individuals with money for travel and smart clothes. This signposting was often viewed as extremely useful.

### 6.6.3 Work-focused support

Activities specifically focused on preparing individuals for work, such as CV building, job searching skills, and help with applications and interview technique, were experienced by most, and support of this nature was generally considered to be very helpful. Table 6.2 summarises the proportions of participants who experienced each type of work-focused support while on the Pathfinder, and how helpful they were considered to be.

As stakeholders pointed out, these activities are all part of the standard support provided to jobseekers. However, they felt that the additional time that Coaches were able to spend with claimants on the Pathfinder meant that this support could be delivered more thoroughly and in a more personalised way.

**Table 6.2 Work-focused activities undertaken on the Pathfinder and their helpfulness**

Activity	% undertaken	% who found the support helpful	
	<i>Base: All unless never met with / spoke to a work or SHDC (1,796)</i>	<i>All who received each type of support</i>	
Advice or guidance about what sorts of work or training you could do	61%	(1,079)	84%
Help with writing/making changes to a CV	53%	(960)	89%
Training in how to look for work	48%	(848)	84%
Help with job interview techniques	33%	(594)	87%

While some participants were referred to external organisations to develop their skills in this area, many recalled how their Work Coach had taken time to sit down with them to work on these aspects. Participants felt mock interviews and learning about how to conduct more focused job searches were the most useful skills developed with their Work Coaches in this regard.

Some participants commented on how discussions with their Coach had triggered interest in a line of work they had not considered before; meetings had helped them to realise the range of sectors and roles in the job market, and identify what would be suited to their abilities and interests.

## 6.6.4 Education and training

Just over a quarter of participants (28 per cent) reported attending training or courses during their time on the Pathfinder (Figure 6.1); 70 per cent of these said they had done so as a direct result of conversations with their Coach (equating to 20 per cent of participants overall). Training and courses were considered useful by 90 per cent of individuals who attended them.

In the quantitative survey more than a quarter of participants (26 per cent) stated that they had received help with their IT skills and 84 per cent found this helpful in moving them closer to work.

A similar proportion (25 per cent) stated that they had received training or advice on communication skills and again nearly all found this helpful (87 per cent).

Among qualitative accounts, one claimant had also completed an online course in accounting. Other claimants had completed informal courses in areas such as customer service, health and safety, employability and stewarding. One respondent had begun studying a degree in nursing while another was about to begin a course in adult safeguarding.

## 6.6.5 Voluntary work

Volunteering was described by Pathfinder staff as popular among participants. It was felt to be an effective first step towards employment, allowing claimants to explore what they could physically do, what they enjoyed doing, what skills they needed to move forward and what effect a regular routine has on their overall wellbeing. Staff were aware of several claimants finding paid employment as a result of volunteering, particularly claimants who had volunteered in local charity shops.

*'Work experience and volunteering are really key steps, but they are steps. Our view really is that they're great but what we're looking to do is take those transferable skills to an employer.'*

(Project Manager)

Just over a quarter of participants undertook volunteering at some point while on the Pathfinder (28 per cent) and 15 per cent said that they did so as a direct result of conversations with their Coach. ESA pre-WCA claimants were slightly less likely to have undertaken volunteering (22 per cent compared with 30 per cent of JSA claimants and 36 per cent of ESA WP Completers). Nearly all who had undertaken volunteering or work placements found them useful (91 per cent).

Most claimants interviewed for the qualitative stage reported having discussed volunteering with their Work Coach or adviser. Those who were less positive about volunteering or declined to pursue this did so because they doubted the extent to which it would move them closer to employment. While some suggested the volunteering roles that were mentioned to them were not transferable to the type of work they wanted to do, others did not think it would add more value than other employment related activities, such as training, writing applications or doing a work trial.

### 6.6.6 Work experience

Pathfinder staff reported working to find work placements for claimants, and that these were common and generally well regarded. This included placements and work tasters in local charities as well as in local businesses with a Corporate Social Responsibility (CSR) agenda.

In the quantitative survey, 19 per cent of participants indicated that they did work experience or a work placement (Figure 6.1) while on the Pathfinder; 86 found this helpful in moving them (back) into work.

In qualitative interviews, claimants reported a few examples of work placements or trials, some with a possibility of this leading to paid employment. Examples included placements in supermarkets, retailers, charity shops as well as hotels. There were no examples in the qualitative interviews of ESA WP Completers taking part in a work trial.

### 6.6.7 In-work support

Staff reported that they routinely offered in-work support to claimants but that claimants were sometimes not keen to take this up. This was supported in the survey among participants, wherein only 18 per cent of individuals who were working in some capacity reported receiving in-work support.

Work Coaches typically reported seeking to contact individuals who found work while on the Pathfinder, either by phone or arranged meeting, at least once in the run up to starting work, and again once the individual was in employment. While in most cases individuals ‘hit the ground running’, and indicated that they did not need further support, continued support was thought to be critical in some cases – Coaches were cautious to ensure employment was sustainable for vulnerable individuals.

Types of in-work support experienced ranged from helping with the logistics of what to wear/where to be and helping with the other anxieties of starting work, to providing interpreters in the workplace or having discussions with employers.

*‘I’ve got involved with an employer because my claimant was really struggling and was on the verge of leaving because they couldn’t cope any longer so just by trying to explain to the employer about some very, very small adjustments would make this claimant’s life a lot easier. Yes, they’ve stayed in employment so it’s keeping them there once they’re there.’*

SHDC

Some claimants, however, expressed how this continued contact went a long way in making them feel supported and comfortable in their new role. In the quantitative survey, 84 per cent of individuals who experienced in-work support felt it was helpful in moving them closer or back into work.

## 6.7 Support desired but not received

When asked whether there was any other type of support that could have helped participants move closer to work that they wished they had received, most participants (68 per cent) responded that there was not.

Suggestions put forward by small numbers of participants (less than five per cent) included:

- Support with training or courses (four per cent);
- Better support and advice concerning funding/financial issues (three per cent); and
- More support and training in how to look for work (three per cent).

## 6.8 Extent of Personalisation

Participants across all Districts felt that the Pathfinder offered personalised support specific to their needs. In the quantitative survey conducted 12 months after participants had joined the survey, only five per cent felt that the support needed to be more tailored to their needs.

Personalisation was most markedly felt among ESA pre-WCA and JSA Caseload participants, with many of the latter stating how there was a noticeable difference from the previous support they had been receiving through the Jobcentre.

Coaches and participants alike felt that the increased time allowed claimants to be properly listened to, and that this was essential in helping Coaches understand what support individuals really needed to move forward.

*'It's not so much a number, sign on, and you're out there. It's more personal. I was surprised because the dole has always seemed faceless.'*

(JSA Caseload claimant, South West Wales)

A greater sense of personalisation was rooted in various factors. Firstly, claimants felt their health conditions and subsequent abilities were being carefully considered when suggestions for activities or employment were made. Likewise, attention was given not just to previous work experience, but personal hobbies and interests as well. Claimants felt that the more involved sessions provided by the Pathfinder allowed Coaches to gain a good grasp of their personalities, and discussions around hobbies broadened their opinion on possible paths for the future. They valued the time Coaches took to explore these options, it made claimants feel as though Coaches weren't necessarily looking for the 'quick and easy' route, but the one which would reap long-term satisfaction for the claimant.

*'She knows what I'm able to do and she knows that I'm able to do a lot of jobs. That's why she's sending me to this job because she knows I've got a personality, I am bubbly, I do come across chatty...that's why she's sending me to Marks and Spencer, bring myself out even though I've never done customer service, because obviously I need a new challenge ... because I can't do warehouse heavy work. I'm getting older.'*

(JSA Caseload claimant, South West Wales)

*'She asked me what I was interested in and I said music and I said I can fix computers, she actually listened to me and this job came up.'*

(ESA pre-WCA claimant, Surrey and Sussex)

Claimants also expressed how their personal barriers were extensively explored, and Coaches attempted to help them overcome each individual one.

There were, however, some situations where support was not felt to be personalised:

- **Suggestions were deemed discouraging:** One individual commented that the courses offered and the paperwork involved was '*demoralising*' and undermined their abilities.
- **Pathfinder did not help individuals to achieve a specific goal:** Some participants were looking for funding for a specific license or certificate and felt as though the programme could not offer anything as it couldn't help them reach these goals.

*'It was more asking me questions and looking for my ideas but I was so blindly focusing on the forklift license. I didn't see how her groups were going to help me at all in the long-term.'*

(JSA Caseload claimant, South West Wales)

- **Support felt to be more suitable for younger individuals:** One participant felt the support offered around CVs and interview techniques was irrelevant for older claimants. Another respondent said that he didn't want to do a suggested computer course because of his age – he was intimidated by the idea of being the oldest there, and concerned about younger people being rude to or laughing at him.
- **Restrictions in support due to 'bureaucracy':** Some individuals felt that, although Coaches knew what support was wanted and needed, their '*hands were tied*' due to restrictions about what was possible for Jobcentre Plus to provide.

## 6.9 Perceived additional value added by the Pathfinder

Interviews with stakeholders found some differences between the three Pathfinder Districts in terms of the perceived additional value of the scheme. In South West Wales, staff clearly felt the programme offered additional value to the provision already available to people with health conditions and disabilities. The additional time and flexibility in the provision was argued to be the driver of this added impact. This was seen to have enabled SHDCs to support claimants with things they would previously not have been able to do. This included accompanying claimants to job interviews and spending half a day with a claimant to properly organise their job searching strategy, their CV and cover letter. In addition to time and flexibility, it was felt that a consistent point of contact in the Jobcentre enabled a trusting relationship between claimants and Coaches. This increased level of trust was felt to allow Coaches to better understand the claimant's situation. Staff members mentioned examples of claimants revealing personal circumstances which affected their health condition or job searching which were previously unknown to them such as struggles with drug and alcohol dependency, self-harm and abuse. Staff members also greatly appreciated the opportunity to improve vulnerable claimants' situations, even if these weren't employment related outcomes.

*'It has been so rewarding. I think if you speak to any of our Work Coaches they have seen such a change in people. The feeling that that gives you, being able to spend time with people, to see them come through a journey and actually change and achieve their goals is just priceless and very, very rewarding.'*

(Specialist Partnership Manager)

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*'I don't know if this claimant will ever go into work, however, her quality of life is better... She just needed somebody. And thankfully, because of the Pathfinder, I was able to do that. I think she's come on in leaps and bounds. I think she'll go on to the next chapter now. But I think she's so much more confident. And I think that's what the Pathfinder was for.'*

SHDC

Staff in Greater Wessex and Surrey and Sussex were less convinced of the additional value offered by the Pathfinder. To some extent, staff felt they were offering similar provision to the Pathfinder already, but that the scheme functioned as a reminder or a focus on this provision.

*'I think it's applied a focus. Our claimant group, those with health conditions and disabilities, is one that is increasing significantly in volume. Not everybody is accessing the health services that are available to them and they aren't going to move into employment if they don't.'*

(Partnership Manager)

*'It's quite good in that it's made the JSA Coaches think about health and disability more. It's made the Coaches expand their knowledge and opened them up more in terms of the provision that's out there to help claimants.'*

(Project manager)

*'I don't think overall the Pathfinder claimants, apart from the J2E, got anything in addition to what our normal ESA caseload would expect anyway.'*

SHDC

Overall, staff members were however positive about the additional time and flexibility and felt this was necessary to work with vulnerable claimants.

*'Overall, it's the freedom and flexibility to work voluntarily with claimants at a pace that works for them.'*

(Work Service Manager)

## Key findings

Staff and claimants identified the additional time dedicated to participants as the most important and impactful element of the Personalisation Pathfinder. This enabled stronger relationships between Coaches and claimants and a more holistic experience for individuals, which went beyond work-focused goals and scheduled meetings with their Work Coach.

Activities available through the Pathfinder were not felt to differ greatly from those offered through the conventional support process, however stronger relationships and more time spent on exploring barriers allowed appropriate activities and support to be more successfully identified for each individual. Increased flexibility further allowed Work Coaches to tailor the frequency, duration and nature of their meetings with claimants to best serve their needs.

Combined, staff and claimants felt these changes contributed to a more personalised experience for most individuals on the programme, comparative to previous support provided through the Jobcentre.

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Claimant engagement was fairly high on the programme, and largely attributed to its voluntary nature. Two thirds of claimants in the quantitative survey rated their meetings with their Work Coach as useful and felt the Coach was understanding of their needs. Satisfaction was higher among those claimants who received support from the Pathfinder for 12 months or more and among younger claimants.

The Pathfinder was intended to offer support for 12 months. Finding paid work was the most common reason why claimants left the trial earlier than this, followed by changes to a health condition or to a benefit claim (e.g. being signed off JSA or ESA).



# 7 Journey 2 Employment

## Chapter overview

A key feature of the Personalisation Pathfinder was Journey 2 Employment (J2E) job clubs. J2E job clubs were delivered by voluntary sector organisations through a Community Employment Specialist (CES), and offered employment support in a peer environment. This chapter will discuss findings from the quantitative claimant survey and qualitative interviews with staff and claimants who took part in a job club, as well as observations of the job club sessions. It will discuss experiences of recruitment and delivery of the clubs, claimant experiences of taking part and perceptions of what impact the job clubs had on work readiness, confidence, motivation and other soft skills.

## 7.1 Journey 2 Employment and job clubs

The Personalisation Pathfinder provided funding for employment support delivered by voluntary sector organisations through J2E job clubs. Nine organisations were awarded funding to deliver job clubs across the three Pathfinder Districts.

**Table 7.1 Overview of J2E providers**

Region	Name of Organisation
Greater Wessex	SPECTRUM Centre for Independent Living
	Autus – the Ha02.eu Foundation
	Access Dorset
Surrey and Sussex	The Fed Centre for Independent Living
	Surrey Independent Living Council
	Independent Lives (Disability)
South West Wales	The Merthyr Tydfil Institute for the Blind
	Mind (in two locations)

J2E job clubs courses ran over 12 weeks, with the content personalised and responsive to the needs of people participating in it. Most consisted of two broad phases, with six more structured weekly group sessions facilitated by the CES to start, followed by six weeks of a ‘social café’, or more informally ran sessions, whereby claimants undertook supervised job search, for example. J2E aimed to deliver a person-centred social job club, built on peer support and a range of confidence building activities designed to change attitudes towards employment.

J2E Employment referrals and participation were recorded in Department for Work and Pensions (DWP) management data, at the time that the sample for this study was drawn this was not always done consistently. While none of the claimants interviewed for the qualitative aspect of this study had a marker for J2E referral or participation,

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some had clearly taken part. In other cases, it was not clear whether the respondents had taken part in J2E or another job club and therefore whether the findings should be applied to J2E. All respondents who reported taking part in a job club were included for analysis.

In the survey, one-fifth (20 per cent) of all participants said that they had attended group sessions with their peers at some point during the Pathfinder Programme. Employment Support Allowance (ESA) pre-Work Capability Assessment (WCA) claimants were least likely to have been involved in these sessions (14 per cent compared to 23 per cent of Jobseeker's Allowance (JSA) claimants and 26 per cent of ESA Work Programme (WP) Completers). However, not all of these will have attended J2E courses as some Districts also ran Jobcentre Plus-led group sessions that were designed to be similar to J2E (discussed in more detail below).

### 7.1.1 Community Employment Specialist

As part of J2E voluntary organisations received funding to employ a Community Employment Specialist (CES). In most cases the CES had a lived experience of disability and offered tailored support to job club participants. While some CESs felt their experience of disability was invaluable to offering the support participants needed, others did not explicitly focus on this and instead felt it was their experience in teaching and Coaching that prepared them for J2E.

*'I think the peer support, having someone there with a disability has really helped. I think it's been a real value to the sessions, to the training. I have been able to bring in some personal experiences of recruitment, being out of work and in work, and job hunting whilst having a disability.'*

CES

*'I think having my own experience as well, my own experiences with my mental health and the journey I've been through, I don't think I'd be able to offer the support and deliver the course in the same way if I hadn't been through that.'*

CES

In addition to delivering job clubs, the intention was that CESs would also offer support in Jobcentres, providing advice on disability issues and barriers to employment to Specialist Health and Disability Coaches (SHDCs). CESs reported that they were splitting their time roughly between delivering job clubs, being available in the Jobcentre and following up with participants, as well as engaging with employers and local providers. However, it was apparent that quite a lot of the time spent in Jobcentres was focused around recruiting individuals for the job clubs.

*'I work three days a week. I've dedicated Thursday completely to the delivery of the job club, because we deliver a morning and afternoon sessions. And Tuesdays will be in the Jobcentre, half of it, I may not be in the Jobcentre all day, because if I'm seeing employers and clients here, I'll obviously meet them while I'm [nearby]. And then the day in between I spend following up with this client group, which is absolutely essential. We phone clients to remind them to come in to job club.'*

CES

Most CESs interviewed had found it a struggle to deliver all elements of their role and had found it necessary to take on additional help. In one organisation two CESs split the role between them from the beginning. While one took the lead on working with

the Jobcentre and with engaging with employers, the other led on planning the job club sessions. They however delivered the sessions together, which enabled them to spend time one-to-one with participants who needed extra support during the session.

*'[The main challenge is there is] not enough time. I think because when we started out there was a 25-hour project so it was just me for 25 hours which was okay when you've got small numbers. When you are up to interviewing over 100 referrals, that's without facilitating everything else, it's just having more time to do it.'*

CES

In another job club a second CES had been employed approximately three months into the programme in order to fully focus on employer engagement and this split was felt to be effective.

In other job clubs, volunteers helped the CES deliver the sessions. In some cases, these volunteers were previous J2E participants who had completed the course and asked to continue to be involved in the group. In addition to offering support with administrative tasks these volunteers were felt to be positive role models for new participants in the job club.

## 7.2 Recruitment onto J2E

A good relationship with the Jobcentre was found to be important for recruitment to run smoothly. Early engagement with the local Jobcentres and SHDCs to inform them about J2E and how they could refer claimants was felt to be crucial. Good relationships between the CES and the Jobcentre also benefitted ongoing communication and collaboration about individual participants.

Overall, recruitment was slow in the initial months of the programme. This was particularly the case in one District, where one CES said he struggled to fill the first few courses, with one having to be cancelled due to low numbers. This was partially due to a voluntary redundancy scheme in the local Jobcentres, which in the CES's opinion affected the introduction and set-up of the Pathfinder itself. Some Jobcentre Plus staff and CESs felt that it would have been beneficial to delay the launch of J2E until a few months after the set-up of the Pathfinder in order to ensure effective recruitment.

Recruitment was described as highly time consuming by all the CESs. Recruitment was thought to be time consuming because they felt it was necessary to spend time with each referral individually to explain what J2E involved and how it may help their situation. This was perceived to be important in order to ensure participants agreed to take part and in turn attend the first session. CESs stated that they found participants were often daunted by the prospect of group sessions and needed a detailed discussion on how the job club would benefit them before they were willing to try it. CESs felt the response from claimants was better if they had this conversation with referrals themselves, rather than the Jobcentre staff. Several CESs were in contact with participants between the initial conversation and the first J2E meeting, to minimise drop-outs between referrals and the beginning of the course. In one job club the CES organised an informal meeting with the group in a café prior to the first session, in order to make claimants feel relaxed and comfortable.

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The first week of the job club was also felt to be crucial. The CESs were aware of many participants at this point feeling anxious about the group environment, unsure of what the job club would entail and what was needed of them. Overall, participants in J2E job clubs were felt to be quite vulnerable and the CESs therefore spent the first session reducing concerns and anxieties. They made sure participants knew attendance was flexible; that they could miss individual sessions if needed or even re-join a later course if they needed a longer break. CESs reported that participants who were still engaged after the first session were likely to want to remain for the entirety of the course.

*'I keep it quite open because you know if people are still dealing with homelessness and they are still dealing with death, they've got anti-social things going on, they may have got difficulties with their family, their children. We know one week is different from the next, so I say to them, look, if you really can't get there, as long as you ring me and send me a text, let me know then that's fine.'*

CES

*'For some reason, there's a really big drop off initially, but once they are in they love it, they absolutely love it.'*

CES

However, it was also acknowledged that keeping participants coming to job club required a significant amount of communication and engagement in between sessions. CESs often spent considerable amounts of time communicating with participants through text messages and phone calls between meetings.

*'I ring people, I text people, I write to people, I'll meet people, and they still won't come. You think they're going to come and they don't come. And it's not necessarily because they don't want to come. Because I'll still follow them up after that and they say, you know, 'sorry I couldn't make it'. I just try to reinforce the fact that it's voluntary, it's not sort of mandatory. But to gently try to support them to come.'*

CES

Some CESs commented that attendance numbers could vary considerably from week to week and that they had to be flexible about helping participants to 'catch up' with any sessions they had missed.

### 7.2.1 J2E participant characteristics

The claimants interviewed for this study who had taken part in a job club represented all three Pathfinder Districts, although a smaller proportion was from Surrey and Sussex. All claimant groups were represented among the respondents who had taken part in a job club.

CESs described the participant group as very diverse, but overall quite vulnerable. They said many participants struggled with low levels of confidence and self-esteem. Mental health conditions were felt to be prevalent among participants, as were difficulties with literacy and numeracy. They also felt that participants considered themselves to be unlikely to find work. This is in line with findings among participants who were interviewed 12 months after joining the Pathfinder; those with no history of

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previous employment prior to joining were more likely to report taking part in these group sessions (27 per cent compared to 18 per cent of those who had worked prior to the programme).

*'I think without exception every person that's come here does not believe that they would move into work, on the initial assessment, when we're first talking together.'*

CES

*'I think most people, when they come to us, they want to go to work, they don't believe it is achievable. Whether that's through 'I've got nothing to offer', 'I want to go to work but I can't do what I used to do and don't know what I could do', or 'no one will take me on'. They are the three key things that people are saying. It doesn't mean they don't want to go to work, it means they think they can't.'*

CES

CESs described participants as having a poor understanding of what jobs they could apply for as well as lacking materials such as CVs and cover letters. They found others were far from the labour market because of dramatic events in their lives which meant work was not their priority. This included sudden changes to health conditions but also events in their personal life.

*'In that situation, how to get back to work is not necessarily your first concern. Your first concern is how do we get this under control, what does my life look like, where is my money coming from? Can I live where I was living, can I keep a roof over my family's head, and all of that stuff needs to be sorted out before they can look at moving forward.'*

CES

While a diverse group was sometimes a challenge to facilitate, it was also thought to offer benefits. In one job club the CES said they would sometimes pair participants with different backgrounds to challenge each other's attitudes but also to encourage them to learn from each other.

Several CESs also described participants as socially isolated. From a short introductory survey used in most job clubs they knew that many participants had limited or no engagement with friends or family, and that taking part in the job club was likely the only experience of interacting with other people they had on a weekly basis.

CESs were generally not aware of differences by claimant type as they made a point of not asking participants for their benefit situation. Some were however aware of ESA pre-WCA claimants feeling more vulnerable than other claimants, because they were more likely to have had a recent change in circumstances.

The vulnerability of the participant group meant CESs often felt the structure of the job club needed to be flexible and that any focus on employment had to be light touch.

*'Our focus isn't just jobs, apply for jobs, apply for jobs. We know it's about employment but if you did that to this client group, it would overwhelm them and they would not be able to cope with that. So we look for the soft things, options, through volunteering, trying things out.'*

CES

## 7.3 Stakeholder feedback on J2E

In one District, Jobcentre Plus staff members were highly positive about J2E, which was described as ‘fantastic’ and ‘outstanding provision’. The Project Manager had made visits to all the J2E providers and said he was struck by the friendships and support networks that had developed between participants. SHDCs who worked in offices with J2E provision were also very positive about the job clubs, particularly the peer element of them. The CESs were described as empathetic, down to earth and good facilitators. One SHDC also mentioned the CES being in frequent contact with her about individual claimants, which she felt was very useful in keeping track of progress.

The positive feedback and popularity of J2E led to the creation of non-J2E job clubs in areas without provision. They were organised by the Specialist Partnership Managers and were titled ‘Five Ways to Wellbeing’. These were 12 week courses and modelled on J2E. The Partnership Managers described the feedback from participants as ‘overwhelmingly positive’ and felt particularly the peer element of the course was important in moving claimants further towards employment.

In another District, staff were positive about J2E, but ultimately felt its impact had been limited as they were not able to recruit as many claimants as initially hoped. It was suggested that J2E would need to run for a few years to show significant results. Having said that, Project Managers, SHDCs, Work Service Managers and Specialist Health and Disability Coaches (SHDCs) said J2E in their opinion had had a positive impact on claimants, particularly with regards to confidence and motivation.

*‘The feedback from all of the claimants who were on it and all of the staff who used it was excellent. I think it’s the best feedback we’ve ever had on any programme and for any provider we’ve ever worked with.’*

(Work Service Manager)

In the third District, experiences of J2E among Pathfinder stakeholders were mixed. One of the three J2E strands was suspended due to managerial and organisational issues. The Project Manager also said Jobcentre staff were sometimes critical of an external organisation, represented by the CES, working in the Jobcentre and offering expertise on something they did not feel they needed help with. SHDCs in this District were however aware of positive impacts on participants, particularly with regards to confidence and application and interviewing skills. It was felt that these positive impacts were somewhat limited by J2E only being available to a small number of claimants and in a limited geographical area.

## 7.4 Experience of J2E and job clubs

### 7.4.1 Claimant experience of the CES

Approximately one-fifth (21 per cent) of claimants reported that they had received support from a Community Employment Specialist (CES). In some cases these were participants who had attended a group session but others received support from the CES without taking part in a group programme. Among JSA claimants, CES support was more likely to be received by JSA Caseload claimants than JSA Support group claimants (26 per cent compared to 20 per cent).

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Claimants were overall positive about the job club staff members. They were described as knowledgeable, encouraging, understanding of their needs, supportive and caring. A few participants specifically addressed the group leaders' understanding of what it is like to have a health condition and their ability to cater to everyone's needs. Several participants said the group leader had taken time to sit with them individually to offer one-to-one support. One claimant said the group leader handed out her personal phone numbers and encouraged participants to get in touch if needed.

*'I would phone her and she would try her best to sort it out...it was nice to have someone on your side.'*

(JSA Caseload claimant, South West Wales)

*'They were excellent. I was able to put over my point of view, they would answer your questions, they would give you advice about specific situations. I just took it on board and I feel a lot better for doing it.'*

(ESA pre-WCA claimant, Surrey and Sussex)

*'[The staff were] really helpful, they understood disability and why you might be nervous.'*

(JSA Caseload claimant, South West Wales)

A few participants however said the group leaders did not understand their particular situation or health condition. It is important to note however that it was not always clear from interviews with respondents whether they were in fact speaking about J2E and the CES, or another group session.

A lived experience of disability was part of the original specification of the CES role, although the nature and extent of the disability varied somewhat. One participant explicitly described the CES as 'inspirational' because of how he coped with his physical disability.

### 7.4.2 Venues

According to the CESs participants appreciated J2E being held in a venue separate from the Jobcentre. This was felt to relieve some of the stigma associated with going to the Jobcentre and allowed claimants to relax and feel comfortable. One job club was delivered exclusively through a virtual online world. As it was targeted at claimants on the autistic spectrum, who would otherwise struggle with the group element, the choice of 'venue' was argued to help participants practice social behaviour in a safe space. Pathfinder stakeholders also agreed that an external venue was beneficial in putting claimants at ease.

Interviews with CESs and observations of job clubs also showed that considerable effort was made to present participants with a welcoming venue. This included preparing tea and coffee, serving biscuits and cakes and decorating the venue with artwork. Time was spent at the beginning of the session informally speaking to participants in order to create a welcoming atmosphere.

### 7.4.3 Activities undertaken in J2E

The first six weeks of the job club were structured to cover areas such as management of mental and physical health conditions, CVs and applications, interview skills and IT. Job club leaders however described tailoring their sessions to

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the individuals' needs and appeared to be highly attentive and responsive. While the leaders had a planned structure for each session this was often altered to respond to unforeseen circumstances.

*'It's very tailor-made, it's very flexible, and it's very much based on the individual, what assistance they need, which is why I don't like to refer to it as a course.'*

CES

CESs also tailored the overall structure of the course to the make-up of each group. While some groups were felt to need a stronger focus on mental health, others were felt to benefit more from confidence building activities. Observations of job clubs and interviews with CESs also revealed that the start times and lengths of each session were very flexible. Participants were actively encouraged to come before the session began and stay after it finished. CESs were also observed to wait past the official start time of the session to wait for participants to arrive.

Activities in the job club were clearly designed to encourage participants to communicate with and support each other. Participants were also encouraged to stay in touch outside of the job club. Much of the content of the job club was delivered through team activities involving small groups. An example of this from an observation was a team building exercise where participants were placed into small groups and asked to build a structure out of drinking straws with the goal being to build the tallest independent structure. After the exercise the groups were asked to rate their ability to work together as a team and to identify both positive and negative attributes the team displayed during the exercise. The whole group was then asked to suggest ways in which these positive attributes could be of value to an employer. An informal atmosphere and sense of peer support appeared to make it possible for participants to discuss both their own and each other's strengths and weaknesses as a group. In interviews with claimants, these sorts of activities were described as very useful, especially by more vulnerable participants, who were perhaps further from the job market due to barriers such as social anxiety, confidence and self-esteem.

Job club leaders also tried to offer support to help participants understand the benefit system, especially when someone went through a change of circumstances. This was felt by CESs to be a common experience for participants in the job club.

*'We've had a lot of transition client groups through, from ESA going into the JSA, which is quite traumatic for some people. They have been on ESA for some considerable time and they still see themselves as in the sick role model of 'can't do'. So we're just there to gently guide them through looking towards 'can do.'*

CES

*'We've had quite a high number of JSA that have come from ESA following a reassessment or assessment process and I think sadly we've seen quite a lot of people that have been on ESA for a long number of years and they will be expected to work which is a bit of a culture shock.'*

CES



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While action plans were used in some job clubs, others did not do this in any structured way. They would instead have informal conversations with participants at the beginning of each session to track their progression and next steps.

*'We do a progress sheet at the beginning of the sessions. When we're doing the catch up you pick up on any of the individual targets there, and just informally chat about it then. But there's no, 'you said you were going to do it by this date', it's gentle encouragement really.'*

CES

Another CES similarly encouraged participants to keep a written log of progress and goals, but tried to do this informally, as he felt an action plan could be interpreted as condescending. One J2E club however included goal setting as a specific topic in the course and used a resource pack for participants to track their goals afterwards. The goals were not necessarily employment related, but could be to do with health management or socialising. Using this resource was felt to be very useful by the CES in the job club.

In several instances, the CESs appeared to have gone 'above and beyond' what was expected of them to support claimants. This included spending time with claimants outside working hours, as well as making themselves available on phone and email in case claimants needed extra or sudden support. In one example, the CES had accompanied a claimant with Asperger's to a social support group he was struggling to engage with, because of his condition. She felt this was necessary to allow him to even go to the first meeting, but that it was also useful learning for her. In another example, the CES in a job club had realised that most participants never received Christmas cards. The CES therefore wrote and sent cards to everyone in the job club, on behalf of the Disabled People's User Led Organisation (DPULO) they were working with. Most CESs reported working more than the hours they were contracted to work and felt this was necessary to provide the appropriate support claimants needed.

### 7.4.4 Claimant experiences of the job club

Claimants who had taken part in a job club described work related activities such as CV and application support, as well as practising interviewing skills. This included taking part in mock interviews, which were sometimes recorded in order for the group to review and give feedback. Although several participants said they initially felt very nervous taking part in this, the exercise was felt to be useful, with some saying they now had a better understanding of how to act in an interview. The job club also entailed job searching and some respondents said their job club leader brought vacancies to the course for them to apply to. Interviews with CESs and observations of the job clubs confirmed that the job club leaders made efforts to find vacancies relevant to each participant and would distribute these during the session.

Although the job clubs had a focus on job searching and work preparation, participants also recognised a focus on building soft skills, such as confidence and motivation, which some respondents were surprised about.

*'I was just going to job searching but it was not just that. We do games and activities to do with job search and to do with team building and things like that. It gives you confidence to talk to people. It was quite hard at first.'*

(JSA Support claimant, South West Wales)

A few respondents also described being shown 'success stories' about other people with health barriers and how they cope with their condition while in employment. Others described receiving tailored advice on disability employment and benefits.

## 7.5 Impact of J2E

CESs reported that J2E had been effective in moving claimants into or closer to work. They also said the course had had a positive effect on claimants' confidence and overall wellbeing. The impact on confidence appeared to be largely driven by the peer-support element, which in turn was facilitated by one-to-one support from the CES.

Likewise, the quantitative survey shows the majority of participants who engaged in these group sessions (79 per cent) also considered them to be helpful in moving them back into or closer to work. This was generally consistent across all participant types with the exception of those falling into the eldest age bracket – 60-65 year olds, among whom views were much more mixed with just over half (52 per cent) finding the sessions helpful.

Claimant perception of the CES was even more positive – 88 per cent of participants who had received support from a CES thought this to be helpful in moving them back into or closer to work.

### 7.5.1 Impact on confidence

Interviews with claimants and CESs revealed that the greatest impact of J2E was perceived to be on participants' levels of confidence and motivation. The peer support, along with the one-to-one support provided by the job club leaders was said by claimants to have had a positive impact on their confidence. It had also impacted their ability to open up and communicate and socialise with others. This increase in general confidence and ability to socialise was also thought to have impacted their confidence attending an interview and their attitudes towards working with others.

An increase in confidence had in some cases also had an impact on self-presentation. Several CESs had examples of claimants who had been motivated to improve their personal appearance and self-care as their confidence grew throughout the course.

In the quantitative survey, of those who took part in group sessions (and had not returned or arranged to return to their previous employment), nearing three-fifths (58 per cent) agreed that the sessions made them feel more confident looking for work. This was especially the case among the youngest age group – those aged under 25 (74 per cent).

### 7.5.2 Impact on social integration

Conversations observed during the job clubs revealed that for many the weekly session was a highly valued social experience, providing participants with support and new motivation. This was also reported to be the case by CESs.

In some job clubs the peer element was said to extend beyond the job club meetings themselves. Some participants reportedly met up informally for coffee, while others had organised structured meetings like walking clubs and knitting groups. The peer support was also an important driver for participants attending the job club and CESs

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highlighted some participants who had completed the 12 week course several months ago but still attended every week because it was an opportunity to meet up with others. The value of a group setting and the role of this in helping individuals to 'open up' and think more positively about the future was evident in the observations.

*'I have to say the peer support aspect of it - the power of disabled people teaching other disabled people and supporting each other to find employment, that is I think what J2E is designed to do and I think that that does work incredibly well.'*

CES

*'I think the best bits are about J2E is being able to offer the peer support so the disability specific support. I think that has been really valuable and an opportunity for people to be in a group environment with other people that have had similar experiences or are in a similar position.'*

CES

*'It had a good team spirit. It was a morale booster because you had people in the same situation knowing what you were going through.'*

(JSA Caseload claimant, South West Wales)

According to participants, a key part of the peer support was understanding that there are others who suffer from similar conditions or may find themselves in similar situations. Learning about each other's experiences and ways of coping was clearly an important element of the job club.

The job club leader appeared to play an important role in facilitating a sense of peer support. Several respondents commented on the leader's ability to facilitate a group of diverse backgrounds and conditions and their ability to break down barriers between them. They also supported the peer element of the group by offering one-to-one support to those who needed it. Participants who felt they required more support, or who felt more vulnerable, had one-to-one conversations with the job club leader to ensure they were able to progress through the course with the rest of the group.

### 7.5.3 Impact on work readiness

CESs reported that they had been successful in moving participants into employment, but estimated numbers/proportions varied. One CES said out of about 100 participants 15 were in employment, either part time or full time. In another job club, ten participants out of 40 who started the programme had found employment, while in a third job club, nine out of its 50 participants had found employment.

*'It's been absolutely, absolutely amazing. I have seen people go from the lady I mentioned who couldn't actually make it in the door. I had to greet her outside and bring her in, to within week six or week seven she had a job.'*

CES

In the quantitative survey, over a third of participants who took part in peer group sessions (and had not returned or arranged to return to their previous employment 12 months after joining the Pathfinder) stated that the group sessions had helped them find work or a work placement (37 per cent). Again, positive outcomes were particularly marked for younger participants as this figure rose to over half among those aged under 25 (54 per cent).

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In addition to hard employment outcomes, almost half (47 per cent) of all participants who took part in group sessions felt that they had helped them find training and volunteering opportunities.

It was further suggested that many participants were now able to carry out more targeted job searches and had a better understanding of what jobs they should be applying to. One CES also said the job club had a positive impact on attitudes to work. In one example a participant found work but shortly afterwards the contract fell through. The participant straight away returned to the job club, motivated to find a new job. According to the CES, the participant said he would have never persevered after the disappointment of losing the first job had it not been for the support of the job club.

The survey of participants also provided evidence that the peer group sessions improved participant job search techniques. Over half who had been involved in the sessions (and had not returned or arranged to return to their previous employment 12 months after joining the Pathfinder) (53 per cent) stated they had developed new skills relevant to job seeking. This was also more commonly the case for JSA claimants (57 per cent) than for ESA pre-WCA participants (48 per cent) or ESA WP Completers (45 per cent).

The qualitative interviews showed that the majority of respondents who had taken part in a job club felt the employment related activities had been useful and made them better prepared to look for work. Interview techniques and mock interviews were found to be particularly useful, with the majority of respondents saying this had made them feel more confident attending interviews.

*'I'd say it has moved me forward from where I was, because I had no confidence in applying for jobs at all, and it helped me get my CV stronger.'*

(ESA WP Completer claimant, Greater Wessex)

While most respondents who had taken part in a job club said the activities offered had been relevant to their needs and therefore been effective in moving them closer towards employment, some disagreed. Those participants who did not find the job club effective in moving them closer towards work appeared to already be closer to employment than many of their peers in the group. They described CV and application training as less relevant to them because these were skills they already felt they mastered. They were potentially also less socially vulnerable, and said the one-to-one support was less relevant to them. Distance from the labour market and vulnerability clearly influenced the degree to which participants found the job club useful. While one participant praised the job club for being 'nice and slow' and without pressure, another described it as 'too slow' and had hoped it would be more structured.

Others said the job club was less relevant because of their health condition. This was the case for a small proportion of the limited qualitative sample who reported taking part in a peer support group. These were respondents who overall felt their health condition made employment very difficult or impossible, and employment support was therefore thought to be less relevant. Some of these claimants had mental health conditions which were felt to make employment, but also to some extent social activities, very difficult. For others, a combination of chronic conditions and age meant employment support was felt to be less relevant as they did not expect to ever work again.

## 7.5.4 Impact of J2E on local integration

Employer engagement was considered to be a very valuable aspect of the programme but also very time consuming. As mentioned earlier, most CESs felt that they did not have enough time to cover all elements of their role and had focused on recruiting new claimants and facilitating existing job clubs over employer engagement activities.

CESs felt that working with employers often required significant amounts of time and effort in order to see results. Supporting participants directly was found to be prioritised over employer engagement, as this was often seen to lead to more immediate results compared to working with employers.

*'[I have] not done enough employer engagement, I just haven't had the hours to do them but we have been to recruitment fairs where they have been valuable and by that I would go round to everyone who is at the stands and introduce myself and what we do is J2E and try and explore whether there are any opportunities with work placement volunteering or paid employment.'*

CES

*'We've had limited employer engagement, just purely down to capacity. If people want us to contact a specific employer on their behalf we do, but that hasn't happened a great deal.'*

CES

CESs had referred participants to a number of local organisations, such as organisations dealing with substance abuse, domestic abuse, bereavement and disability support. They also made use of organisations such as Citizen's Advice Bureau, Mind and Age UK. However, some of the CESs acknowledged that they were simply building on existing networks that their organisation already had rather than creating new ones through J2E.

*'[The organisation was already] well established, we have been working out of hospitals, out of community bases and we work largely with the community, so being able to refer to said organisations is something that we have done for quite some time, so we have got a very good network going on anyway.'*

CES

The CESs also worked closely with local volunteering organisations to find opportunities for participants. CESs reported that volunteering had overall been popular among participants, although some had hesitations about working for free. Volunteering was described by the CESs as an effective way to gain work experience and even find paid employment. Several had experiences of participants progressing from volunteering to paid employment.

## Key findings

Overall, quantitative interviews with claimants, as well as qualitative interviews with CESs, Pathfinder stakeholders and claimants found that J2E was viewed very positively and was felt to increase levels of confidence and work readiness among participants.

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Recruitment to J2E was described as highly time consuming by all the CESs because they felt it was necessary to spend time with each referral individually to explain what J2E involved and how it may help their situation. CESs stated that they found participants were often daunted by the prospect of group sessions and needed a detailed discussion on how the job club would benefit them before they were willing to try it.

The peer support and one-to-one element provided by job club leaders was felt to impact positively on claimants' confidence levels and observations revealed that for many participants the weekly session was a highly valued social experience. CESs reported being constrained by the time limitations of the job and that this particularly affected their ability to conduct employer engagement activities.

# 8 Partnership working

## Chapter overview

The Personalisation Pathfinder aimed to improve working relations between Jobcentre Plus and other local organisations and to create better partnerships for future work. This chapter will discuss the experiences of Specialist Partnership Managers working on the Pathfinder and progress made in terms of improving partnership working. This includes engagement with health services, charities and training providers as well as a discussion of the challenges Partnership Managers faced in delivering their role.

## 8.1 Partnership Managers

### 8.1.1 Role of the Partnership Managers

The two Specialist Partnership Managers in each District were tasked with developing relationships with local employers, services and key partners, such as local authorities, specialist employment support, health services, education providers and social care services.<sup>25</sup> The Partnership Managers were also responsible for raising disability awareness among local employers and for representing the Department for Work and Pensions (DWP) on local boards such as those of local authorities, health providers, local enterprises and mental health trusts. Specialist Partnership Managers were further tasked with ensuring the District Provision Tool was kept up to date on provision and services available to support people with health conditions or disabilities.

Overall, Specialist Partnership Managers were very positive about their experience, and described the role as valuable and worthwhile.

*'It's been the biggest learning curve and I really enjoyed it. I fully enjoyed going out and collaborating more with outside organisations, realising that something like the Health Board and local employers, we all need to support each other more so we're there for each other as well as for our claimants and patients.'*

(Specialist Partnership Manager)

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<sup>25</sup> Developing relationships with local employers was part of both the Community CESs role and the Specialist Partnership Manager role. While CESs engaged with employers specifically to work with claimants taking part in Journey 2 Employment (J2E), Specialist Partnership Managers worked with employers more broadly to improve links between them and Jobcentre Plus offices.

## 8.1.2 Internal working relationships

Stakeholders were largely very positive about the Specialist Partnership Managers. In one District, it was felt that having a Specialist Partnership Manager had enabled this District to identify provision most staff were not previously aware of. It was further argued that claimants with health conditions or disabilities often required different or more tailored support, and that this was not always covered by mainstream provision.

Specialist Partnership Managers in all three Districts made considerable efforts to engage with Specialist Health and Disability Coaches (SHDCs) in the Jobcentres. Specialist Partnership Managers visited each Jobcentre office in their area in order to speak to Specialist Health and Disability Coaches (SHDCs) about the Partnership Manager role and how they could support claimants. They attended monthly meetings with Work Coaches during which they would update them on new provision and gather feedback on what provision was needed. Regular face-to-face meetings were felt to be important to distribute information to a large number of staff and across a large geographical area.

Partnership Managers also made use of weekly conference calls and emails to update Coaches on their work. In addition, they would speak to SHDCs informally to ask whether there was provision they needed for claimants but could not currently access. In one District, a monthly newsletter was used to highlight changes to provision and additional emails would be sent if new provision was added which Coaches needed to sign claimants up to quickly.

In one District, the Specialist Partnership Managers deliberately split their District in half and covered one half each, as they felt this would allow them to share best practice. They spoke regularly to update each other on progress. They also split the responsibility for continuously re-engaging SHDCs. One of the two Partnership Managers had organised a re-launch of the programme when she took over the role in order to raise awareness among other staff. The other contributed to a quarterly case conference to share best practice among Jobcentre staff.

A senior health practitioner in a local public health body, who was interviewed for this study, was furthermore very positive about the Specialist Partnership Manager she worked with, and described her as 'proactive and quick to make contacts'.

Overall, Work Service Managers and SHDCs were generally very positive about the Specialist Partnership Managers. SHDCs in two Districts however felt they did not see enough of the Partnership Managers, who they felt were spread too thin. One group of Coaches interviewed said their area was far too wide for one person to cover and as a result felt they knew more about the local provision than the Partnership Manager did.

In one District, it was further argued that their Partnership Managers already had good relationships in the area prior to the Pathfinder, and therefore staff felt there had not been much additional provision identified as part of the trial. It was felt instead that the provision already available could be tailored to better fit claimants with health conditions and disabilities.

*'The Partnership Managers already had good working relationships with partners that we were working with, so I can't say that they identified anything hugely additional for Pathfinder. They just tailored more the support they already had, and the organisations they were already working with, to suit the client group.'*

(Project Manager)



### 8.1.3 Barriers to delivering the role

A few of the Specialist Partnership Managers felt a lack of time prevented them from engaging with employers as much as they could have. This was particularly the case in one District, where one Specialist Partnership Manager said employer engagement had been left entirely with Journey 2 Employment (J2E) due to a lack of time.<sup>26</sup> Because (J2E) was only available in one city, employer engagement in the District had overall not been effective, according to this Partnership Manager.

*'I'm unaware of any big changes to how Coaches would usually work with other organisations. I know, for example, J2E would have more time to be able to build those relationships, whereas Coaches would not always have the time to.'*

(Specialist Partnership Manager)

In all three Districts Specialist Partnership Managers and some Coaches felt the role was spread over too large a geographical area, and that this made it difficult to sufficiently engage with the local community. While Partnership Managers felt spending time face-to-face with Coaches was vital to engage them with the provision available and to learn what further support was needed, this required a lot of time spent travelling between Jobcentre offices. A Specialist Partnership Manager explained that it was a considerable drive from one end of their area to the other and that visiting each of the 21 offices in it regularly was therefore difficult.

## 8.2 Local provision

Partnership Managers reported working with a range of local organisations, including health services, charities and training providers. While some SHDCs felt the focus on specialist provision was new and very useful, others argued they already had good relationships with local providers and were less certain of the impact of the role. This was more common among Coaches with previous experience in disability employment. These Coaches however felt information about local provision was likely to have been useful for less experienced colleagues.

In one District, a Project Manager and Specialist Partnership Manager both felt engagement with local organisations had initially been difficult due to the reputation of the Jobcentre and the DWP. Organisations were felt to have a perception of the Jobcentre and the DWP unfairly decreasing financial support for claimants and this made them hesitant towards collaboration. However, once the Personalisation Pathfinder team were able to convince external stakeholders of the extent to which they support claimants, collaboration was found to improve.

### 8.2.1 District Provision Tool

The District Provision Tool was an electronic document used to keep track of and store information about the provision available to claimants in the local area. In all three Districts, it had been updated during the Pathfinder to contain more specialist provision and to ensure the provision in the tool was still available. Specialist Partnership Managers however felt the tool in itself was not enough to make sure SHDCs made use of the provision available and therefore went to considerable lengths

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<sup>26</sup> There was some overlap between the CES role and the Specialist Partnership Manager role, as both were responsible for employer engagement. While CESs engaged with employers specifically to work with claimants taking part in J2E, Specialist Partnership Managers worked with employers more broadly to improve links between them and Jobcentre Plus offices.

to communicate provision through other channels. Additions were usually followed up with emails, newsletters and face-to-face meetings. Partnership Managers also offered training on how to use the tool in the early stages of the Personalisation Pathfinder.

### 8.2.2 Health Services

In two Districts, there appears to have been a strong focus on engaging with health services. Specialist Partnership Managers argued that National Health Service (NHS) provision had not been sufficiently used before the introduction of the Personalisation Pathfinder and efforts had therefore been made to strengthen the relationship between the two organisations. Similarly, a Project Manager felt there had previously been a 'disconnect' between the Jobcentre and GP surgeries.

Specialist Partnership Managers reported working with GP surgeries and Public Health, as well as with mental health charities such as Mind. Organisations dealing with addiction, and with support for those on the autistic spectrum, were also mentioned.

The relationship with the NHS, GPs and Public Health meant SHDCs were able to make use of pain management and mental health services, health ambassadors and the My Health, My Way project.<sup>27</sup> Another aim of the Jobcentre and GP surgeries 'joining forces', according to staff, was to reinforce the idea that employment can benefit mental and physical health.

*'It was really about working together to complement the support given to the individual person. What we started to realise was that, if I use the NHS as an example, they have people that work there who support and help people get ready for employment. We're doing the same thing but if we are both working with that claimant we are in danger of us doing one thing and the NHS doing something else with them. We can make matters more cost effective and a better journey for the individual if we draw our services together.'*

(Specialist Partnership Manager)

While this experience was largely positive, one Specialist Partnership Manager said not all surgeries were receptive to the idea of collaborating.

SHDCs further engaged with GPs to encourage them to refer claimants to exercise groups and stress management courses and to encourage more claimants who were not currently engaging with the Jobcentre to do so.

A senior health practitioner who worked with the Specialist Partnership Managers in one District was interviewed as part of this study. She was approached by one of the Specialist Partnership Managers and invited to a presentation at the Jobcentre, along with other local organisations. She felt this event was effective and that relationships between organisations were formed off the back of it. As part of the collaboration with the Jobcentre she held three awareness raising sessions with SHDCs in Jobcentre offices. During these she advised Coaches on how to discuss health and wellbeing with claimants, including topics such as healthy lifestyles, smoking and weight. She furthermore agreed that the collaboration between the two organisations was vital. In her opinion, Work Coaches had little awareness of the provision available to them. Claimants on the other hand are, in her opinion, generally unaware of the importance of preventative methods, which means that the expertise of the Coach is potentially very important.

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<sup>27</sup> My Health, My Way is a free service provided by the NHS in Dorset to offer personalised Coaching to those struggling to manage their health condition.

### 8.2.3 Charities and other support

Project Managers, SHDCs and Partnership Managers reported working with a range of charitable organisations. Several of these offered support related to mental health, motivation and confidence. In particular, the mental health charity Mind was mentioned by both stakeholders and claimants. Charities working in the fields of autism, alcohol and drug abuse, learning difficulties, domestic abuse, veteran support and homelessness were also mentioned. Several offices also worked closely with Citizen's Advice Bureaux. Interviews with both stakeholders and claimants revealed that in South West Wales the Personalisation Pathfinder team also worked closely with the Shaw Trust and often referred participants to their job search provision.

The Personalisation Pathfinder team also engaged with local volunteering organisations to find opportunities for claimants. This included local charity shops, in which many participants were offered volunteering roles.

Two organisations which worked with the Specialist Partnership Managers were interviewed for this study. The first was a community interest company which uses theatre production as a way of developing employability skills, such as team work, collaboration and communication. The manager described working closely with the local Jobcentre and giving presentations to Work Coaches every time a new course was about to launch to increase referrals. The organisation predominantly worked with young people and the three-week course involved all aspects of theatre production. Meant to offer the equivalent of a work placement, the course offered some support with CVs and applications, but this was not its primary focus. The manager said they received positive feedback from participants, particularly those with conditions such as depression and anxiety. Completion rates were high and those who did drop out did this because of their physical health condition. The manager felt the course had a positive impact on participants' levels of confidence and their ability to work with others. The organisation also reported being effective in getting some participants into employment.

The other community interest company offered those out of work placements on local renovation and landscaping projects. Through the renovation work, it aimed to encourage participants to take responsibility for their lives and learn to better regulate their behaviour. Participants were described as often having a history of drug abuse and homelessness and struggling with feelings of shame and low self-worth. The director had not worked with the Jobcentre prior to the Personalisation Pathfinder. Overall, he felt the programme helped move claimants closer to work, often by targeting skills such as self-presentation.

### 8.2.4 Training providers

Specialist Partnership Managers also engaged with local training providers. These included Learndirect and local IT course providers. They also worked with Women's Aid to find training opportunities for upskilling, specifically for women.

One Specialist Partnership Manager also worked with a local college to develop supported internships. These were described as precursors to traineeships and were felt to be especially useful for claimants with learning disabilities who might otherwise not be able to take on a traineeship as they needed more support.

## 8.3 Gaps in local provision

Mental health support was identified as an area with insufficient provision by stakeholders in all three Districts, but this was mentioned as a particular issue in South West Wales. SHDCs frequently referred claimants to external mental health services, but felt there was not enough provision to refer all those who needed the support. Coaches felt this was particularly the case with emergency mental health services. Several Coaches had experienced dealing with a claimant who expressed suicidal thoughts and who they felt to be at immediate risk but not being able to get appropriate help. A few Coaches had in these scenarios ended up calling the police in order to have the claimant looked after.

It was felt that more could be done to make use of existing provision by improving the relationships between the SHDCs and their contacts in these services. More established relationships were thought to make it easier to find help for claimants, especially in emergencies. For more long term help, such as counselling services, it was acknowledged that there was a lack of provision and long waiting lists.

*'We've got the likes of Mind but obviously they're inundated.'*

SHDC

Specialist Partnership Managers, as well as SHDCs also felt there was a lack of provision for people with learning difficulties. It was felt that this was a common barrier among claimants on the Pathfinder but that not enough provision was available. Stakeholders also suggested there was a lack of provision for claimants suffering from drug and alcohol abuse, deafness and those on the autistic spectrum.

Stakeholders also believed there was a lack of specialist disability support and occupational health services, due to the relationship between the NHS and the Jobcentre/DWP not working as well as could be hoped.

## 8.4 Employer engagement

Developing relationships with local employers was part of both the CESs role and the Specialist Partnership Manager role. While CESs engaged with employers specifically to work with claimants taking part in the J2E job clubs, Specialist Partnership Managers worked with employers more broadly to improve links between them and Jobcentre Plus offices.

Levels of employer engagement appear to have varied across Districts and offices. In three offices activity overlapped with engagement for the Small Employer Offer.<sup>28</sup> In South West Wales for example, the Partnership Managers' engagement with employers was predominantly structured through the Small Employer Offer.

Other Partnership Managers had found employer engagement to be challenging, largely due to a lack of time. They had instead predominantly focused their efforts on working with organisations to source provision for claimants. Those who had engaged with employers had done so mainly through the Disability Confident campaign. The Disability Confident campaign was felt to be effective in making employers more aware of how they review applications and the difference reasonable adjustments can make to an applicant with a health condition.

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<sup>28</sup> A small-scale test of increasing engagement with small employers to overcome barriers to employing disabled people and people with health conditions.

### 8.4.1 Creating opportunities for claimants

SHDCs also engaged directly with employers. One Project Manager said he had explicitly encouraged his SHDCs to be more proactive in their engagement with employers. It was recognised that employer engagement could be very time consuming but this was felt to be a crucial element of what the Pathfinder offered.

*'It is time consuming, but it's even more time consuming keeping people on benefits.'*

(Project Manager)

SHDCs reported working with local charities, the county council, large retailers and supermarkets, the local college and a few small hairdressers and hotels to create work placements and volunteering opportunities for claimants. Coaches felt charities and the larger supermarkets were more receptive to disability employment, as this was more likely to be part of their HR strategy. Engaging with employers was often a case of finding the right person within the organisation. Coaches had examples of being turned down by store managers, but having better luck with more senior staff members, such as regional managers and Human Resources managers. Coaches further felt they were more likely to see results with employers that were perceived to be involved in the local community.

*'Some of the big companies have a social agenda written into their policies, so they are more structured to take on people who need a bit more support and small employers will sometimes be a bit more community spirited.'*

SHDC

Coaches also suggested that employer engagement was far more effective if the employer had personal experiences with disabilities.

*'So we would go for a massive organisation who might actually be a national disability symbol holder employer, someone like Sainsbury's, who have a national policy on working with disabled people, and one branch would be not interested at all, and then the branch next door the manager has got a disabled son himself, understands the issues and would take loads of people on work experience for us.'*

(Project Manager)

SHDCs also said they had a good relationship with the local volunteering centres and used these to find ad hoc, short term and long-term volunteering opportunities.

The SHDCs' engagement often took the form of working directly with an employer to get an individual a placement or trial. As an example, Coaches would often accompany claimants to interviews; this was felt to be facilitated by a good relationship between the Coach and the employer.

## Key findings

Overall, stakeholders were positive about the working relationship with Specialist Partnership Managers and the Specialist Partnership Managers appear to have made considerable efforts to engage Work Coaches. While the District Provision Tool, the electronic tool used to store information about local provision, was seen as useful some SHDCs felt they were familiar with most of its content prior to the introduction of the Pathfinder. Specialist Partnership Managers felt a lack of time allocated to their role and the geographical spread of their area prevented them from engaging sufficiently with local provision and local employers in particular.

Specialist Partnership Managers spent significant amounts of their time engaging Work Coaches. In two trial districts a lot of time was spent engaging with health services. Stakeholders identified mental health services as a key gap in local provision and SHDCs felt this was particularly the case with emergency mental health services.

# 9 Claimant outcomes: Employment and employability

## Chapter overview

This chapter discusses findings related to employment outcomes and work readiness, and how this differed for different claimant groups. It further discusses details of employment among those who found work while on the Pathfinder. This chapter also looks at attitudes to work and what barriers those not in work felt they faced in order to move into work.

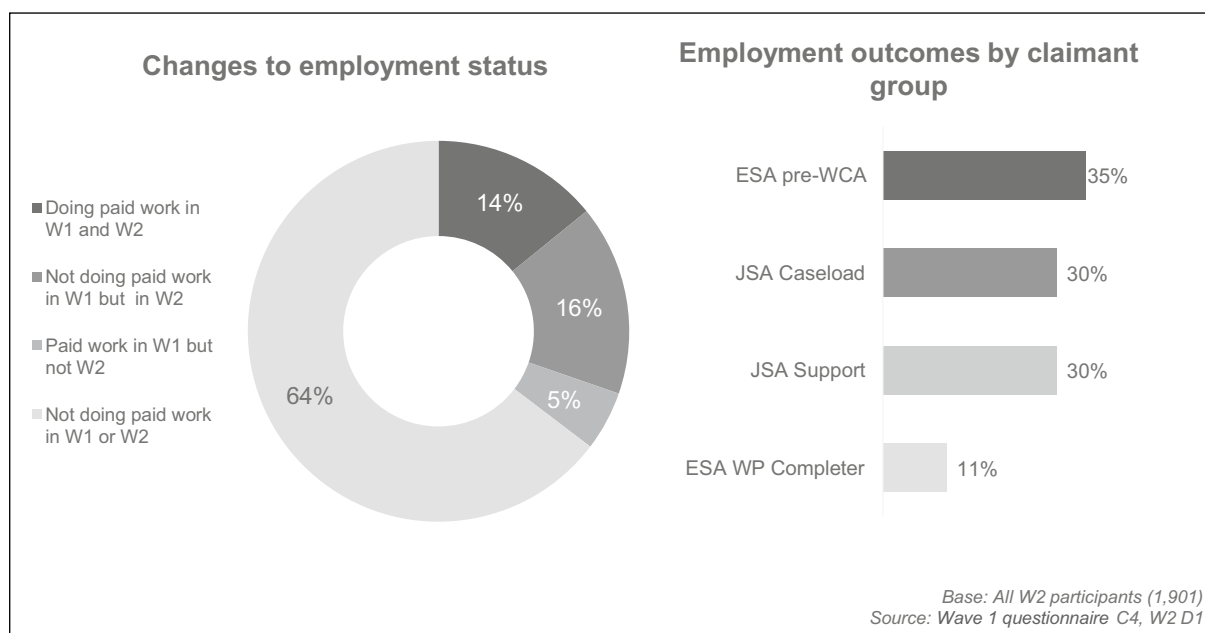
## 9.1 Moving towards employment

### 9.1.1 Employment outcomes

Twelve months after joining the Personalisation Pathfinder 30 per cent of claimants were in paid employment. Fourteen per cent had moved into employment by the time of the Wave 1 interview (around four months after joining the Pathfinder) and the remaining 16 per cent moved into employment between the five and 12 month points. Five per cent entered employment in the first four months but were not working again by the 12 month point – hence in total 35 per cent of participants had some experience of paid work during their time on the Pathfinder.

It is however not possible to establish from the survey information what proportion of these claimants might have moved into work without the support of the Pathfinder.

**Figure 9.1 Employment outcomes 12 months after joining the Pathfinder**



Employment Support Allowance (ESA) Work Programme (WP) Completers were the least likely to be in paid work at the 12 month point after joining the Pathfinder (11 per cent), while ESA pre-Work Capability Assessment (WCA) claimants were most likely to have found work (35 per cent). There was no difference between Jobseeker’s Allowance (JSA) Caseload (30 per cent) and JSA Support (29 per cent) claimants in terms of employment outcomes.

Paid employment outcomes furthermore appear to be influenced by the following factors:

- **Severity of health condition or disability:** Those who said their health condition rarely or never limited their day-to-day activities were more likely to have moved into employment (41 per cent compared with 21 per cent of those whose health conditions often or always limit activities) as were those who said they were able to manage their health conditions well (36 per cent compared with 15 per cent of those who were not able to manage their health condition).
- **Employment history:** Those who had been employed at any point previous to the Pathfinder were more likely to have found paid work (33 per cent compared with 19 per cent of those never in employment).
- **General wellbeing:** Claimants who have experienced an improvement in general wellbeing (WHO5) were more likely to have found paid work (34 per cent compared with 24 per cent of those for whom the situation had remained the same and 25 per cent of those for whom the situation had worsened).

In addition to those in paid employment, a small minority (five per cent) were working in an unpaid or voluntary role 12 months after joining the Pathfinder. This was more common among ESA WP Completers and those who had been in contact with a Community Employment Specialist (CES) through the programme (both nine per cent).

Among all those who found work, half (51 per cent) said the advice and support they received from the Personalisation Pathfinder helped them move into or return to work. Although ESA WP Completers were the least likely to have found paid work, those that did find work were more likely to attribute this to the Pathfinder support (71 per cent) compared with ESA pre-WCA and JSA claimants (50 per cent in both cases).



## Evaluation of the Personalisation Pathfinder Trial

Among those who found work, claimants who had not previously been in employment were also more likely to think the Pathfinder had helped them (62 per cent compared with 49 per cent of those previously in employment).

Chapter 7 discussed the experience of those who took part in Journey 2 Employment (J2E) job clubs and met with a CES and showed that overall these participants felt J2E and meetings with the CES had a positive impact on their work readiness. This is further reflected by the fact that among those who found employment claimants who had seen a CES (76 per cent of those who met CES compared with 44 per cent of those who did not) or taken part in group sessions (73 per cent compared with 46 per cent of those who did not) were more likely to say the Personalisation Pathfinder overall helped them find work.

### 9.1.2 Qualitative insights into employment outcomes

Qualitative interviews with stakeholders and claimants provided some further detail about employment outcomes.

Reflecting the results above, Pathfinder staff felt JSA claimants were more likely to have found work, although some offices were also positive about the employment outcomes achieved for ESA claimants. Employment results were less commonly reported among WP Completers, although one Work Service Manager said his team had been able to move nine of these claimants into work, which was higher than on any programme he had worked on previously.

Some claimants interviewed for the qualitative stage reported having found work as a result of taking part in the Pathfinder. For some, this was a direct result of a Work Coach or the CES putting them in touch with an employer. For others, the role of the Pathfinder had been to give them the skills and confidence needed to find work. Examples of employment outcomes included working in sectors such as caring, catering, cleaning, manufacturing, retail, transportation and for charities and not for profit organisations. Those who found work in a charity or not for profit organisation did so as a result of volunteering. One claimant became a volunteer at Mind as a result of completing a J2E course, and was subsequently hired as a support worker.

Other claimants said they found work but that this was not a result of the Pathfinder. While a few were able to return to a previously held job others found work through friends or independently. Some of those who had returned to work independently however stated that the Personalisation Pathfinder had increased their work readiness.

### 9.1.3 Details of employment

A quarter of claimants (24 per cent) who had moved into paid employment since joining the Pathfinder said they were returning to a role or an employer which they had worked previously. This was more common among ESA pre-WCA claimants (35 per cent compared with 15 per cent of JSA claimants and 19 per cent of ESA WP Completers).

In qualitative interviews, Coaches mentioned being aware of some ESA pre-WCA claimants who were still employed when they were recruited to the programme, and that engagement with these participants revolved more around keeping them in work.

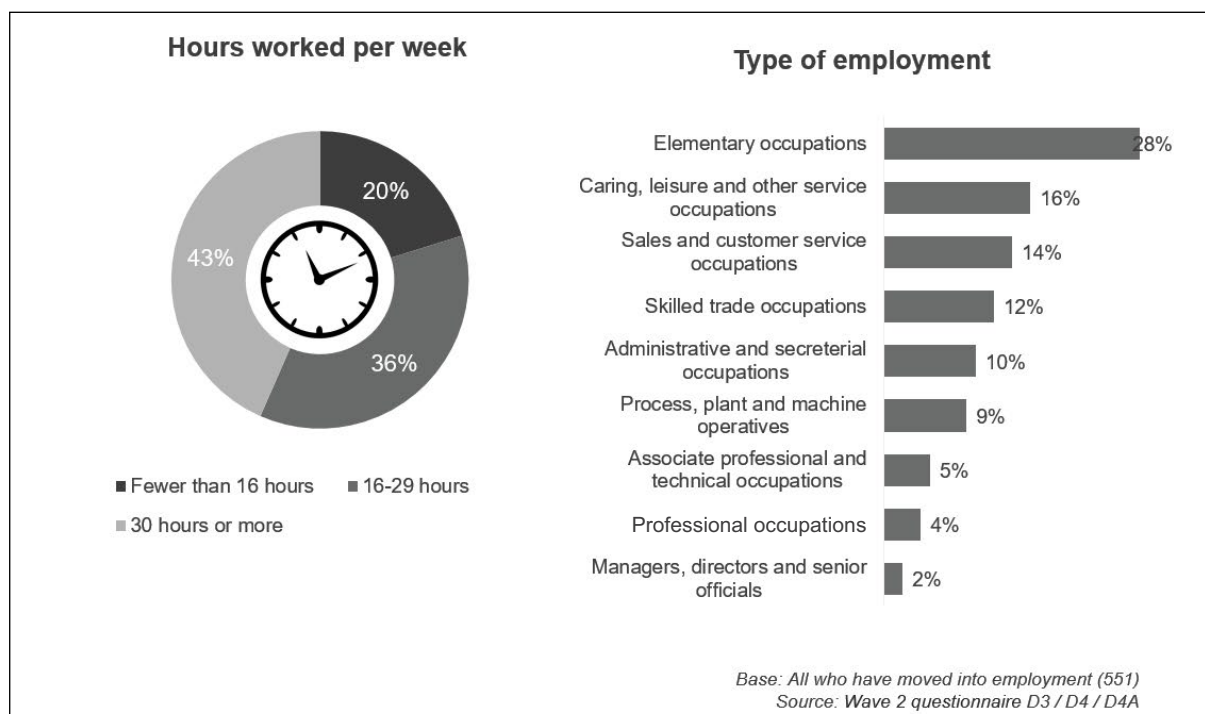
## Evaluation of the Personalisation Pathfinder Trial

The 30 per cent of claimants in paid employment twelve months after joining the Pathfinder comprised five per cent who were self-employed and 25 per cent who were working for an employer. Self-employment was most common among ESA pre-WCA claimants (nine per cent).

Pathfinder staff, particularly in South West Wales, stated that self-employment had been surprisingly popular among participants. While for some claimants this meant turning a previous career into self-employment, giving them more control over their work schedule, for others it meant a complete change of career. Examples included self-employment in bike repair, candle making, taxi driving, IT support, construction and wedding planning. Claimants considering self-employment were advised on how to make use of the New Enterprise Allowance.<sup>29</sup>

A few participants who took part in the qualitative interviews said they had considered self-employment, but none had so far pursued this further. Several participants however reported having discussed hobbies and interests with their Work Coach and whether these could be pursued as a career.

**Figure 9.2 Details of paid employment**



ESA pre-WCA claimants were more likely to be in full time employment (51 per cent of ESA pre-WCA claimants were in paid employment at the 12 month point). As discussed previously, ESA WP Completers were the least likely to have found paid work and, where they had found work, this group were also more likely to be working fewer than 16 hours per week (37 per cent).

Full time employment (working 30 hours or more per week) was more common among the following groups (who were also more likely to have moved into paid employment at all):

- Those who had been in employment at some point prior to joining the Pathfinder (44 per cent compared with 38 per cent of those with no employment experience).

<sup>29</sup> The New Enterprise Allowance is a government scheme which provides money and support to help people receiving benefits start their own business.

## Evaluation of the Personalisation Pathfinder Trial

- Those who felt better able to manage their health condition than they did when they joined the Pathfinder (48 per cent compared with 33 per cent of those who felt less able to manage).
- Male claimants (55 per cent compared with 31 per cent of female).

As Figure 9.2 shows, claimants who found paid work most had commonly moved into unskilled work, with nearly three in ten (28 per cent) working in elementary positions.

### 9.1.4 In-work support

Of those who had moved into paid work, nearly one in five (17 per cent) said they had received a follow-up from their Work Coach or Specialist Health and Disability Work Coach (SHDC). ESA WP Completers were far more likely to have received this (30 per cent) compared with ESA pre-WCA (18 per cent) and JSA claimants (16 per cent).

Eight per cent said they had received a follow-up from a CES, with little variation between claimant groups (nine per cent JSA claimants and six per cent of ESA pre-WCA and ESA WP Completers).

In-work support was well regarded by claimants in the survey. Of those who received a follow-up from a Coach, three quarters (75 per cent) rated the contact as useful. Satisfaction was even higher among those who received a follow-up from a CES; 94 per cent rated this as useful.

### 9.1.5 Work related activities

In order to explore whether participation in the Pathfinder was associated with a greater level of jobsearch activity, participants were asked in the quantitative survey to provide;

- At the Wave 1 survey, an estimate of the number of job applications and job interviews that they had completed in the 12 months before joining the Pathfinder and;
- At the Wave 2 survey, an estimate of how many job applications and job interviews they had completed in the 12 months since joining the Pathfinder.

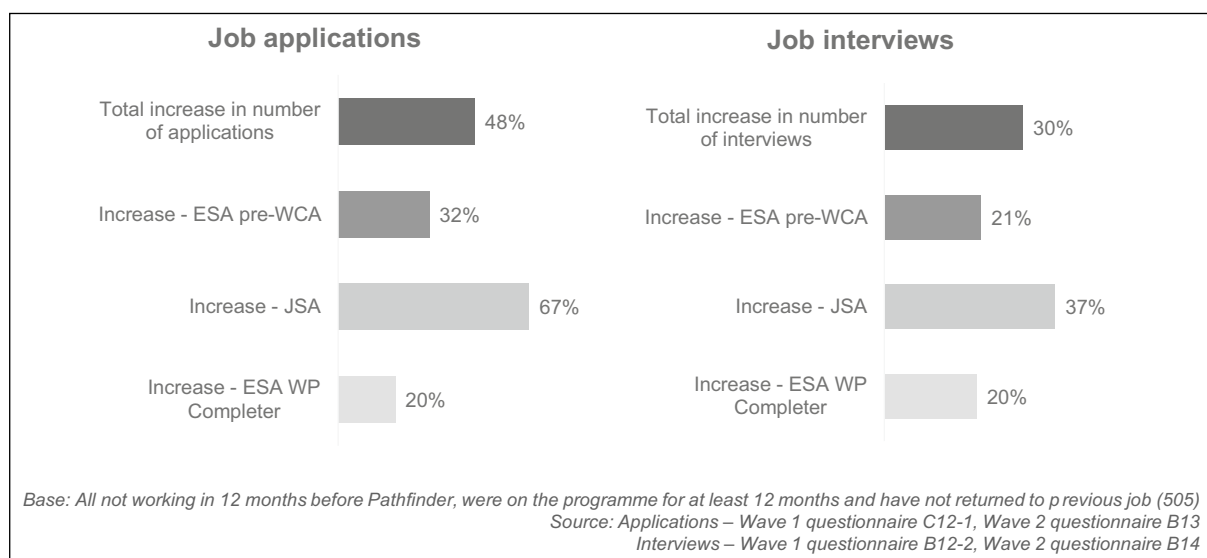
Looking just at those claimants who had a full year of job-hunting both before and after joining the Pathfinder<sup>30</sup>, nearly half (48 per cent) had increased the number of applications made since joining the Personalisation Pathfinder. The mean number of applications made in the 12 months prior to the Pathfinder was 22.57. In the 12 months claimants were on the Pathfinder this increased to 61.56 applications. The increase was largely driven by JSA claimants; 67 per cent of this group had increased the number of applications made. A third of ESA pre-WCA claimants (32 per cent) and one fifth of ESA WP Completers (20 per cent) had increased the number of applications made.

The picture was similar for the number of interviews attended. Approaching two-fifths of JSA claimants (37 per cent) reported an increase, one-fifth of ESA pre WCA claimants (21 per cent) and ESA WP Completers (20 per cent). Overall, the mean number of interviews attended in the 12 months previous to the Pathfinder was 1.76. During the 12 months claimants were on the Pathfinder this increased to 6.37 interviews.

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<sup>30</sup> For the purposes of analysis, those respondents who were in employment in the 12 months leading up to the Personalisation Pathfinder, as well as those who returned to a previous employer or job or did not stay on the programme for the full 12 months have been excluded from these figures. Figures based on 505 respondents.

**Figure 9.3 Increase in number of job applications and job interviews from the 12 months before the Personalisation Pathfinder to 12 months on the Pathfinder**



### 9.1.6 Work readiness and attitudes to work

Claimants taking part in the quantitative survey 12 months after joining the Pathfinder were asked to what extent taking part in the Personalisation Pathfinder had helped them move closer to employment.<sup>31</sup> Around two in five (41 per cent) agreed that the programme had moved them closer or into work.<sup>32</sup> Agreement was higher among JSA Caseload claimants (48 per cent), than among JSA Support (39 per cent), ESA pre-WCA (38 per cent) and ESA WP Completers (35 per cent).

Claimants who had taken part in group sessions or met with a CES were more likely to say the Pathfinder moved them closer towards work (60 per cent and 68 per cent respectively, compared with 37 per cent and 35 per cent of those who did not take part in group sessions and see a CES). Length of time on the Pathfinder was also positively correlated with increased work readiness; among those who were on the Pathfinder for 12 months 50 per cent agreed, compared with 27 per cent of those on the Pathfinder for less than 12 months.<sup>33</sup>

Those who did not feel the Personalisation Pathfinder moved them closer to work were asked why this was. A need for medical help the Personalisation Pathfinder could not provide was the most common reason why the programme was not felt to have helped claimants move closer to work (21 per cent). This was particularly the case among ESA WP Completers (35 per cent). This group was also more likely to say their health condition rules out working entirely (23 per cent), compared with JSA (14 per cent) and ESA pre WCA (18 per cent) claimants. Eighteen per cent of claimants overall said they did not receive the support they needed to move closer to employment, while 14 per cent said the Work Coach or Specialist Health and Disability Coach (SHDC) did not understand their needs. Thirteen per cent said the support was too focused on employment and not enough on health, while the same proportion felt the timing of the support was wrong.

<sup>31</sup> Excluding those returning to a previous job or employer.

<sup>32</sup> Excluding those returning to a previous job or employer.

<sup>33</sup> Excluding those who left the Personalisation Pathfinder because they found work.

## Evaluation of the Personalisation Pathfinder Trial

Claimants who were not returning to a previous job were also asked to what extent they felt better equipped to write applications and CVs, attend interviews, identify relevant vacancies and disclose their health condition to potential employers as a result of taking part in the Pathfinder.

Just under half (46 per cent) felt better able to write CVs and applications. JSA claimants were more positive about the extent to which their ability to write CVs and applications had improved as a result of the Pathfinder (52 per cent of JSA Caseload and 50 per cent of JSA Support) compared with ESA pre-WCA (43 per cent) and ESA WP Completers (37 per cent).

Nearly half of JSA claimants (47 per cent of JSA Caseload and 43 per cent of JSA Support) said taking part in the Pathfinder had made them feel more confident disclosing their health condition in interviews and applications, but fewer ESA pre-WCA (35 per cent) and ESA WP Completers (36 per cent) agreed with this.

JSA claimants were also more likely to say they felt more confident attending job interviews (43 per cent of JSA Caseload and 40 per cent of JSA Support) compared with ESA pre-WCA claimants (33 per cent). Only 28 per cent of ESA WP Completers agreed with this.

Claimants were also asked to what extent the pilot improved their understanding of what is needed to find and retain work. Half of all JSA claimants agreed that the Pathfinder had helped in this respect, but agreement was slightly lower among ESA pre-WCA (39 per cent) and ESA WP Completers (41 per cent).

Across all statements related to increased work readiness more positive results were found among those who:

- Were on the Pathfinder for more than six months, particularly those on the programme for the full 12 months.
- Took part in group sessions.
- Met with a CES.
- Were younger (ages 16-24 in particular, but also those 25-34).
- Had not previously been in employment (particularly with regards to understanding of work and what vacancies are suitable).
- Were claiming JSA.

In qualitative interviews claimants also reported their overall work readiness and attitudes to returning to work had improved. For many, this meant a better understanding of their abilities and what jobs they would be able to do.

Pathfinder staff also reported the programme having a positive impact on claimants' understanding of their own abilities and what they could and could not do. This included helping claimants understand which jobs may have a detrimental effect on their health condition. An example of this was a young female claimant with Anorexia Nervosa who had previously been applying to jobs in fashion retail. Through discussions with her Work Coach she realised this was not supportive of her condition and changed the focus of her job search.

It was felt that having the flexibility to spend more time with a claimant made it possible to ensure they had the resources they needed to look for work. For example, if a claimant did not have a CV or cover letter, a Work Coach could set aside an hour and work exclusively on this.

## Evaluation of the Personalisation Pathfinder Trial

For claimants, a change in attitudes to work was generally associated with an increase in confidence and self-esteem. This had made them more confident attending job interviews and speaking to employers, but also more confident in their own abilities to find and retain work.

As previously mentioned, some claimants perceived employment to be too difficult and finding work was either not the priority or a reason for them joining the Pathfinder at all. For these claimants, managing their health condition and overall wellbeing was a priority and they had therefore not engaged fully with work related aspects of the programme.

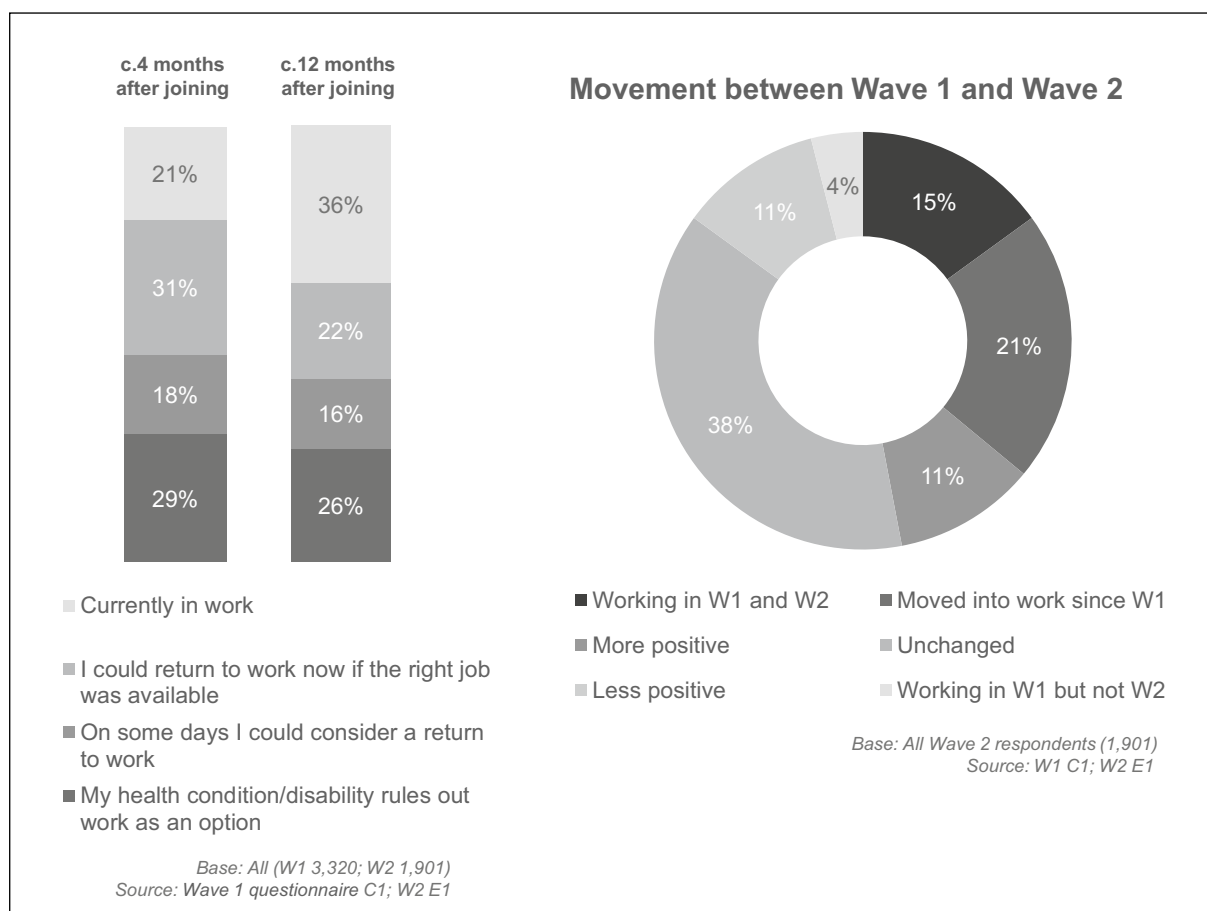
## 9.2 Attitudes towards work

In both the four month and 12 month surveys, participants who were not working (in either a paid or unpaid role) were asked how they felt about work at that moment in time, and to align themselves to one of the following statements:

- My health condition/disability rules out work as an option.
- On some days I could consider a return to work.
- I could return to work now if the right job was available.

Overall participants were reasonably open to (a return to) employment; 12 months after joining the Pathfinder, the majority (74 per cent) were either in work, felt they could return if the right job was available or would consider a return to work on some days (Figure 9.4) however a quarter (26 per cent) felt that their health ruled out work as an option.

Figure 9.4 Impact on attitudes to returning to work



Looking just at those who were interviewed at both Waves and who did not move into employment, there is not much change in attitudes between the four and 12 month points (the pie chart on the right-hand side of Figure 9.4). Most of this group gave the same response at both interviews and the proportions who gave a more positive or more negative response were equal (11 per cent of all participants). Those who were less positive about returning to work were also more likely to have experienced a deterioration in the extent to which their health impacted their life and were more likely to have a fluctuating health condition. Hence this does not provide evidence of an overall improvement in attitudes to work over the later stages of time spent on the Pathfinder although it is not possible to determine whether the responses given at the Wave 1 interview (c. four months after joining) were more positive than those that would have been given prior to joining the Pathfinder.

Participants not in work were also asked about their desire to return to work and – if they wanted to return to work - at what stage in the future they might actually be able to do so.

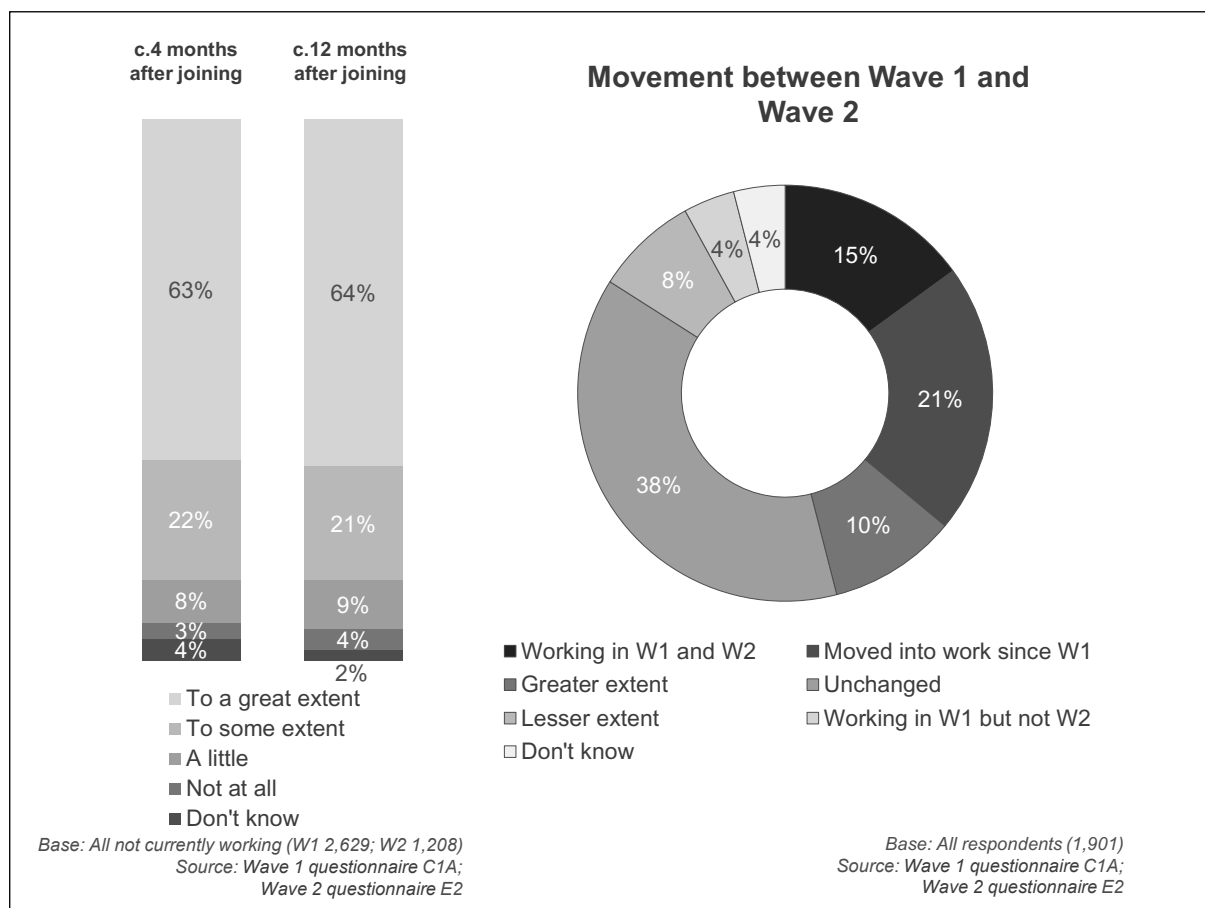
Figure 9.5 shows how participants responded to the first of these two questions at each Wave, and the changes in response seen. Overall the vast majority of participants at Wave 2 (94 per cent) stated that they would like to return to work in the future (almost two-thirds – 64 per cent – to a great extent). In keeping with earlier findings, ESA WP Completers were least likely to want to return to work in the future (90 per cent), however the vast majority were still keen to do so.

At an overall level, there was very little change in desire to return to work between responses given at Wave 1 (four months into the Pathfinder) and at Wave 2 (12 months in), although some change could have taken place in the first four months

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since joining the Pathfinder. As the pie chart on the right-hand side of Figure 9.5 shows, for the majority who had not found work, there was no change in their desire to work in the Figure and the proportions whose desire had increased and decreased were similar (ten per cent of all participants increased their desire to work while eight per cent became less interested in working in the future). Those whose desire to work had decreased were more likely to have experienced a deterioration in their ability to manage their health condition.

**Figure 9.5 Impact on the extent to which participants not currently in employment would like to return to work in the future**



Of participants who were not in work 12 months after joining the Pathfinder, two in five (40 per cent) felt they would be able to work within six months, and a further one in six (18 per cent) within the year.

One in five (20 per cent) could not say when they might be able to work, and nine per cent stated that they wanted to return to work, but did not think this would be possible.

JSA claimants expected to move into work sooner than the other Pathfinder groups. Half (50 per cent, Table 9.1) thought they would be working within six months.

In contrast, ESA WP Completers were much more likely than the other claimant groups to state this would happen after two years (12 per cent) or not at all (14 per cent).



**Table 9.1 When a return to work might be possible**

	All	ESA pre-WCA	JSA	ESA WP Completer
<i>Base: All unless currently working or due to start work</i>	(1,208)	(456)	(600)	(152)
Within the next six months	40%	35%	50%*	21%
Within the next year	18%	22%	14%	18%
Within the next two years	8%	10%	6%	11%
After two years	6%	5%	4%	12%*
Never	9%	7%	8%	14%*
Don't know	20%	22%	17%	23%

### 9.3 Barriers to employment

Key to understanding participants’ motivation for and expectation of a return to employment is understanding the perceived barriers individuals face. Over the time spent on the Pathfinder, Coaches worked with participants to try to change their perceptions of barriers to work – both those in relation to their condition and more broadly. Hence at both the Wave 1 and Wave 2 surveys, participants were asked about their views on the barriers that they faced to finding work. This makes it possible to track changes between the four months and 12 months points into the Pathfinder (but it is not possible to establish how much change took place over the first four months).

At both Waves, Pathfinder participants who were not working were asked a series of questions about the factors - both health focused and other more general factors - influencing a possible return to work. Table 9.2 shows the level of agreement that the health-related factors were barriers to finding work. The table shows the Wave 1 and Wave 2 responses for those individuals who were asked those questions at both Waves (i.e. those that were not in work at either point).

**Table 9.2 Health related barriers faced by participants**

	Wave 1	Wave 2
<i>Base: All not working / due to start work at either Wave 1 or Wave 2</i>	1,132	1,132
I am worried people won't employ me because of my health condition	59%	63%
I am worried that working could make my health condition worse	59%	58%
The idea of working makes me feel anxious	50%	47%
I think employers could accommodate my health needs	39%	39%
I know of many jobs I could do with my health condition	29%	30%
I need better social care support to enable me to work	18%	19%

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These findings show that among this group, there were not really any noticeable changes in attitudes between the Wave 1 and Wave 2 point (although some may have taken place in the first four months since joining the Pathfinder).

It is also possible to compare the overall views held at each Wave for those who did and did not find employment (Table 9.3). This shows that, although those who found work were generally slightly more positive about their health-related barriers to work, large proportions still reported barriers and hence employment outcomes were achieved for individuals who considered themselves to be experiencing considerable barriers to work.

**Table 9.3 Health-related barriers faced by participants by outcome**

<i>Base: All not working at Wave 1</i>	<i>Not working or due to start work 12 months after starting the Pathfinder (1,132)</i>	<i>In paid work or due to start work 12 months after starting the Pathfinder (311)</i>
I am worried people won't employ me because of my health condition	59%	49%
I am worried that working could make my health condition worse	59%	37%
The idea of working makes me feel anxious	50%	33%
I think employers could accommodate my health needs	39%	55%
I know of many jobs I could do with my health condition	29%	45%
I need better social care support to enable me to work	18%	10%

The findings were similar for the other non-health related barriers explored. As Table 9.4 demonstrates, there was not much change in perceptions of barriers between Wave 1 and Wave 2 among those who did not find work (although some may have taken place in the first four months since joining the Pathfinder). As with health-related barriers, these barriers were also less likely to be cited at Wave 1 among those who had found work by Wave 2 but they were still mentioned by these participants (between four and 17 percentage points fewer than for those who had not found work by Wave 2 for each barrier).

**Table 9.4 Other barriers faced by participants**

	Wave 1	Wave 2
<i>Base: All not working / due to start work at either Wave 1 or Wave 2</i>	1,132	1,132
Not many suitable jobs in the area	65%	63%
Difficulties travelling to work	65%	61%
Don't have the right qualifications, skills or experience	53%	55%
Lack of confidence about applying for jobs	48%	43%
Worried won't be employed because of age	48%	50%
Don't know what suitable jobs are available	45%	43%
Not sure would be financially better off in work	27%	29%
Family or caring responsibilities	24%	25%

## Key findings

Three in ten claimants found paid employment while on the Personalisation Pathfinder. ESA pre-WCA claimants were most likely to have found paid employment (35 per cent) and nearly a third of these claimants had returned to a previous employer or job. ESA WP Completers on the other hand were the least likely to have found paid employment while on the Pathfinder. Paid employment outcomes appear to have been influenced by severity of health condition, employment history and general wellbeing. Those with no previous experience of work were however more positive about the impact they felt the Pathfinder had had on their work readiness.

We are unable to say from this survey what would have happened to these groups of claimants in the absence of the Personalisation Pathfinder.

At the Wave 2 survey, 41 per cent of respondents agreed the Pathfinder had moved them closer or into work. Those who had taken part in group sessions or met with a Community Employment Specialist (CES) were particularly likely to say the Pathfinder had moved them closer to work.

Of those who did not feel the Pathfinder had moved them closer to work, the most frequent reason given was they had a need for medical help the Pathfinder could not provide. This was particularly prevalent among ESA WP Completers.

There is further qualitative and quantitative evidence to suggest the Pathfinder has improved claimants' degree of work readiness, as indicated by increases in number of applications made and interviews attended as well as attitudes towards work. It should be noted however that among those who did not find work, there was little to no change in their perceived barriers to employment.

# 10 Claimant outcomes: Confidence, motivation and other soft skills

## Chapter overview

This chapter will discuss qualitative and quantitative findings related to soft outcomes, such as perceived confidence and motivation to find work, communication skills and ability to travel independently.

### 10.1 Confidence and motivation (qualitative findings)

Qualitative interviews with claimants and stakeholders found that the greatest reported impact of the Personalisation Pathfinder had been on participants' levels of confidence and motivation. Changes to confidence were reported among all claimant groups, but particularly for Employment Support Allowance (ESA) pre-Work Capability Assessment (WCA) and Jobseeker's Allowance (JSA) Caseload claimants.

For the majority of claimants who reported a positive impact on confidence, this was a change in their work-related confidence. Claimants reported feeling more confident applying for work and some said their outlook for the future in terms of work was more positive. Increases in work related confidence among claimants were often associated with a clearer understanding of what jobs they could and should be applying to. Others reported feeling more confident attending interviews and speaking to employers.

*'It gave me the confidence I needed to be able to go to interview and know what the interviewer would ask and how to answer them. My attitude, the skills I had and how to help the business and what to say and utilise.'*

(JSA Caseload claimant, South West Wales)

*'I'm definitely a more confident person. I didn't think I could run this place [as an IT manager] when I started and now I'm running it, so you learn your abilities as you go on.'*

(ESA pre-WCA claimant, Surrey and Sussex)

*'I'm more confident about getting jobs... They have given me a boost I suppose.'*

(JSA Caseload claimant, Surrey and Sussex)

In some cases, the increase in work related confidence was a result of volunteering experiences or work trials, which had given the claimant a taste of how they could cope with work.

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*'Volunteering has improved my confidence a lot, knowing I can talk to people.... getting used to work and to a routine. A few more volunteer roles and then maybe towards the end of the year move into part time work.'*

(ESA WP Completer claimant, Greater Wessex)

A female ESA pre-WCA claimant who had never worked said she now felt more motivated to find work, although finding work she was physically able to do still remained a challenge.

*'I'm more inclined now to think to myself yes I've got to find work I've got to do something about it and things have got to change, but it is getting into a different position where I can find something that I can do...because I do suffer from depression as well on top of everything else and it is keeping me above that sort of level so I don't keep dipping below it all the time.'*

(ESA pre-WCA claimant, Surrey and Sussex)

For others, the impact on confidence was less to do with work prospects and more to do with overall confidence and feelings of self-worth. Claimants described feeling more at ease in social situations, more confident communicating with others and discussing their health conditions. The impact on confidence in social situations was more pronounced among claimants who had taken part in Journey 2 Employment (J2E) or job clubs.

*'It made me feel better. Not so ashamed of the situation I was in. Personally, for me in my circumstance, what a shameful position to get myself into. But they've helped with that; told me it is not all your fault. And they've helped me to stop beating myself up about and to sort of toughen up.'*

(JSA Support claimant, Greater Wessex)

*'My confidence has got better I think. Especially with my reading difficulties, before I did this I would be shut in and not speak or see or anyone. This scheme had given me the confidence to walk down the street.'*

(JSA Support claimant, Surrey and Sussex)

Personalisation Pathfinder stakeholders also reported that the programme had had a significant impact on claimants' confidence and motivation. Staff described participants who initially struggled to even step into a Jobcentre Plus office without the support of family members or spouses, who now appeared confident attending meetings and engaging with staff and other claimants independently. The support from the SHDC was felt to have been crucial in reaching these claimants and moving them forward.

*'Many didn't want to take part in the confidence building course, but Work Coaches went along with them and the feedback was incredibly positive, even from that first session, when that person really didn't want to go in ... I've heard them coming back, a couple of weeks later and telling the Coaches what a huge difference it's made.'*

(Work Service Manager)

Staff members argued that the increase in levels of confidence and motivation was a result of being able to spend more time with a Work Coach, and importantly having a consistent point of contact in the Jobcentre Plus. This allowed for a relationship to grow, which staff felt was crucial to any impact on confidence.

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Some claimants did not believe their levels of confidence with regards to work had improved. This appeared to be related to their general outlook on their health condition and their ability to work. For some, their health condition remained an insurmountable barrier, and despite a desire to return to work some still did not think this would be possible.

*'I could return to work but am afraid something would happen - physically I can't do it because of the pain.'*

(JSA Support claimant, Surrey and Sussex)

*'I want to be back in work today, if there was a job offer straightaway ... I would love someone to phone me today and say I've seen your CV come in for an interview and offer me the job. I know they look for confident people; I try to show confidence but not overly confident... I blame myself that I am doing wrong by not getting back into work and again yes the number one problem is my health because I don't want to be in a job complaining about aches and pains all the time and they notice that and then I lose my job over it.'*

(ESA pre-WCA claimant, Surrey and Sussex)

For some ESA pre-WCA claimants the Pathfinder was among their first experiences of engaging with the Jobcentre and of claiming. A few participants described feeling nervous and unsure at the beginning of their claim, not knowing what was required of them or what they should be doing. These respondents reported feeling more confident in their ability to navigate the benefit system, as well as their ability to look for work, as a result of the support they received from their Work Coach and the Pathfinder more broadly.

*'I had never been on benefits before and I did not know anything about it. I was being told one thing and my Work Coach set me straight. It was nice to have somebody like that; you've got somebody in the DWP that's helping you as if they were an outsider.'*

(ESA pre-WCA claimant, South West Wales)

Increases in self-reported levels of confidence were clearly linked to a positive relationship with the Work Coach. Claimants who felt their general or work related confidence had improved reported having a positive relationship with the Work Coach, who was often described as supporting, understanding and caring.

*'They made me believe again that I can do it. Support in the sense that I know somebody I can rely on during this period when I was down and confidence to go back.'*

(ESA pre-WCA claimant, South West Wales)

*'I was emotionally all over the place sometimes, but they kept me going. The whole team here [Jobcentre Plus]. I got to know a lot of the team here. It felt like I had a group of friends almost.'*

(JSA Caseload claimant, Greater Wessex)

*'She's given me confidence, to be honest, she knows that I'm able to do a lot of jobs. She says, 'You're bubbly, talkative, and you've got that to give'. She does give me confidence a lot.'*

(JSA Caseload claimant, South West Wales)

## 10.2 Confidence and motivation (survey findings)

Claimants taking part in the quantitative research 12 months after joining the Personalisation Pathfinder were asked to what extent the pilot had impacted their confidence and motivation to find work.

Overall, just under half of claimants (47 per cent) felt that the Pathfinder increased their **confidence to find work**. Around half of JSA Caseload claimants (53 per cent) said their confidence to find work had increased, with slightly lower levels of agreement among JSA Support (45 per cent), ESA pre-WCA (41 per cent) and ESA Work Programme (WP) Completers (38 per cent).

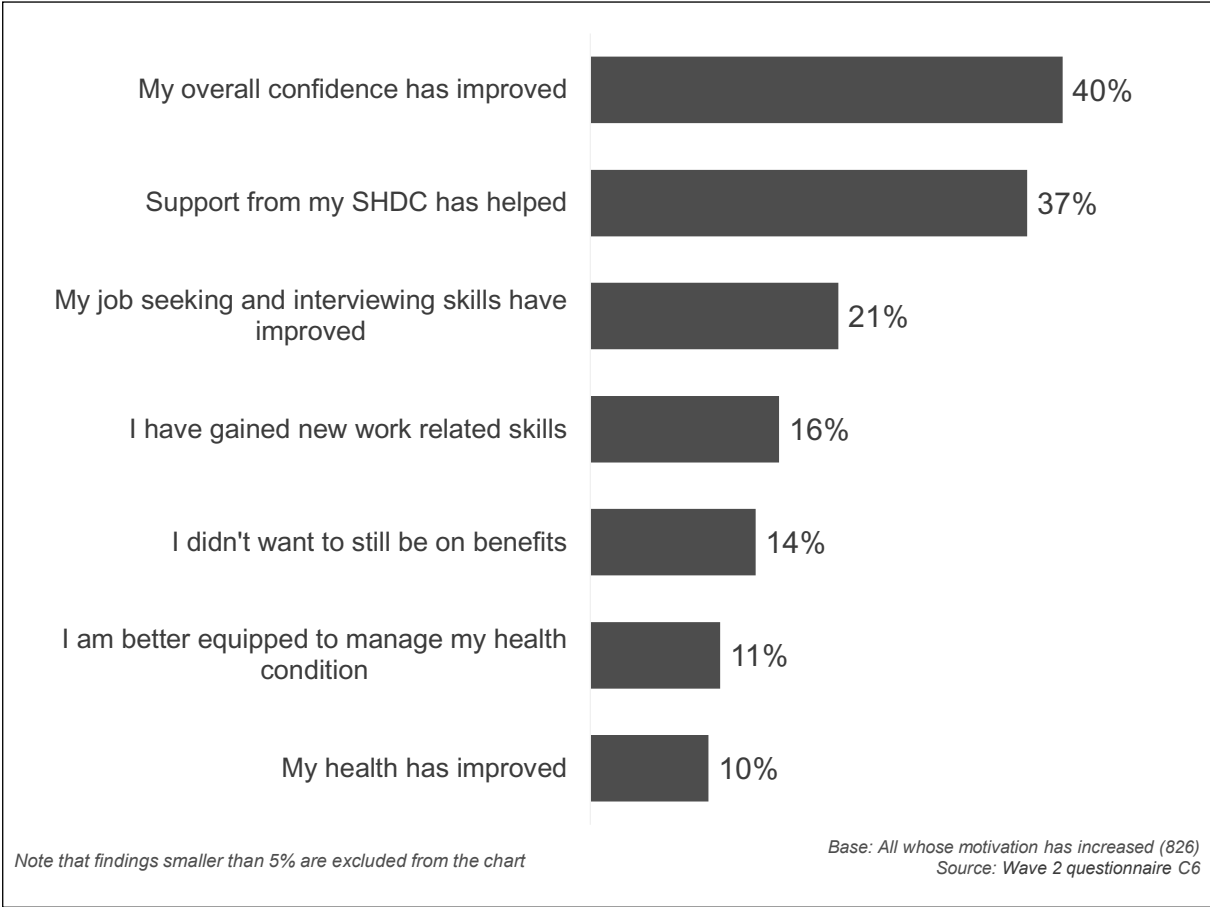
Similarly, just under half of claimants (46 per cent) were in agreement that their **motivation to find work** had increased, and this was higher among JSA Caseload claimants (53 per cent) compared with JSA Support (45 per cent) and ESA pre-WCA and ESA WP Completers (44 per cent in both cases).

Increases in confidence and motivation to find work were more common among:

- Those who felt able to manage their health condition and did not feel it impacted on their day-to-day life.
- Those who had seen an improvement in their general wellbeing (as measured by WHO5).
- Younger claimants (aged 16-24 in particular but also those aged 25-34).
- Those with no previous experience of employment.
- Those who took part in group sessions or met with a Community Employment Specialist (CES).
- Those who were aware of the voluntary nature of the Pathfinder.
- Those who were on the Pathfinder for six months or longer.

When asked why their motivation to find work had increased, participants were most likely to mention an increase in overall confidence; four in ten claimants (40 per cent) listed this as a reason. Support from the Work Coach or Specialist Health and Disability Coach (SHDC) was mentioned as a contributing factor by nearly four in ten (37 per cent) claimants. Other reasons are shown in Figure 10.2.

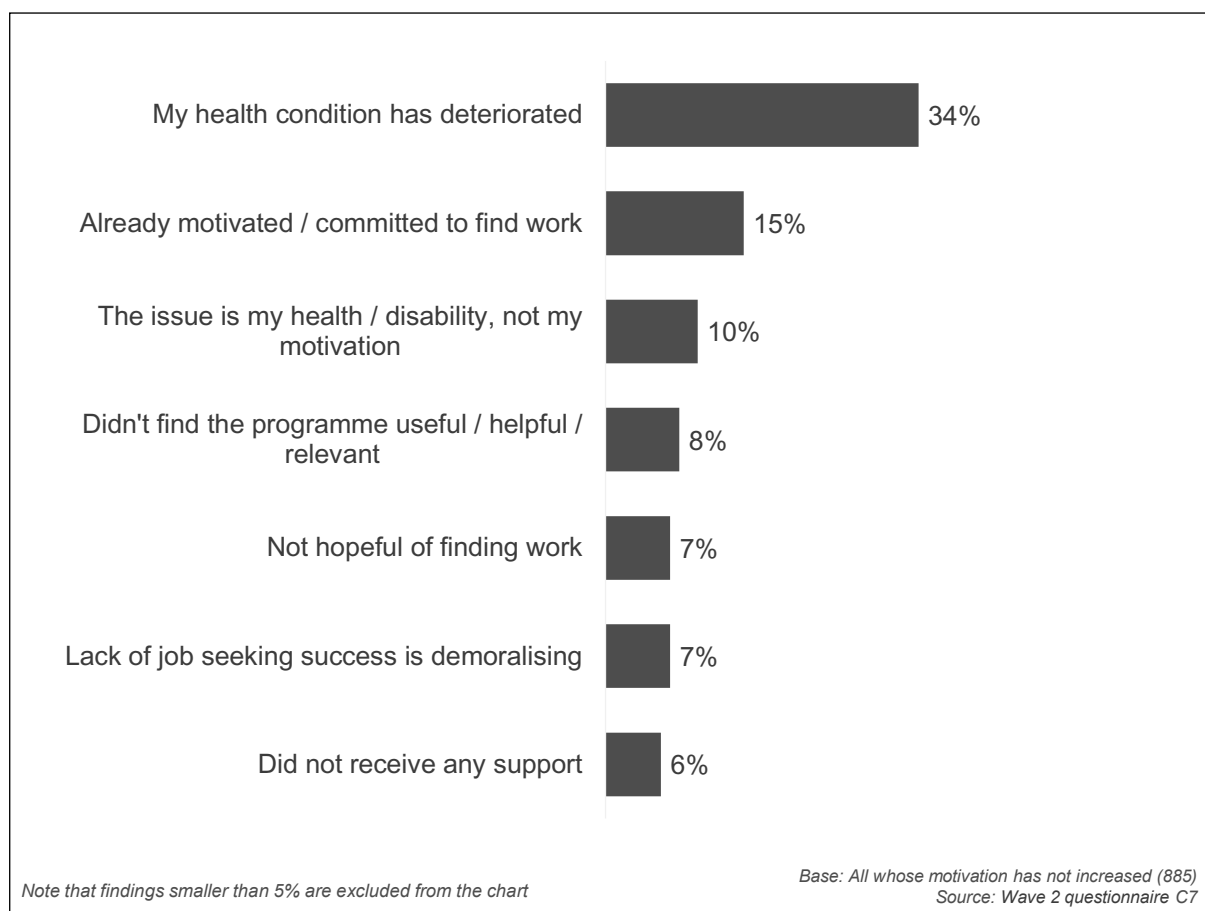
Figure 10.2 Why do you think your motivation to find work has improved?



Those who said their motivation to find work had not improved were similarly asked why this was. A third of claimants (34 per cent) gave a deterioration in their health condition as the reason. This was particularly the case for ESA WP Completers (46 per cent). Other reasons are shown in Figure 10.3.



**Figure 10.3 Why has your motivation to find work not increased?**



## 10.3 Impact on other soft skills

Two fifths (41 per cent) of claimants said taking part in the Personalisation Pathfinder had improved their **communication skills**, with nearly one fifth (18 per cent) saying participation had improved their skills a lot. JSA Caseload claimants were the most positive about the Pathfinder in this regard (50 per cent of JSA Caseload), followed by ESA WP Completers (43 per cent), JSA Support (40 per cent) and ESA pre-WCA (33 per cent).

Claimants were also asked to what extent the Pathfinder had had an impact on their ability to **travel independently**. Over a quarter of claimants (27 per cent) said participation had had a positive impact in this regard, again with JSA claimants being more positive (32 per cent of JSA Caseload and 26 per cent of JSA Support) compared with ESA pre-WCA (25 per cent) and ESA WP Completers (23 per cent).

Improvements in communication skills and ability to travel were more common among:

- Claimants in South West Wales.
- Claimants who had been on the Pathfinder for 12 months or more.
- Those who had not previously been in employment.
- Those with less limiting health conditions and those who feel able to manage their health condition.
- Younger claimants, particularly those aged 16-24.

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- Those who have seen an improvement in their overall wellbeing (WHO5).
- Those who took part in group sessions or met with a CES.

## Key Findings

Nearly half of claimants reported that their confidence to find work had improved over the 12 months since joining the Pathfinder. A similar proportion reported an increase in motivation to find work. Two-fifths also reported improved communication skills and a quarter reported an improvement in the ability to travel independently. JSA Caseload claimants were particularly likely to report positive impacts. ESA pre-WCA and ESA WP Completers were less likely to report improvements across all these measures. Improvements to levels of confidence and motivation, as well as communication skills and ability to travel independently were correlated with improvements to general wellbeing and were more commonly found among those who received support for more than six months.

# 11 Claimant outcomes: Wellbeing and socialisation

## Chapter overview

The Personalisation Pathfinder aimed to help claimants improve their overall wellbeing, reduce their levels of social isolation and to a greater extent manage their health condition. This chapter will discuss qualitative and quantitative findings related to perceptions of ability to manage health condition, contact with the health sector, perceptions of overall wellbeing and quality of life, as well as levels of social isolation. It will also discuss findings related to the relationship between claimants taking part in the Personalisation Pathfinder and Jobcentre Plus.

### 11.1 Ability to manage health condition

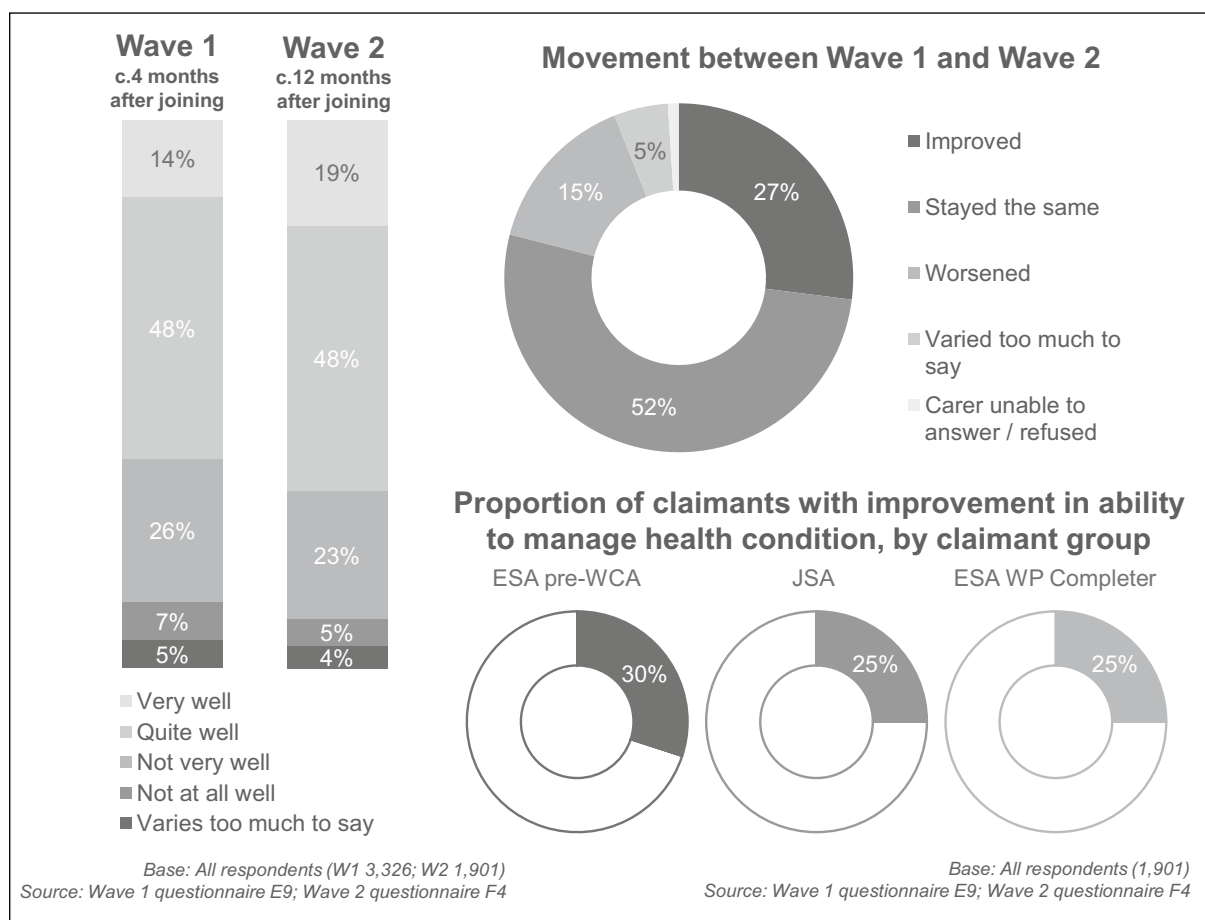
As shown in the Theory of Change model, one of the key outcomes that the Personalisation Pathfinder was hoping to achieve was enabling participants to manage their health condition better. Hence at both the Wave 1 interview (around four months after starting the Pathfinder) and the Wave 2 interview (around 12 months after starting), participants were asked how well they felt that they were managing their health condition at that time.

At the 12 month point, just over two-thirds of claimants (68 per cent) felt able to manage their health condition well (Figure 11.1) although only one in five (19 per cent) stated that they were able to manage their health condition *very well*. JSA claimants with a disability or health condition were best able to handle their health condition well (72 per cent).

Comparing the responses of those who were interviewed at both Waves shows that just over a quarter (27 per cent) of participants felt better able to manage their health condition at the 12 month point than at the four month point (while only 15 per cent felt that their ability to manage their condition had deteriorated). Those who felt their ability to manage their health condition had deteriorated were somewhat more likely to have also experienced a deterioration in their overall wellbeing. The proportion reporting an improvement was similar across all participant groups. This points to a possible association between taking part in the Pathfinder and an improved ability to manage health conditions. However, it is worth bearing in mind both that:

- It is not possible to establish what level of change might have been expected to take place over this period without involvement with the Pathfinder;
- It was not possible to collect participants' perceptions of their ability to manage their health condition on joining the Pathfinder and hence it is possible that some change in this might have taken place over the first four months after joining.

Figure 11.1 Impact for ability to manage health condition<sup>34</sup>



### 11.1.1 Qualitative insights into change in management of health conditions

Interviews with claimants found some examples of participants stating they were better able to manage their health condition as a result of the Pathfinder. This was often a case of claimants struggling with mental health conditions such as depression and anxiety who now felt able to manage this better. While some reported feeling less anxious or depressed as a result of the support they had received, others had received specific advice from their Work Coach on how to manage their condition.

For some of those who suffered from mental health conditions, learning how to better manage it, or feeling better able to manage it, greatly improved their ability to engage with the Jobcentre, which for many had previously been overwhelming and stressful. A Jobseeker’s Allowance (JSA) Caseload claimant from South West Wales reported previously having panic attacks every time she attended a meeting in the Jobcentre. As a result of working with her Work Coach she now felt comfortable and happy attending her meetings and even visited the Jobcentre independently of these appointments.

There were also some examples of claimants who felt better able to manage a physical health condition. This included a JSA Support claimant who had been signposted to an occupational health practitioner. Following this she had been able

<sup>34</sup> A small number of interviews (32 in Wave 1 and 8 in Wave 2) were answered by carers or advocates of the main respondent. For questions related to the respondents’ subjective feelings of wellbeing or health, carers were given a choice not to answer if they did not feel able to do so.

## Evaluation of the Personalisation Pathfinder Trial

to make changes to her home to make it more suitable for her condition, which she received Personal Independence Payment (PIP) payments for. A JSA Caseload claimant who broke both ankles in an accident and struggled to get back to work had found a new job in a warehouse as a result of the Pathfinder. In order to manage his health and stay in his job his Specialist Health and Disability Coach (SHDC) advised him to work shorter shifts. The claimant found this made a significant difference on his ability to do the work required of him.

A male Employment Support Allowance (ESA) pre-Work Capability Assessment (WCA) claimant from Greater Wessex who struggled with pain in his legs had previously been searching for jobs that allowed him to sit for most of the day. Through the support he received from the SHDC he discovered that sitting was in fact detrimental to his condition and he should instead be looking for jobs where he could be on his feet. The advice in his opinion helped him find and stay in work.

*'I have now found the right job, but...even I didn't know what I was able to do really. I didn't know I was going to be able to stand up all day and that the best thing for me is to keep moving and standing, whereas I was looking for a job sitting, and I actually realise now when I sit it is far worse.'*

(ESA pre-WCA claimant, Greater Wessex)

Interviews with claimants also revealed that for some fluctuations in their health condition made it difficult to manage. Others perceived their health condition to be deteriorating and this in turn impacted their perceptions of whether they would be able to manage it in the future.

## 11.2 Contact with the health sector

Ultimately one of the impacts that the Personalisation Pathfinder set out to achieve was to reduce burden on the health sector by helping claimants to manage their condition better.

Hence at both the four month and 12 month surveys, participants were asked if their health condition or disability had resulted in any of the following types of contact with the health sector and, if so, how frequently it had done so over *the preceding 12 months*:

- Visit to their family doctor or GP.
- Outpatient appointments.
- Other healthcare professionals.
- Casualty/Accident & Emergency visits.
- Day patient appointments.
- In-patient visits (overnight or longer).

This makes it possible to make some assessment of change in levels of contact with the health sector over time since starting on the Pathfinder.<sup>35</sup> Without a control group, it is not however possible to determine the extent to which these changes were caused by the Pathfinder.

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<sup>35</sup> This comparison is imperfect as there is an overlap between the two periods that participants were asked to discuss (the first c.4 months on the Pathfinder are covered in both the 12 month periods that participants were asked about) but it was not practical to expect respondents to recall data for the 12 month period prior to starting the Pathfinder with any degree of accuracy.

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Among participants interviewed 12 months after starting the programme, a visit to their family doctor or GP was the most common interaction with the health sector (85 per cent of participants had had an appointment). Around half had outpatient appointments (54 per cent) or had seen other healthcare professionals (49 per cent) about their health condition.

Just under a quarter of participants reported that their health condition required them to use casualty/A&E services (24 per cent) or attend a day patient appointment (23 per cent), while just under one in five had attended an in-patient visit (overnight or longer (19 per cent). Table 11.1 shows that these findings represent small decreases for each type of contact when compared with Wave 1.

**Table 11.1 Incidence and volume of appointment types**

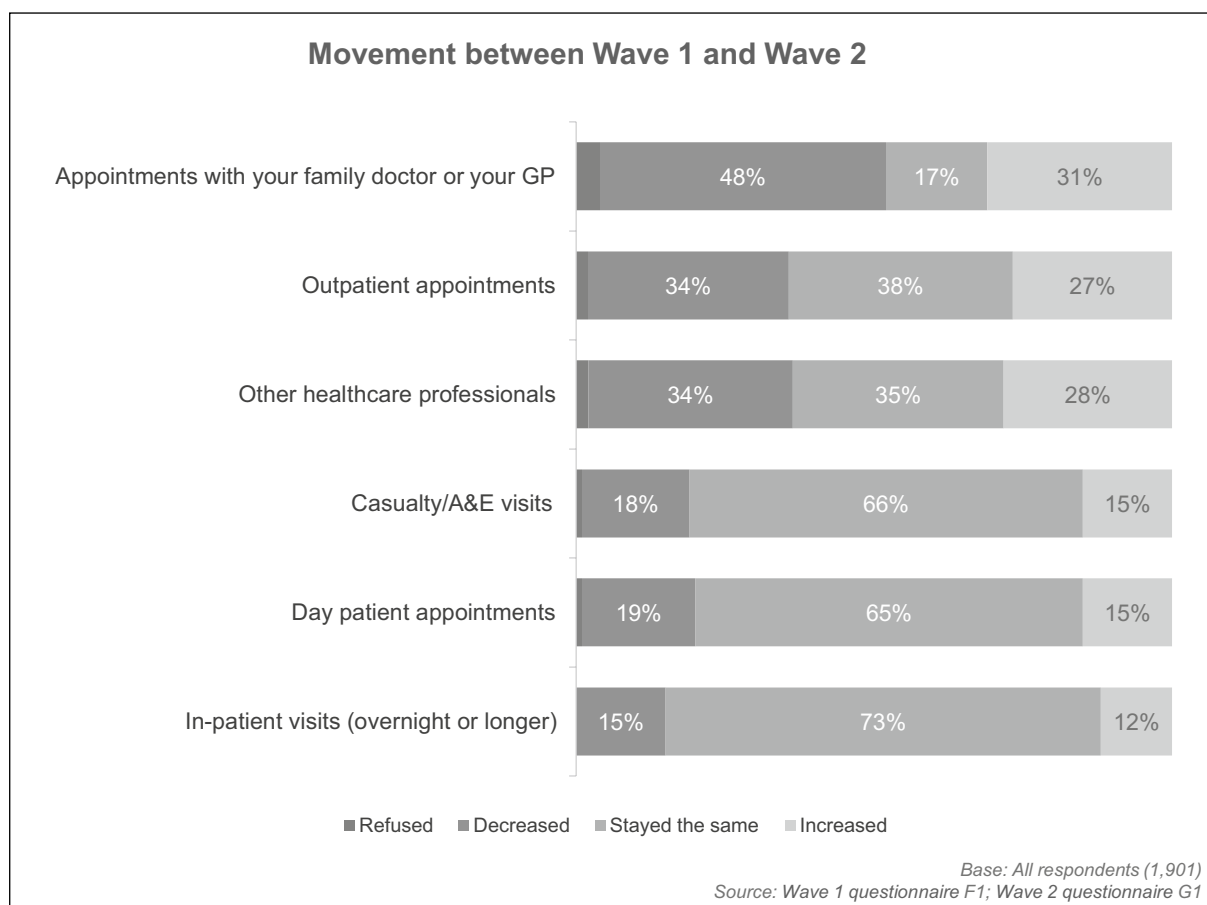
<b>Type of contact</b>	<b>Wave 1 incidence</b>	<b>Wave 2 incidence</b>
	<i>Base: All W1 (3,326)</i>	<i>Base: All W2 (1,901)</i>
Family doctor or GP	89%	85%
Outpatient appointments	56%	54%
Other healthcare professionals	55%	49%
Casualty / A & E visits	28%	24%
Day patient appointments	26%	23%
In-patient visits (overnight or longer)	23%	19%
None of the above	7%	10%

Participants were also asked about the number of appointments of each of these types they had over each 12 month period. Figure 11.2 shows the proportion of participants demonstrating an increase, decrease or no change in the number of appointments attended between Wave 1 and Wave 2.

Reflecting the figures shown in Table 11.1, these findings show that for each type of contact, greater proportions of participants showed a decrease in number of appointments than an increase.

Across the board, the frequency of each type of contact with the health sector was more likely to decrease than increase for participants, albeit only marginally in some cases.

Figure 11.2 Changes in the number of appointments attended



By and large, these findings appear to point to a positive association between participation in the Pathfinder and level of engagement with the health sector (although as with previous measures it is not possible from this research to establish the level of change in contact that might have been expected without involvement with the Pathfinder).

This perspective assumes that a decrease in contact with the health sector is a positive change. This is probably reasonable to assume for contacts such as visits to casualty or A&E. However, there are possibly some cases where an increase in contact actually represents better management of a health condition (for example by more scheduled appointments being attended).

### 11.3 General wellbeing

The World Health Organization (WHO)-5 wellbeing test is a tool used for assessing general wellbeing among individuals. It does so by presenting them with the following five statements, and asking roughly how often in the previous two weeks they have experienced each:

1. *I have felt cheerful and in good spirits.*
2. *I have felt calm and relaxed.*
3. *I have felt active and vigorous.*
4. *I woke up feeling fresh and rested.*
5. *My daily life has been filled with things that interest me.*

## Evaluation of the Personalisation Pathfinder Trial

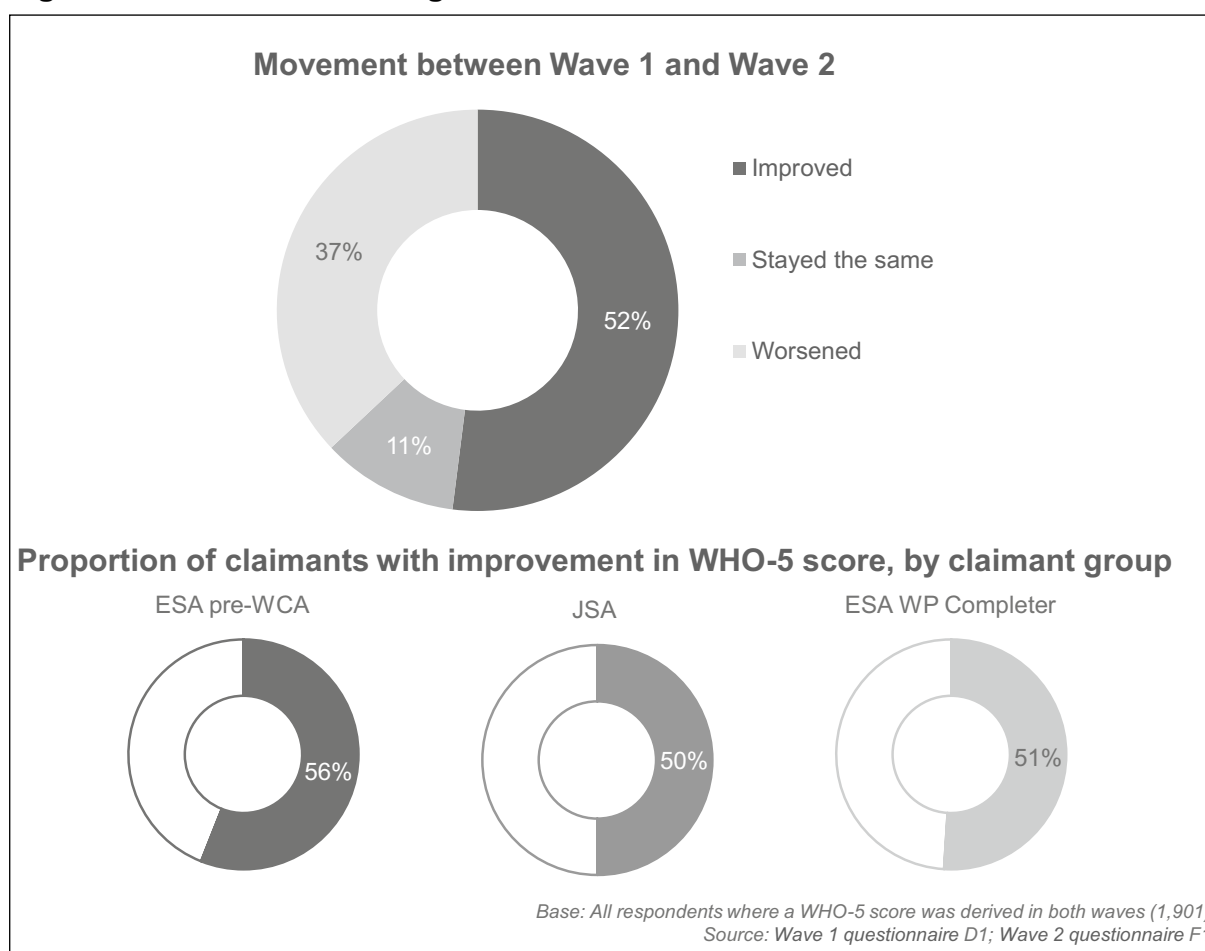
Based on their responses across all statements, a score out of 100 is derived, from which an indication of general wellbeing can be assessed.

Participants were asked to provide responses to the WHO-5 questions at both Wave 1 (four months after joining the Pathfinder) and Wave 2 (12 months after joining) to make it possible to look at changes in their overall wellbeing.

A score of 52 or below on the WHO-5 typically indicates low wellbeing and is often used as an indication for testing depression under ICD-10.<sup>36</sup> Four months into the Pathfinder, more than three-quarters (76 per cent) recorded a score of 52 or lower; this reduced to 70 per cent eight months later.

As shown in Figure 11.3, just over half of participants demonstrated an improvement in their general wellbeing, per the WHO-5 scoring system. As with other outcomes, the ESA pre-WCA group were the most likely to show positive movement (56 per cent). That said, over half of JSA and ESA Work Programme (WP) Completers also showed a positive change.

**Figure 11.3 WHO-5 wellbeing scores**



Improved wellbeing was more common among those whose health situation also improved, including those who found their health condition to be less limiting (63 per cent) or easier to manage (58 per cent).

It was also more common among those who were in work or due to start work 12 months after joining the Pathfinder (60 per cent).

<sup>36</sup> ICD-10 is the 10th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD), a medical classification list by the World Health Organization (WHO).



## Evaluation of the Personalisation Pathfinder Trial

An increase in wellbeing scores was also slightly more common among participants who had contact with a Community Employment Specialist (CES) during the Pathfinder programme (58 per cent).

These findings appear to indicate a positive association between taking part in the Pathfinder and general wellbeing although it is again worth bearing in mind that this research does not enable us to establish what level of change would have taken place over time without involvement. It is also possible that the analysis under-reports changes that took place since starting the Pathfinder as the first measure was taken at a point around four months after starting when some change might already have taken place.

### 11.4 Social interaction

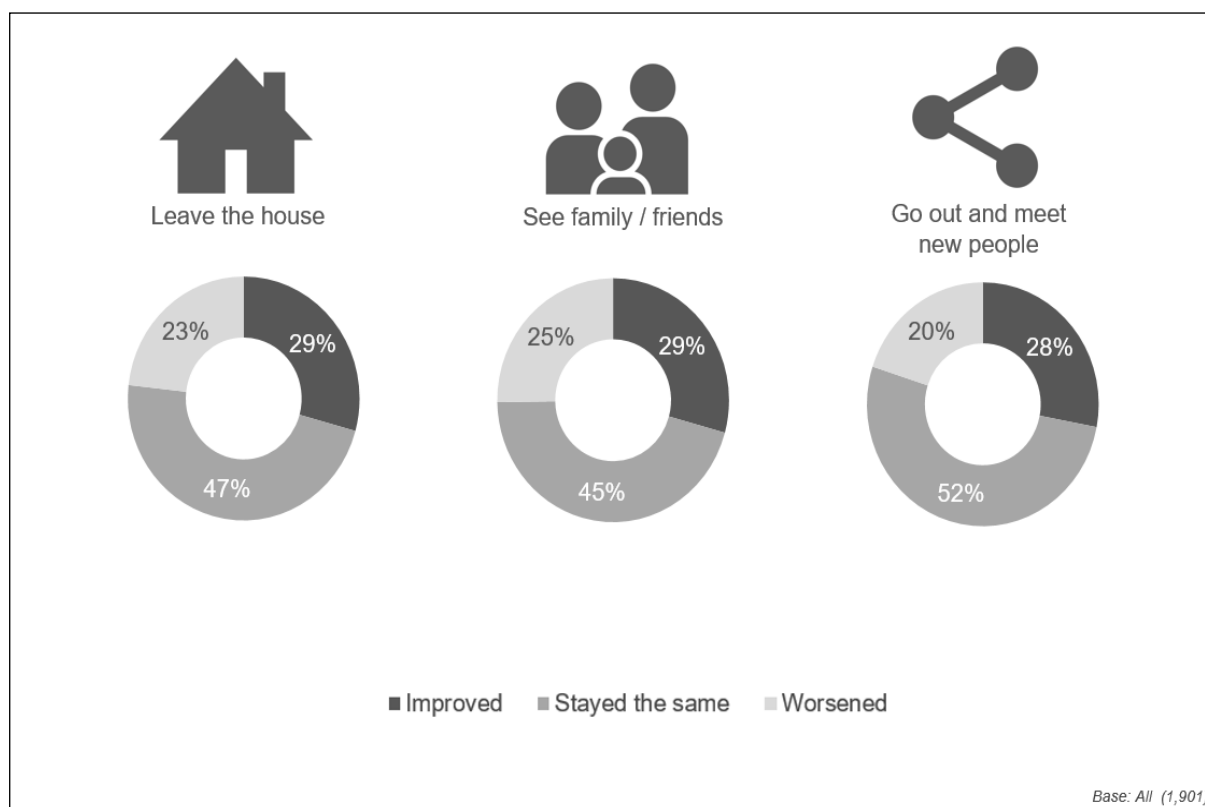
To explore the effect of participation in the Pathfinder on social interaction, participants were asked at both Wave 1 and Wave 2 how frequently they:

- Left the house.
- Saw family/friends.
- Went out and met new people.

Findings showed high levels of isolation among participants, particularly ESA WP Completers. At the point 12 month point after joining the Pathfinder, one in five (21 per cent) claimants said that they rarely or never left the house, around a third (35 per cent) say they rarely or never saw family or friends and 71 per cent rarely or never went out and met new people.

Figure 11.4 shows how levels of social interaction changed between the two survey points (four and 12 months into the Pathfinder trial).

Figure 11.4 Change to levels of social interaction



The proportions reporting an increase in each type of social interaction were similar (at around three in ten). However at the same time, a proportion of participants also reported a decrease in social interaction. On balance, in each of the three areas, the proportion of those reporting more interaction was slightly greater than the proportion reporting less interaction i.e. there was a net increase in contact. Those who reported a decrease in social interaction were more likely to have experienced a deterioration in the extent to which their health condition impacted their life and in their ability to manage their health condition.

Claimants with learning difficulties or conditions relating to socialisation were slightly more likely to report an increase in how often they left the house (33 per cent). Claimants aged 16-24 years old were also notably more likely to report an increase (37 per cent).

Claimants who came into contact with a CES while on the Pathfinder were more likely to report that they went out to meet new people more frequently 12 months after joining the programme (35 per cent).

## 11.5 Quality of life

During qualitative interviews, some claimants said the Personalisation Pathfinder had had an impact on other aspects of their life, including the ability to socialise and work with others. The impact on communication skills for some meant they felt more confident and comfortable discussing their health condition.

*'I feel more confident to talk openly about disabilities which I didn't before.'*

(JSA Caseload claimant, Surrey and Sussex)

## Evaluation of the Personalisation Pathfinder Trial

Many participants on the Personalisation Pathfinder were perceived by DWP staff to be highly isolated, with few opportunities to socialise and meet others. The Pathfinder was therefore felt to offer an opportunity to get out of the house and meet other people on a regular basis. This was particularly the case for participants in J2E and other job clubs. For some claimants, meeting with the SHDC had clearly become a valued social event.

*'It was mainly about social [support] ... and that was 101 per cent [right for me]. Sometimes I go three weeks without hearing another human voice.'*

(JSA Caseload claimant, Surrey and Sussex)

For some, the ability to socialise more was linked with a greater ability to manage their mental health condition.

*'I get out and about more because there are certain places where I have had anxiety attacks like Tesco's and places like that, but when I was in Tesco's yesterday I was absolutely fine. I avoided that place for months but I go there every day now.'*

(JSA Caseload claimant, Surrey and Sussex)

Pathfinder staff argued that for some of the more vulnerable claimants, changes to their quality of life were often nuanced and small, but important.

*'Sometimes it would be tiny things, for example a claimant going shopping more often, or even less often as they are planning their day better. They would socially interact more.'*

(Project Manager)

## 11.6 DWP and Jobcentre Plus reputation

Interviews with claimants showed a marked impact on their perceptions and attitudes towards the Department for Work and Pensions and Jobcentre Plus. This was particularly the case among participants who had engaged with the Jobcentre Plus for a longer period of time and those who were among the JSA Caseload group.

Participants with a longer history of claiming JSA vastly preferred the support received through the Personalisation Pathfinder to previous provision. Some claimants shared experiences of previous provision which they felt was not personalised, effective or suitable, but described the Pathfinder as different to this. Several respondents described feeling like they were now treated 'as a human, not as a number'.

*'The new lady is 100 per cent [better than previous Work Coach]. I think the appointments are normally supposed to be 25 – 30 minutes and I'm usually sat there for up to an hour.'*

(ESA WP completer, South West Wales)

Participants with less experience claiming benefits reported having heard negative stories of engaging with the Jobcentre and feeling apprehensive prior to their first meeting with a Work Coach. These were predominantly ESA pre-WCA claimants. Several described being positively surprised by how personalised and supportive the provision was.

## Evaluation of the Personalisation Pathfinder Trial

The additional time available to spend with a Work Coach and the additional flexibility was clearly appreciated by claimants, many of whom described a close relationship with the Work Coach and feeling like they ‘really cared’.

*‘I had heard so many people say it is terrible when you sign on and you have got to do this and that, which was why I was not going to get into this initially. But they all made it so easy, they really did.’*

(ESA pre-WCA claimant, South West Wales)

## Key Findings

The Personalisation Pathfinder aimed to help claimants improve their overall wellbeing, reduce their levels of social isolation and to a greater extent manage their health condition. Survey data shows that just over a quarter of claimants have experienced an improvement with regards to ability to manage their health condition. The proportion who said they were able to manage their health condition very or quite well increased from 62 per cent in Wave 1 to 68 per cent in Wave 2. ESA pre-WCA claimants were the most likely to have experienced an improvement in their ability to manage their health condition.

Survey data further shows that claimants’ contact with the health sector decreased while on the Pathfinder, particularly with regards to meeting with a GP or family doctor.

Half of all claimants in the survey experienced an improvement in overall wellbeing between the two survey points (four and 12 month into the Pathfinder trial). The proportion of claimants categorised as having low levels of wellbeing reduced from 76 per cent to 70 per cent of the course of the Pathfinder. An improvement in wellbeing was correlated with an improvement in health or in ability to manage a health condition.

The Pathfinder also appears to have had a positive impact on claimants’ ability to engage in social activity. Three in ten claimants were more likely to be leaving the house, meeting up with friends or family or meeting new people 12 months after joining the Pathfinder.

It is however worth bearing in mind that it is not possible to conclusively determine what changes happened as a direct result of involvement with the Pathfinder, in the absence of data from a control group.

# 12 What drives positive outcomes?

## Chapter overview

Based on multivariate analysis techniques, this chapter discusses different ‘predictors’ in terms of their importance or influence on claimant outcomes.

Six outcomes were included in the analysis:

- Positive impact on ability to manage health condition.
- Positive impact on wellbeing, as measured by the World Health Organization (WHO)-5 scale.
- Positive employment outcomes.
- Positive impact on confidence to find work.
- Positive impact on attitudes to work.
- Positive impact on levels of social isolation.

It is only possible to report on three of the six outcomes. The statistical models for positive impact on ability to manage health condition, positive impact on wellbeing and positive impact on levels of social isolation did not produce accurate enough predictions about the relationship between claimant characteristics, interaction with the Personalisation Pathfinder and the outcomes which were being tested. This chapter therefore only discusses results from analysis on positive employment outcomes, positive impact on confidence to find work and positive impact on attitudes to work.

## 12.1 Overview of multivariate analysis

Findings in this report have so far been based on bivariate analysis which have allowed us to understand what factors – i.e. claimant characteristics, behaviours and interactions with the Pathfinder Programme - are identified with a range of positive claimant outcomes.

This chapter goes another step beyond that and explains how important and influential these different factors are relative to one another in predicting these outcomes.

The factors (predictors) that were ‘tested’ divided into two broad categories: ‘demographic’ and ‘other’ predictors, which are listed in Table 12.1.

**Table 12.1 Predictors used in key drivers analysis**

Demographic	Other
Claimant group	Support received while on the programme
District	Types of activities undertaken <b>as a result of conversations</b> with Work / Specialist Health and Disability Coach (SHDC)
Age	No. of times met with work / SHDC
Gender	Reasons for signing up for Pathfinder
Whether worked at any point prior to starting PP (W1)	Non-health related barriers to work
Specific type of health condition	
Broad type of health condition	
Whether a long-term health condition	
Whether a limiting health condition	
Ability to manage health condition	
Number of dependent children	

The relative importance of each of these predictors in determining six different positive outcomes (dependent variables), listed in Table 12.2, was measured using a binary (logistic) regression approach combined with a stepwise algorithm. Each outcome measures positive movement either between the four month and 12 month survey points *or* between the beginning and the end of the Personalisation Pathfinder.

For each outcome, predictors were tested in separate blocks; first the demographic predictors and second, the ‘other’ predictors. A third model was then run which combined the demographic with the other predictors. This third model enabled us to explore within each outcome, the extent to which variables related to the delivery of the trial (e.g. types of support received and activities undertaken) predicted positive outcomes over and above demographic variables. This meant that a total of 18 models were run across six outcomes.

However, it is only possible to report on three of the six outcomes. Some models were not able to produce accurate enough predictions about the relationship between claimant characteristics or their interaction with the Pathfinder Programme and the positive outcomes that were being tested. Models where the predictive power was too low to establish a statistical relationship are indicated with a cross in Table 12.2 and those where the predictive power was high enough are indicated with a tick. It is on these ‘ticked’ outcomes that the key drivers analysis in this chapter focuses.

**Table 12.2 Outcomes tested using key drivers analysis**

Outcome	Predictive power
Positive impact on ability to manage health condition	×
Positive impact on wellbeing (WHO-5)	×
Positive employment outcomes	✓
Positive impact on confidence to find work	✓
Positive impact on attitudes to work	✓
Positive impact on levels of social isolation	×

## 12.2 Employment outcomes

The first model measures the relative importance of different factors in determining a claimant’s employment outcome, specifically whether a claimant was either:

- in paid work at both the four month and 12-month survey points.<sup>37</sup>
- not in paid work at the four month but was (or was due to start) at the 12-month survey point.

Across all predictors (i.e. combining both demographics and other predictors) it was claimants’ perceived (lack of) barriers to employment as reported at the four month point that featured most in determining a positive employment outcome.<sup>38</sup>

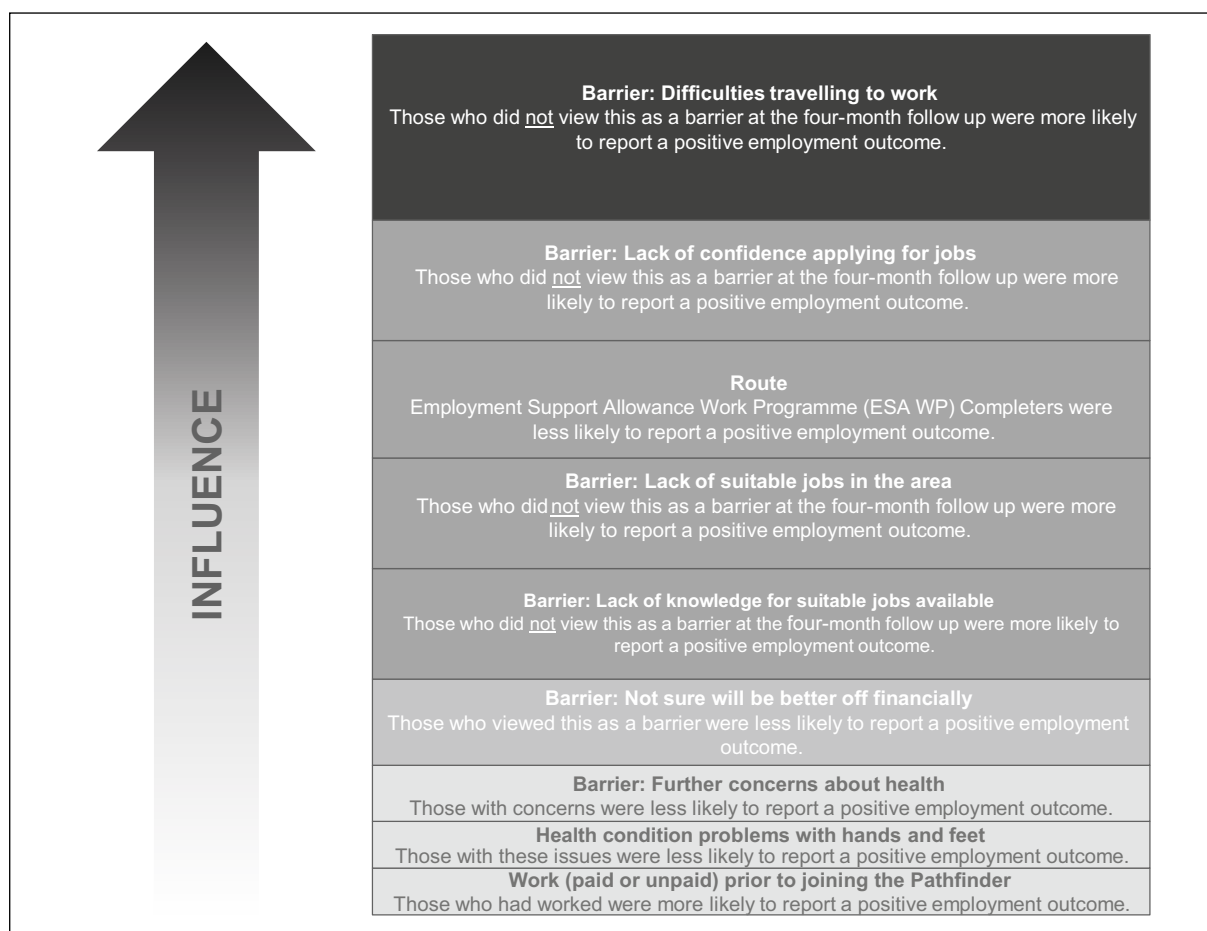
As shown in Figure 12.1, the factor that was most important was whether or not a claimant thought they would face difficulties travelling to work: those who didn’t were more likely to report an employment outcome.

Of roughly equal importance (but less important than perceived difficulties travelling to work) were how confident a claimant felt about applying for jobs, the claimant group, concerns about the local labour market conditions, and lack of knowledge about jobs suitable to the individual.

<sup>37</sup> This group does not include claimants who were in paid employment at some point during the programme, but dropped out of employment while still involved with the Pathfinder.

<sup>38</sup> Only non-health related barriers to employment were used in the model. Explicit health related barriers were not used on the basis that claimant views on their health condition would dominate.

Figure 12.1 Factors most influencing on employment outcomes



And slightly less influential still were:

- Feeling that they would not be better off financially in work (less likely).
- Further concerns about general health – those who expressed these were less likely to report a positive employment outcome.
- Whether a claimant had problems with their legs or feet (also less likely).
- Whether a claimant had done any work (paid or unpaid) prior to joining the Pathfinder – those who had done any paid or unpaid work.

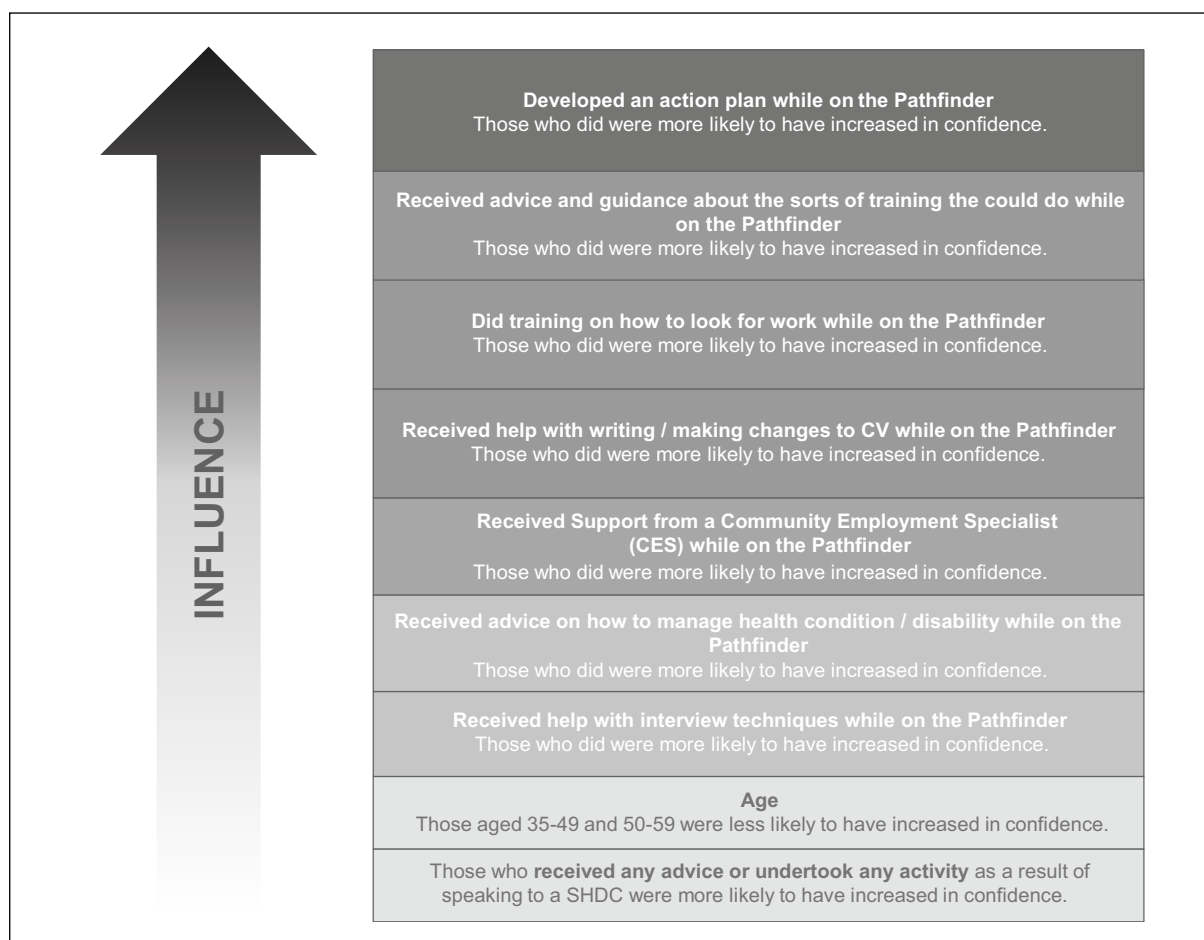
Two additional factors had some, albeit, very little influence on employment outcomes. These were whether a claimant reported a mental health condition and those who had sight problems – both groups being less likely to enter work.

## 12.3 Positive impact on confidence finding work

The second model determined what factors were associated with claimants experiencing an improvement to their perceived confidence finding work. This was the model with the greatest number of factors influencing outcomes. Common among the most influential factors in this model was that they were all types of support or activities the claimant may have received or undertaken while on the programme, rather than factors related to health, behaviour or demographics. Figure 12.2 shows the most influential factors on confidence for finding work.



Figure 12.2 Factors most influencing on confidence for finding work



In the combined model, including both demographic and other predictors, the most influential factor in determining whether claimants self-reported an increase in their confidence to find work was whether they designed an action plan with their Specialist Health and Disability Work Coach (SHDC). Half of all claimants who met with a SHDC reported having developed an action plan and of these 83 per cent found this helpful in moving them closer to employment. Qualitative interviews with Pathfinder staff and claimants revealed that SHDCs took different approaches to designing the action plan. While some took a 'light touch' approach and only used the action plan in an informal way, others used them in a more formalised and involved way. Regardless of what approach Coaches took, both staff and claimants described the use of action plans as 'collaborative' and 'unpressurised'. While Coaches might take the lead on designing the action plan, claimants described feeling in control of what went into it and how it was used.

The second most influential factors were whether the claimant had received advice or guidance about what sorts of work or training they could do, training on how to look for work and help writing or making changes to a CV. These all had equal importance to the model and were only slightly less influential than the preceding factors. These activities were undertaken by 61 per cent, 53 per cent and 48 per cent of claimants in the survey and generally perceived to be useful (rated useful by 84 per cent, 89 per cent and 84 per cent respectively).

Following these factors, was receiving advice on how to manage their health condition and disability, receiving support from a CES and help with job interview techniques.

## Evaluation of the Personalisation Pathfinder Trial

The next influential factor was age, with claimants 16-24 being more likely to achieve a positive outcome than older age groups. This confirms findings from Chapter 10, which showed that increases in confidence and motivation to find work, as well as other soft skills such as communication, understanding of what is needed to find and retain work and ability to travel independently, were more common among the younger age group.

Following these factors was whether claimants experienced receiving any support or undertaking any activities. As could perhaps be expected, those saying they did not receive any support or undertake any activities were less likely to have achieved a positive outcome. Taking part in volunteering or work experience and receiving in-work support also had a positive influence in the model. Taking part in volunteering or work experience was approximately half as important as developing an action plan, while receiving in-work support was approximately half as important as receiving advice on how to manage a health condition or disability.

Other less influential factors in determining whether the claimant experienced an improvement to their confidence finding work were:

- joining the Pathfinder due to a belief it could help them back to work
- joining the Pathfinder due to liking the idea of additional support
- concerns for general health being a barrier to work (less likely)
- finding it difficult travelling for work being a barrier to work (less likely)
- long term health conditions (less likely)
- other barriers to finding work
- joining the Pathfinder because it was less pressurised than other support programmes
- other reasons for signing up (less likely)
- lack of confidence applying for work being a barrier to employment (less likely)
- having speech problems.

## 12.4 Positive impact on work attitudes

The third model looked at what drove improvements to work attitudes, that is the extent to which the claimant felt more positive about returning to work at the 12-month point compared with the four-month point. The combined model found eight influential factors and these were a mix of factors related to the delivery of the Pathfinder and factors related to the health and perceived barriers to work. Figure 12.3 shows the factors most likely to influence attitudes towards work.

Figure 12.3 Factors most influencing on attitudes towards work



By far the most influential factor whether or not a claimant suffered from depression; those who had were more likely to become more interested in work between the four month and 12 month. This suggests that claimants who suffered from depression before taking part in the Personalisation Pathfinder received support which helped them experience an improvement in their perceptions of returning to work.

The second most influential factor was uncertainty over whether their financial situation would be improved by working. Claimants who felt this way were less likely to have achieved positive outcomes in terms of attitudes to work.

Claimants who said they had an 'other' health condition at the four-month point were more likely to have had a positive impact on their attitudes to work. This was nearly as important as the perception of not necessarily being financially better off in work.

The next two influential factors were related to the support delivered by the Pathfinder. These were receiving advice or guidance on what sorts of work or training claimants could do and receiving training on how to look for work.

Although to a lesser extent still, claimants' perceived barriers to work, as reported at the four-month point, also had some bearing on whether or not they improved their attitude to work with time - the following barriers, as identified at the four-month point, were all linked with better attitudes to work: those who reported (in order of importance):

- Not feeling confident applying for jobs.
- No perceived barriers.
- Not knowing what suitable jobs are available.

## Key Findings

This chapter finds that a range of factors predicted positive outcomes in terms of employment status, perceived confidence to find work and attitudes towards returning to work. The factors that predicted positive outcomes were a mix of demographic and behavioural factors, as well as factors related to the delivery of the Pathfinder, such as what activities or forms of support the participant took part in or received.

The most important factors predicting positive employment outcomes were all related to a perceived (lack of) barriers to work, for example whether or not difficulties travelling to work were seen as a barrier.

The most influential factors in terms of confidence to find work on the other hand were all related to support the claimant may have received or activities they may have undertaken while on the Pathfinder. In terms of improvements to attitudes to work, the most influential factors were a mix of factors related to the delivery of the Pathfinder and demographic and behavioural factors.

Overall, these findings suggest that the different types of support delivered through the Personalisation Pathfinder lead to positive impacts, particularly with regards to claimants' perceived confidence finding work. Looking specifically at employment outcomes however, it is not clear that any particular types of support provided by the Pathfinder led to such results. The outcomes instead appear to be linked with the extent to which the claimant felt barriers to returning to work at the beginning of the trial.

# 13 Conclusions

This chapter summarises some conclusions from this evaluation, drawing together findings from qualitative and quantitative research, as well as statistical regression analysis. This chapter also discusses the extent to which the Personalisation Pathfinder achieved the aims set out in its design.

## 13.1 Conclusions about delivery

### 13.1.1 Recruitment

Recruitment for the Pathfinder was time-consuming due to the volume of targets, difficulty reaching individuals, high levels of refusals and high levels of claimants agreeing to attend a meeting but subsequently not attending. Introductory group information sessions about the Pathfinder were found to be less effective than one-to-one meetings for recruitment purposes, but far more labour intensive. In many offices, group sessions were therefore abandoned altogether for recruitment, in favour of one-to-one meetings.

### 13.1.2 Implementation

The voluntary nature of the trial was felt to improve engagement among claimants once they had agreed to take part in the Pathfinder. However, recruitment staff felt the voluntary aspect of the trial made the initial contact with claimants, and establishing an open dialogue in order to discuss how the trial could support them, more difficult (particularly for Employment Support Allowance (ESA) pre-Work Capability Assessment (WCA) claimants). They suggested making an initial discussion about the Pathfinder mandatory but in that discussion making it clear that participation after that point is voluntary. Where participants did not feel the voluntary nature of the programme was made explicit to them, this appears to have been associated with lower levels of engagement.

It is clear that the Pathfinder reached very vulnerable claimants, who often struggled with a combination of health conditions and social isolation, by providing additional time and flexibility to Specialist Health and Disability Coaches (SHDCs). Towards the beginning of the trial, participants reported high incidences of mental health conditions, as well as physical conditions. Participants also showed high levels of social isolation and low levels of wellbeing, as indicated by the World Health Organization (WHO) wellbeing scale. This was particularly the case for ESA Work Programme (WP) Completers.

The Pathfinder trial largely retained the fundamental characteristics of the intended structure across the three Districts; however, there is some evidence of uneven implementation, particularly with regards to use of the Personalisation Fund. The fund was intended for provision that could not be secured through existing funds but SHDCs reported that there was some confusion around the types of support they could access the fund for. In most cases, it was found that provision could be secured through existing funding routes such as the Flexible Support Fund (FSF)

and Low Value Provision (LVP). Pathfinder staff in some offices also made some changes to the recruitment process, notably making changes to the telephone script used by recruitment staff, abandoning introductory group information sessions and moving recruitment from recruitment staff to SHDCs, who were felt to have a better understanding of what participation in the trial would entail.

It should also be noted that the makeup of claimants on the Pathfinder varied somewhat between the three Districts which may also have had an impact on implementation. In Greater Wessex, a higher proportion of participants were from the ESA pre-WCA group compared to Surrey and Sussex and South West Wales, while South West Wales had a notably higher proportion of Jobseeker's Allowance (JSA) claimants with a known health condition or disability.

### **13.1.3 Experience of the Pathfinder**

The Pathfinder has led to some very positive experiences which – in line with policy intent – felt genuinely personalised. To a large extent these positive experiences were driven by strong relationships built between participants and SHDCs. The flexibility that the Pathfinder offered in terms of the amount of time that SHDCs were able to spend with claimants and the format that this took allowed for a more trusting relationship to be built and has made a lot of participants feel well-supported. The Pathfinder was different from other provisions in that there was less of an emphasis on employment outcomes and more focus on soft outcomes, such as confidence, motivation, overall wellbeing and management of health condition. This change in emphasis was recognised and greatly appreciated by claimants interviewed in this study. Two thirds of claimants in the quantitative survey rated their meetings with their Work Coach as useful and felt the Coach was understanding of their needs.

It was only in a minority of cases that Pathfinder experiences involved any external content related to the management of health conditions. Discussions of how to effectively manage health conditions appear to have been effectively covered in sessions with SHDCs but it appeared relatively unusual for external provision to be sourced to cover this.

### **13.1.4 Journey 2 Employment**

Although the Journey 2 Employment (J2E) job clubs were only able to accommodate a small number of participants, these were generally regarded very positively by both staff and claimants. Eight in ten claimants who said they took part in group sessions rated these as helpful in moving closer to employment, and nine out of ten claimants who met with a Community Employment Specialist (CES) felt this was helpful. Those who had met with a CES or taken part in a group sessions were further more likely to report outcomes such as increased confidence and motivation and were overall more positive about the trial. There is evidence that J2E was particularly beneficial to younger claimants, who were more positive about the sessions and reported feeling more confident as a result of taking part.

Discussions and observations showed that these job clubs were able to offer support which was felt to be very different from that offered through a one-to-one interview with a SHDC in the Jobcentre. Taking part in group exercises that did not have an explicit work-related focus helped individuals to build skills in an unthreatening way. The peer support element was also very valuable both in terms of providing social interaction and helping claimants to feel that the barriers that they were facing were

surmountable. The most commonly reported challenge to delivering J2E job clubs was low levels of referrals being made by Jobcentre staff, particularly in the first months of the Pathfinder trial.

### **13.1.5 Partnership working and local engagement**

Engagement with employers was limited due to a perceived lack of time and too large a geographical area to cover. Specialist Partnership Managers and Community Employment Specialists (CES) described employer engagement as valuable but highly time consuming. While Specialist Partnership Managers themselves generally felt they had been successful in engaging with local providers, they said they had not had enough time to sufficiently engage with employers. CESs similarly struggled to find time for employer engagement and instead prioritised time spent on recruitment and engaging with J2E participants.

Across the three Districts, the Pathfinder achieved less than was intended in terms of improving local integration of the Jobcentre with employers, voluntary organisations and the health sector. While pockets of activity took place, particularly with regards to engagement with the health sector, stakeholders were less convinced of the impact this had had.

## **13.2 Conclusions about outcomes**

At the outset of the evaluation, a Theory of Change model was drawn-up that explained how the Pathfinder was intended to work. Reviewing this in the light of the findings shows encouraging findings in terms of some of the key outcomes.

### **13.2.1 Employment outcomes**

Some employment outcomes were achieved. Three in ten claimants were in work 12 months after joining the Personalisation Pathfinder. It is not possible to assess from this research what proportion of claimants would have achieved these outcomes without the assistance of the Pathfinder, but stakeholder and claimant interviews point towards the Pathfinder being directly responsible for a number of these outcomes. Although employment outcomes were much lower for the ESA WP Completer group, both staff and claimants were particularly likely to attribute these outcomes directly to the Pathfinder.

And there are indications of work-readiness improving among those who did not find work. Measures such as proportion of job applications made and interviews attended point to increased activity in the period after joining the Pathfinder and two-fifths of claimants themselves (who had not found work) stated that they had moved closer to doing so.

### **13.2.2 Soft outcomes**

Both staff and claimants themselves often felt that they had seen an improvement in their confidence and self-esteem through their experiences on the Pathfinder. Half of participants reported an increase in confidence to find work over their time on the Pathfinder. It was also reasonably common for claimants to report improvements in communication skills and the ability to travel independently.

## Evaluation of the Personalisation Pathfinder Trial

Improvements in wellbeing and social isolation were more modest. Between four and 12 months after joining the Pathfinder, there was an overall increase in the proportion of participants who felt they were able to manage their condition well. Over this period, the proportion reporting an increase in their wellbeing (on the WHO-5 scale) was also greater than the proportion reporting a decrease. Similarly, on the measures of social isolation, the proportion reporting an improvement was slightly greater than those reporting a deterioration.

The evidence is mixed in terms of the extent to which staff obtained better knowledge of local provision through the Pathfinder and the extent to which the trial created better partnerships for future work, as set out in the Theory of Change. Although District Provision Tools were updated, some Coaches with previous experience working with claimants with disabilities and/or health conditions felt that they already had good awareness of the provision available in their local area and therefore did not benefit much from the additions to the tool. Some Specialist Partnership Managers also suggested that the tool in itself was not enough to ensure provision was made use of and that considerable engagement with Coaches, either in person or through digital communication channels, was necessary to ensure take up.

The ability of Specialist Partnership Managers to add value in this area appears to have been limited by the large geographical areas that some were covering. Coaches in two Districts agreed that the geographical spread of the area they were covering meant that Specialist Partnership Managers were spread too thin. Specialist Partnership Managers also reported that ensuring SHDCs made use of the specialist provision available required them spending a considerable amount of time engaging with Coaches in person and through digital communication channels. In two Districts, Specialist Partnership Managers however appear to have made considerable progress in terms of engaging with local health services.

Improved job satisfaction for Jobcentre Coaches was identified in the Theory of Change as an impact the Pathfinder should aim to achieve. SHDCs who took part in the qualitative survey mostly found delivery of the Pathfinder rewarding as they felt that they were able to devote a sufficient amount of time to make a real difference to people's lives. Hence the Pathfinder has been successful in delivering improved staff satisfaction.

As set out in the Theory of Change, there is also evidence that the Pathfinder led to an improvement in Jobcentre Plus reputation among claimants. Those with a previous experience interacting with the Jobcentre Plus vastly prefer the support offered through the Pathfinder and described it as far more personalised, tailored and relevant to their needs.



# Appendix 1: Methodology

This research consisted of both quantitative and qualitative elements:

- A quantitative telephone survey conducted with claimants shortly after joining the programme to establish baseline information on employment history, health conditions, and attitudes to work.
- A follow-up quantitative telephone survey with claimants twelve months after joining the programme. The purpose of this follow-up survey is to measure 'distance travelled' towards work during the programme.
- Depth interviews, both face-to-face and via telephone, and focus groups with Coaches, managers, and external stakeholders involved in the delivery of the programme.
- Face-to-face depth interviews with claimants to discuss their experience of being on the programme.
- Observations of Journey 2 Employment job clubs and face-to-face depth interviews with Community Employment Specialists.

## Quantitative methodology

A total sample of 7,656 records was delivered to IFF by DWP in six batches. Initially, 450 records were set aside for the qualitative phase and a further 150 records were set aside for a pilot exercise. After removing duplicate records, those with missing or invalid contact details, those who joined the Pathfinder in its first month, and opt-outs<sup>39</sup>, 6,674 valid records remained and were contacted for the first survey, which took a census approach.

The quantitative element of the research involved two Waves of surveys. The first Wave took place when claimants were towards the beginning of their participation on the Pathfinder, while the second took place 12 months after the claimant started receiving this support. Interviewers called through the sample in six batches, according to the month they first joined the Pathfinder programme. This was done to ensure that both first-Wave and second-Wave interviews took place at consistent points along the claimant journey. Participants who joined the Pathfinder programme in its first month, April 2015, were excluded from the research as their experience may have been atypical.

Prior to each Wave, a pilot exercise was conducted to test ease of understanding, appropriateness of wording of the questionnaire and survey length. Interviews were conducted from IFF's in-house Computer Assisted Telephone Interviewing (CATI) centre in Central London.

In the first Wave, 3,326 participants were interviewed approximately six months after joining the Pathfinder programme, with a response rate of 50 per cent (see Table 14.4). These interviews were carried out between January 2016 and May 2016 and lasted an average of 26 minutes. Table 14.1 shows the breakdown of completed interview numbers by region and claimant group.

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<sup>39</sup> After receiving a letter introducing and describing the survey, 495 individuals contacted IFF to opt out.

**Table 14.1 The breakdown of the number of completed interviews in Wave 1 by region and claimant group**

	<b>South West Wales</b>	<b>Greater Wessex</b>	<b>Surrey and Sussex</b>	<b>Overall</b>
<b>ESA pre-WCA</b>	<b>284</b>	<b>725</b>	<b>341</b>	<b>1,350</b>
<b>JSA</b>	<b>485</b>	<b>699</b>	<b>439</b>	<b>1,623</b>
JSA Caseload	391	482	256	<b>1,129</b>
JSA Support	94	217	183	<b>494</b>
<b>ESA WP Completers</b>	<b>47</b>	<b>234</b>	<b>72</b>	<b>353</b>
<b>Overall</b>	<b>816</b>	<b>1,658</b>	<b>852</b>	<b>3,326</b>

2,927 respondents (88 per cent) agreed to be re-contacted for the second Wave of research. Again, a census approach was taken. 1,901 claimants (65 per cent) were interviewed between June 2016 and January 2017 and these interviews lasted on average 24 minutes. A response rate of 65 per cent was achieved for the second Wave (see Table 14.5). Table 14.2 shows the breakdown of completed interview numbers by region and claimant group.

**Table 14.2 The breakdown of the number of completed interviews in Wave 2 by region and claimant group**

	<b>South West Wales</b>	<b>Greater Wessex</b>	<b>Surrey and Sussex</b>	<b>Overall</b>
<b>ESA pre-WCA</b>	<b>160</b>	<b>418</b>	<b>192</b>	<b>770</b>
<b>JSA</b>	<b>278</b>	<b>400</b>	<b>259</b>	<b>937</b>
JSA Caseload	220	286	153	<b>659</b>
JSA Support	58	114	106	<b>278</b>
<b>ESA WP Completers</b>	<b>32</b>	<b>127</b>	<b>35</b>	<b>194</b>
<b>Overall</b>	<b>470</b>	<b>945</b>	<b>486</b>	<b>1,901</b>

The Wave 1 questionnaire was designed to establish baseline information about each participant's situation shortly after joining the programme. The Wave 2 questionnaire was designed to capture any changes or improvements to personal circumstances, as well as experiences and perceptions of the Personalisation Pathfinder. Table 14.3 outlines the areas covered in both questionnaires.

**Table 14.3 Question areas in Wave 1 and Wave 2 questionnaires**

<b>Topic Area</b>	<b>Wave 1</b>	<b>Wave 2</b>
Recruitment and reasons for joining the programme	X	
Employment / benefit status	X	X
Employment history	X	
Job search activity and attitudes towards returning to work	X	X
General wellbeing	X	X
Contact with the health sector	X	X
Experience and perceptions of the Personalisation Pathfinder		X
Demographic information	X	X

## Response rates

**Table 14.4 Sample attrition and response rates for Wave 1 and Wave 2 questionnaires**

<b>Wave 1</b>	<b>Number of records</b>	<b>Percentage of total sample loaded and definitive outcome recorded</b>
Starting sample provided by DWP	8,244	
Sample remaining after data cleaning	7,313	
Sample set aside for pilot exercise	150	
Opt outs	486	
<b>Total sample loaded</b>	<b>6,677</b>	<b>100</b>
No definitive call outcome	2,004	30
Unusable records (business numbers, fax numbers, wrong numbers)	745	11
Respondent not available during fieldwork	48	1
Interview terminated by respondent	118	2

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Refusals	436	7
<b>Response rate</b>	<b>3,326</b>	<b>50</b>
<b>Wave 2</b>	<b>Number of records</b>	<b>Percentage of total sample loaded and definitive outcome recorded</b>
Longitudinal sample from Wave 1	3,326	
Wave 1 completes who agreed to be re-contacted for Wave 2	2,958	
Records used during pilot exercise	46	
<b>Total sample loaded</b>	<b>2,912</b>	<b>100</b>
No definitive call outcome	418	14
Unusable records	235	8
Respondent not available during fieldwork	18	1
Interview terminated by respondent	70	2
Refusals	269	9
<b>Response rate</b>	<b>1,901</b>	<b>65</b>

## Qualitative methodology

To supplement the quantitative work with claimants and explore aspects of the Pathfinder trial in greater depth, a series of qualitative interviews, teledepths, focus groups and observations were conducted with claimants, coaches, staff and external stakeholders. Table 14.5 details the types of interviews conducted with the various stakeholders in each District.

**Table 14.5 The breakdown of the number of interview numbers by stakeholder type and region.**

	<b>South West Wales</b>	<b>Greater Wessex</b>	<b>Surrey and Sussex</b>
Project Manager	1 face-to-face interview	2 face-to-face interviews	2 face-to-face interviews
Specialist Health & Disability Coaches	2 focus groups	2 focus groups	2 focus groups
Specialist Partnership Managers	2 teledepths	2 teledepths	2 teledepths
Work Service Managers	2 teledepths	2 teledepths	2 teledepths
Recruitment Staff	1 focus group	1 focus group	N/A
External Stakeholders	2 teledepths	-	2 teledepths
Observations of coaching sessions	4 observations	-	-

	<b>South West Wales</b>	<b>Greater Wessex</b>	<b>Surrey and Sussex</b>
J2E CES	3 interviews	3 interviews	2 interviews
J2E Trainers	1 interview	1 interview	2 interviews
J2E Job Club Observations	1 observation	1 observation	1 observation

These discussions covered:

- Recruitment.
- Nature of delivery.
- Quality of experience.
- Claimant attitudes.
- Employment outcomes.
- Local integration / Partnership working, including employer engagement.
- Training and support of Pathfinder staff.
- Lessons learnt.

In addition to the stakeholder interviews, 90 face-to-face interviews were conducted with claimants on the Personalisation Pathfinder from July to early September 2016. These 90 respondents were recruited from a sample of 450 individuals who were set aside from the quantitative fieldwork sample. These records were selected to ensure a mix of claimant types and health conditions.

## **Evaluation of the Personalisation Pathfinder Trial**

As such, they were not approached for the telephone survey in addition to the face-to-face depth interview. The interviews explored a range of topics including:

- Personal circumstances and entry onto the Pathfinder.
- Support received.
- Experience of working with Specialist Health and Disability Coach.
- Experience of the J2E programme (where applicable).
- Employment outcomes.
- 'Soft' outcomes (e.g. confidence, attitudes to work).

Thirty interviews were conducted in each of the trial Districts. Over the three Districts, 20 interviews were conducted with ESA Work Programme Completers, 35 interviews were conducted with ESA pre-WCA claimants and the remaining 35 interviews were with JSA claimants (20 Caseload, 15 Support).

## Appendix 2: Multivariate analysis

**Table 15.1 DV5 Positive impact on employment outcomes**

	Importance %	Odds ratio
<b>Route</b>	13%	
JSA		Reference
ESA WP Completers		0.37
ESA pre-WCA		1.09
<b>Which of the following would you say are preventing you from working</b>		
<i>There are not many suitable jobs in my area</i>	12%	1.6
<i>I don't know what suitable jobs are available</i>	12%	1.7
<i>I don't feel confident about applying for jobs</i>	13%	1.8
<i>I may find it difficult to travel for work</i>	20%	2.2
<i>I'm not sure I would be financially better off in work</i>	9%	1.8
<i>Further concerns for general health</i>	6%	1.8
<b>Prior to receiving the more personalised support, were you, at any point, in employment, either paid or unpaid</b>		
No	5%	Reference
Yes		1.74
<b>Please can you tell me if you have ever had any of the following</b>		
<i>Problems with legs or feet</i>	5%	1.5
<i>Difficulty with seeing</i>	3%	1.5
<b>Health conditions</b>		
<i>Any mental</i>	3%	1.5

**Table 15.2 DV2 Positive impact on confidence finding work**

	Importance %	Odds ratio
<b>Age</b>	6%	

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16-25		Reference
25-34		0.67
35-49		0.45
50-59		0.37
60-65		0.60

### **When you received your personalised support from the work/SHD coach, did you receive/undertake (Reference category='No'/ 'Did not receive')**

<i>Advice or training about what sorts of work or training you could do</i>	9%	1.58
<i>Training in how to look for work</i>	9%	1.47
<i>Help with writing/making changes to a CV</i>	9%	1.54
<i>Help with job interview techniques</i>	7%	1.36
<i>Advice on how to manage your health condition/disability (both in and out of the work environment)</i>	8%	1.70
<i>Developing an action plan</i>	10%	1.60
<i>Support from Community Employment Specialist</i>	8%	1.70
<i>In-work support</i>	4%	1.92

### **As a result of conversations with your work/SHD coach, did you undertake (Reference category='No'/ 'Did not undertake')**

<i>Volunteering or work placements</i>	5%	1.51
<i>Did not receive or undertake any activities</i>	6%	0.70

### **Why did you decide to sign up for the personalised support (Reference category='No')**

<i>I liked the idea of receiving additional help and support</i>	2%	1.45
<i>I felt it could help me get back to work</i>	3%	1.49
<i>Less pressurised than other support programmes</i>	1%	2.23
<i>Other</i>	1%	0.50

### **Which of the following would you say are preventing you from working (Reference category='No')**

<i>I don't feel confident about applying for jobs</i>	1%	0.76
<i>I am worried people won't employ me because of my age</i>	0%	1.46
<i>I may find it difficult to travel for work</i>	2%	0.67
<i>Further concerns for general health</i>	3%	0.61



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<i>Other</i>	1%	2.50
<b>Please can you tell me if you have ever had any of the following (Reference category='No')</b>		
<i>Speech problems</i>	1%	1.54
<b>Long-term health condition (Reference category='No')</b>		
<i>No</i>		Reference
<i>Yes</i>		0.67

**Table 15.3 DV5 Positive impact on work attitudes**

	<b>Importance %</b>	<b>Odds ratio</b>
<b>When you received your personalised support from the work/SHD coach, did you receive/undertake (Reference category='No' / 'Did not receive')</b>		
<i>Advice or training about what sorts of work or training you could do</i>	14%	1.60
<i>Training in how to look for work</i>	13%	1.55
<b>Which of the following would you say are preventing you from working (Reference category='No')</b>		
<i>I don't know what suitable jobs are available</i>	5%	1.41
<i>I don't feel confident about applying for jobs</i>	8%	1.41
<i>I'm not sure I would be financially better off in work</i>	17%	0.48
<i>None of these</i>	5%	3.37
<b>Please can you tell me if you have ever had any of the following (Reference category='No')</b>		
<i>Depression</i>	22%	2.12
<i>Other</i>	16%	0.22

# Appendix 3: Wave 1 quantitative claimant questionnaire

Text sub	Code	Definition
ESA Pre WCA	1	Where PLT_MARKERNO = 5 in Sample
JSA	2	Where PLT_MARKERNO = 6 or 7 in sample
ESA WP Completers	3	Where PLT_MARKERNO = 9 in sample

## S Screener

*PROCESS NOTE: The purpose of this section is to check individuals' eligibility for the survey to ensure that we collect responses from those definitely in scope of the research. Details on an individual's claim history is also collected in this section.*

### ASK PERSON WHO ANSWERS PHONE

**S1 Good morning / afternoon / evening. My name is NAME and I'm calling from IFF Research. Please can I speak to NAME?**

Respondent answers phone	1	CONTINUE
Transferred to respondent	2	
Hard appointment	3	MAKE APPOINTMENT
Soft Appointment	4	
Refusal	5	CLOSE
Not available in deadline/during fieldwork	6	
Not able to take part due to health condition	7	
Engaged	8	
Fax Line	9	
No reply / Answer phone	10	
Business Number	11	
Dead line	12	
Deceased	13	

ASK ALL

**S2 IF NECESSARY:** Good morning / afternoon, my name is NAME, calling from IFF Research, an independent market research company.

We're conducting a survey on behalf of the Department for Work and Pensions (DWP) about the services and support provided by Jobcentre Plus. You should have recently received a letter about this survey.

We understand that you signed up to receive additional help from your Work coach in the Jobcentre. You will have been working with them to identify the best way to help you move into employment. This support is personalised, entirely voluntary and tailored to focus on you and your specific needs. You might know it as the Personalisation Pathfinder, or recall speaking to a specialist advisor or work coach at the Jobcentre Plus about help you can receive to support you in your journey to work. We'd like to talk to you about how you came to receive this help and your thoughts on returning to work. Are you happy to take part now?

**IF SAY NO LONGER RECEIVE JSA/ESA:** Even though you are no longer receiving Jobseekers Allowance/ Employment Support Allowance, we would still like to talk to you about your experiences whilst you were on this programme.

Please be assured that participating in the survey will not affect your benefits or the support you receive in any way, now or in the future. Your answers will be held in the strictest confidence by the research team, unless you tell us that you or someone else is at risk.

[**ADD IF NECESSARY:** We will use the information you and others give us to produce statistics on what everyone has said. This will help DWP to understand the way in which people have been supported and may help to make improvements].

Continue	1	CONTINUE
Referred to someone else in household who is a carer / advocate for named individual NAME_____	2	S2A
Hard appointment	3	MAKE APPOINTMENT
Soft appointment	4	
Refusal	5	THANK AND CLOSE
Not available in deadline	7	
Foreign language request	8	RECORD PREFERRED LANGUAGE AND GO TO S3
Face-to-face appointment request	9	

IF REFERRED TO SOMEONE ELSE IN HOUSEHOLD (S2=2)

**S2A IF NOT ALREADY READ TO CARER / ADVOCATE: Good morning / afternoon, my name is NAME, calling from IFF Research, an independent market research company.**

**We're conducting a survey on behalf of the Department for Work and Pensions (DWP) about the services and support provided by Jobcentre Plus. NAME should have recently received a letter about this survey.**

**We understand that [NAME] signed up to receive additional help from their work coach in the Jobcentre. They will have been working with them to identify the best way to help them to move into employment. This support is personalised, entirely voluntary and tailored to focus on [NAME] and their specific needs. They might know it as the Personalisation Pathfinder, or recall speaking to a specialist advisor or work coach at the Jobcentre Plus about help they can receive to support them in their journey to work. We'd like to talk to you about how they came to receive this help and their thoughts on returning to work.**

**READ FOR ALL: In order to respond on behalf of NAME, you must be an advocate or carer for them, and they must be present in the room while we conduct the interview. Are you happy to take part now?**

**IF SAY NO LONGER RECEIVE JSA/ESA: Even though they are no longer receiving Jobseekers Allowance/ Employment Support Allowance, we would still like to talk to you about their experiences whilst they were on this programme.**

**Please be assured that participating in the survey will not affect their benefits or the support they receive in any way, now or in the future. Your answers will be held in the strictest confidence by the research team, unless you tell us that you or someone else is at risk.**

**[ADD IF NECESSARY: We will use the information you and others give us to produce statistics on what everyone has said. This will help DWP to understand the way in which people have been supported and may help to make improvements].**

Continue	1	CONTINUE
Hard appointment	2	MAKE APPOINTMENT
Soft appointment	3	
Refusal	4	THANK AND CLOSE
Not available in deadline	6	
Foreign language request	7	RECORD PREFERRED LANGUAGE AND GO TO S3
Face-to-face appointment request	8	

Evaluation of the Personalisation Pathfinder Trial

IF RESPONDENT WOULD PREFER TO COMPLETE IN ANOTHER language (S2=8 OR S2A=7)

**S3 Please can you tell me your level of English?**

WRITE IN

**We will try our best to call back soon with an interviewer who can speak this language and help you complete the survey.**

ASK IF CANNOT TAKE PART DUE TO HEALTH CONDITION (S2=7)

**S3A** Would you be able and willing to take part if the interview was conducted face-to-face?

*SINGLE CODE.*

Yes	1	GO TO S3B
No	2	THANK AND CLOSE

F2F REQUESTS (S2=9 OR S2A=8 OR S3A=1)

**S3B A colleague will be in touch soon to organise the best time and place for a face-to-face interview. What would be the best number to contact you on to do so?**

WRITE IN NUMBER 1:  
WRITE IN NUMBER 2:

ASK ALL

**S4 This call may be recorded for quality and training purposes only.**

INFORMATION TO USE IF NEEDED DURING INTERVIEW:

If you would like to speak to anyone about the issues we have talked about, you can contact the Samaritans through one of the following ways:

Call *free* helpline number: 116 123 (UK)

Email: [jo@samaritans.org](mailto:jo@samaritans.org)

Post: Freepost RSRB-KKBY-CYJK, PO Box 9090, STIRLING, FK8 2SA

You can also find their local branch by going to <http://www.samaritans.org/>

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**REASSURANCES TO USE IF NECESSARY**

The interview will take around 20 minutes to complete.

Your participation will be anonymous. The report we will write will not include any names. All responses will be reported in aggregate form and your answers will not be reported to DWP in any way that would allow you to be identified.

If respondent wishes to confirm validity of the survey or get more information about aims and objectives, they can call:

MRS: Market Research Society on 0500396999

**ASK ALL**

**S5 Before we start, I'd just like to ask a few questions to make sure that you are eligible for the survey.**

**Can you confirm that you recently started receiving more personalised support in [INSERT JOIN DATE (PLT\_MARKERDT FROM SAMPLE)]?**

**ADD AS NECESSARY: The personalised support is part of a new, voluntary scheme, focused on providing tailored support for those with a disability or health condition to help people back into work. This involves a series of sessions with a specialist job coach at the Jobcentre and can involve accessing courses particularly aimed at individuals with disabilities or health conditions.**

**[IF ESA PRE-WCA claimants (DUM1 =1): You might have received a phone call or letter from someone in Jobcentre Plus offering you voluntary personalised support for returning back to work.]**

**[TEXT SUB IF JSA AND ESA WP COMPLETERS (DUM1 =2/3): A Jobcentre Plus adviser may have offered you some voluntary, personalised support for returning back to work.]**

Yes – recently started receiving more personalised support in [INSERT JOIN DATE]	1	CONTINUE
Yes – recently started receiving more personalised support, but not in [INSERT JOIN DATE]	2	
No – does not recall receiving more personalised support	3	

**IF DO NOT RECALL SUPPORT (S5=3)**

**S5A That's fine, in that case I would just like to talk to you about the support that you have received through the Jobcentre over the last few months – say since [INSERT JOIN DATE].**

**ASK IF DISAGREE WITH DATE FROM SAMPLE (S5=2)**

**S6 When did you start receiving this more personalised support? We are just interested in the month and year.**

## Evaluation of the Personalisation Pathfinder Trial

WRITE IN

DP INSTRUCTION: IF JOIN DATE AT S5 IS MORE THAN 3 MONTHS BEFORE START DATE FROM SAMPLE THEN THANK AND CLOSE

*INTERVIEWER NOTE: DATES BEFORE JUNE 2015 AND AFTER DECEMBER 2015 NOT ALLOWED*

**FINAL JOIN DATE TEXT SUB:**

IF S5=1 OR 3 USE JOIN DATE FROM SAMPLE. IF S5=2 TAKE JOIN DATE FROM S6

S7 **QUESTION REMOVED**

S8 **QUESTION REMOVED**

**DUMMY 1A**

RECALL OF SUPPORT	1	S5=1 OR 2
NOT RECALL OF SUPPORT	2	S5=3

## A Joining the Pathfinder Programme

*PROCESS NOTE: The purpose of this section is to understand how individuals first heard about the programme, how they came to be on it and what attracted them to it. Individuals are asked to rate the information they received about the programme and state what sort of support they have so far received to help them move into work. N.B at the time of interview, individuals will have been involved in the programme for at least 3 months. This data will be used to understand individuals' early experiences of the pathfinders and their perspectives on how the programme is delivered.*

ASK IF RECALL SUPPORT (DUMMY1A=1)

**I'd like to start by asking a few questions about how you started receiving more personalised support into employment.**

**A1 So can you tell me how you first became aware of this more personalised support?**

*DO NOT READ OUT. SINGLE CODE.*

I was told about it during a meeting with a Jobcentre advisor or work coach	1	
I received a call from someone at Jobcentre Plus	2	
IF ESA PRE-WCA claimants (DUM1 =1) I received a letter from the Jobcentre Plus	3	
I knew other people who were receiving this more personalised support / involved in the Personalisation Pathfinder Programme	4	
I saw posters / leaflets / information about the personalised support (Personalisation Pathfinder Programme) at Jobcentre Plus	5	
I was told about the scheme by someone at another organisation other than Jobcentre Plus (PLEASE SPECIFY)	6	
Other (PLEASE SPECIFY)	7	
Can't remember	8	



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ASK ALL WHO RECEIVED LETTER/PHONE CALL (A1 = 2 or 3)

**A2 On a scale of 1 to 5 where 1 is not at all clear and 5 is very clear, how clear was this initial [TEXT SUB FOR THOSE WHO RECEIVED CALL (A1=2): phone call] [TEXT SUB FOR THOSE WHO RECEIVED LETTER (A1=3): letter] in terms of explaining the aims of the personalised support and informing you about what would be available?**

1- Not at all clear	1	
2	2	
3	3	
4	4	
5- Very clear	5	
Don't know	6	

**A3 QUESTION REMOVED**

ASK IF RECALL SUPPORT (DUMMY1A=1)

**A4 Did you attend either an initial interview with a JCP adviser or coach or a group session to talk through the personalised support?**

*READ OUT. SINGLE CODE*

Interview with an adviser	1	
Group session	2	
Both	3	
I have not yet attended an interview or group session	5	
Can't remember	4	

**Evaluation of the Personalisation Pathfinder Trial**

ASK IF ATTENDED AN INTERVIEW (A4=1 OR 3)

**A5 On a scale of 1 to 5 where 1 is not at all clearly and 5 is very clearly, how clearly was the personalised support explained to you during the interview in terms of the support you would receive?**

*SINGLE CODE*

1-Not at all clearly	1	
2	2	
3	3	
4	4	
5- Very clearly	5	
Don't know	6	

ASK IF ATTENDED A GROUP SESSION (A4= 2 OR 3)

**A6 On a scale of 1 to 5 where 1 is not at all clearly and 5 is very clearly, how clearly was the personalised support explained to you during the group session in terms of the support you would receive?**

*SINGLE CODE*

1- Not at all clearly	1	
2	2	
3	3	
4	4	
5- Very clearly	5	
Don't know	6	

**A7 QUESTION REMOVED**

**Evaluation of the Personalisation Pathfinder Trial**

ASK IF RECALL SUPPORT (DUMMY1A=1)

**A8 Were you aware when you signed up for the personalised support that it is voluntary, in other words that you didn't have to agree to sign up to it?**

*SINGLE CODE*

Yes	1	
No – I thought I had to take part	2	
Don't know	3	

ASK ALL WHO THOUGHT PROGRAMME is Mandatory (A8 = 2)

**A9 Why did you think the support was mandatory?**

**ADD IF NECESSARY: By this, we mean why you thought you *had* to take up the personalised support**

DO NOT READ OUT. CODE ALL THAT APPLY

My coach / advisor suggested the programme was mandatory	1	
The initial letter suggested the programme was mandatory	2	
The initial phone call suggested the programme was mandatory	3	
My friend / peers informed me the programme was mandatory	4	
I just assumed it was mandatory (based on previous benefits experience)	7	
I just assumed it was mandatory (any other reason)	8	
Other (please specify)	5	
Don't know	6	

**A10 QUESTION REMOVED**

**Evaluation of the Personalisation Pathfinder Trial**

ASK IF RECALL SUPPORT (DUMMY1A=1)

**A11 Why did you decide to sign up for the personalised support?**

*PROMPT AS NECESSARY. CODE ALL THAT APPLY*

I liked the idea of receiving additional help and support	1	
I liked the idea of receiving help and support that was tailored to my individual needs	14	
I liked the idea of meeting people with similar experiences to me	2	
I liked the idea of seeing a Specialist Health and Disability Coach	3	
My family / friends encouraged me to do so	4	
My adviser at Jobcentre Plus encouraged me to do so	5	
It was different to anything I'd been on before	6	
I really want a job	7	
I felt it could help me get back to work	15	
It's a voluntary scheme and could stop when / if I wanted	8	
I can choose what to participate in – support packages are voluntary	9	
Because some of the sessions were held away from Jobcentre Plus	10	
I just went along with what was suggested / happy to try anything	11	
I didn't realise I had a choice	12	
I thought it would help me build confidence	16	
Less pressurised than other support programmes	17	
OTHER (please specify)	13	

**A12 QUESTION REMOVED**

**Evaluation of the Personalisation Pathfinder Trial**

ASK ALL

A13 [READ IF DUMMY1A=2: **So we can better understand the recent interaction you've had with the Jobcentre, please could you tell me] which of the following types of advice and activities have you received or undertaken [IF DUMMY1A=2: through them since [INSERT CLAIM DATE]] [IF DUMMY1A=1: through the personalised support] ?**

*READ OUT. CODE ALL THAT APPLY*

ROTATE CODES (EXCEPT OTHER AND DK)

Advice or guidance about what sorts of work or training you could do	1	
Training in how to look for work	2	
Help with writing a CV	3	
Help with job interview techniques	4	
Work experience or a work placement	5	
Advice on money management (including benefits payments or debt)	6	
Advice on how to manage your health condition / disability (both in and out of the work environment)	7	
Training or advice about making general lifestyle changes (e.g. quitting smoking, healthy eating)	8	
Group sessions with your peers	9	
Training or advice on communication skills	10	
Information about other local support to help my condition or help into work	11	
Developing an action plan	12	
Support from the Community Employment Specialist	14	
Anything else (please specify)	15	
None of the above	16	
Don't know	17	

A14 **QUESTION REMOVED**

A15 **QUESTION REMOVED**

## B Employment history

*PROCESS NOTE: The purpose of this section is to establish incidence and basic profile of employment among programme participants.*

ASK ALL

**In this next section I'm going to ask you some questions about your employment history.**

ASK ALL

**B1 IF DUMMY1A=1: Prior to you receiving the more personalised support were you, at any point, in employment, either paid or unpaid?**

**IF DUMMY1A=2: Were you, at any point, in employment, either paid or unpaid, prior to [CLAIM DATE]?**

Yes	1	
No	2	

ASK IF IN WORK AT SOME POINT PRIOR TO JOINING THE PATHFINDER PROGRAMME (B1=1)

**B5 And, in this role, were you...?**

*READ OUT. SINGLE CODE*

Self-employed	1	
Working full-time for an employer in a paid role	2	
Working part-time for an employer in a paid role	3	
Working in an unpaid / voluntary role for an employer	4	

ASK ALL

**B2 IF DUMMY1A=1: At the point just before you started receiving more personalised support, were you actively seeking paid work?**

**IF DUMMY1A=2: Were you actively seeking work in the 12 months prior to [CLAIM DATE]?**

Yes	1	
No	2	

ASK IF IN WORK AT SOME POINT PRIOR TO JOINING THE PATHFINDER PROGRAMME (B1=1)

**For the next set of questions I'd just like you to think about the MOST RECENT [IF B5=1: work][IF B5≠1: job] that you were doing [IF DUMMY1A=2: before [CLAIM DATE]][IF DUMMY1A=1: prior to receiving the personalised support].**

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ASK IF IN WORK AT SOME POINT PRIOR TO JOINING THE PATHFINDER PROGRAMME UNLESS SELF-EMPLOYED (B1=1 AND B5≠1)

**B3 What was the name of the organisation you were working for?**

WRITE IN		
Refused	1	

ASK IF IN WORK AT SOME POINT PRIOR TO JOINING THE PATHFINDER PROGRAMME UNLESS SELF-EMPLOYED (B1=1 AND B5≠1)

**B4 What was your job title when you were working [IF B5≠1: for [INSERT EMPLOYER NAME FROM B3]]? What were your main duties or responsibilities? What did you mainly do in your job?**

*INTERVIEWER PROBE FOR FULL DETAILS.*

*E.G. IF RESPONDENT WAS "SUPERVISOR" ASK WHAT KIND OF ACTIVITIES THEY SUPERVISED, IF 'ASSISTANT, WHAT SORT OF ASSISTANT?*

WRITE IN. TO BE CODED TO 4 DIGIT SOC 2010. ALLOW REFUSED.
---

**B5 QUESTION MOVED TO AFTER B1**

ASK IF IN WORK AT SOME POINT PRIOR TO JOINING THE PATHFINDER PROGRAMME (B1=1)

**B6 How many hours per week did you usually work in this job?**

*PROBE FOR ESTIMATE. USE DK OPTION AS A LAST RESORT.*

WRITE IN HOURS		
Don't know / it varied	1	

ASK DON'T REMEMBER / IT VARIED (B6=DK)

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**B7 Would you say you were usually working...?**

*READ OUT. SINGLE CODE*

30 or more hours per week	1	
16 to 29 hours per week	2	
Fewer than 16 hours per week	3	

ASK IF IN WORK AT SOME POINT PRIOR TO JOINING THE PATHFINDER PROGRAMME (B1=1)

**B8 How long ago did you stop working [IF B5≠1: for [INSERT EMPLOYER NAME FROM B3]]?**

*PROBE FOR ESTIMATE. USE CANNOT REMEMBER OPTION AS A LAST RESORT.*

*PROMPT AS NECESSARY. SINGLE CODE*

Less than six months ago	1	
Between 6 months and less than 1 year ago	2	
Between 1 year and less than 2 years ago	3	
Between 2 years and less than 3 years ago	4	
Between 3 years and less than 4 years ago	5	
5 or more years ago	6	
Work still ongoing / Still employed in same job	7	
Cannot remember	8	



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ASK IF IN WORK AT SOME POINT PRIOR TO JOINING THE PATHFINDER PROGRAMME AND NOT IN WORK (B1=1 AND B8≠7)

**B9 Could you tell me the reason or reasons you [IF B5=1: stopped working] [B5≠1: left your last job]?**

*DO NOT READ OUT. CODE ALL THAT APPLY*

B5≠1: You were dismissed	1	
B5≠1: You were made redundant	2	
B5≠1: You took voluntary redundancy	3	
It was a temporary job which came to an end	4	
B5≠1: You resigned	5	
You gave up work for health reasons	6	
You took early retirement	7	
You retired (at or after State Pension age)	8	
You gave up work for family or personal reasons	9	
Education or training	10	
You left/stopped for some other reason (PLEASE SPECIFY)	11	

IF WERE MADE REDUNDANT or DISMISSED, RETIRED EARLY OR RESIGNED (B9 = 1,2,3,5 or 7).

**B10 May I just check, you mentioned [INSERT CODE FROM B9] from your last job. Was this mainly due to health reasons?**

Yes	1	
No	2	
Don't know / Prefer not to say	3	

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ASK IF IN WORK AT SOME POINT PRIOR TO JOINING THE PATHFINDER PROGRAMME (B1=1)

**B11 And please can I check if the onset of your main health condition / disability developed before or after you started your most recent job?**

*READ OUT. CODE ALL THAT APPLY*

You had your health condition / disability before you started your most recent job	1	
Your health condition / disability developed after you started your most recent job	2	
Do not read out: Don't know / Can't remember	3	

**B12 QUESTION REMOVED**

**B13 QUESTION REMOVED**

## C Job search activity and confidence about returning to work

*PROCESS NOTE: The purpose of this section is to understand individuals' attitudes about moving into work, the barriers they face to doing this and the type of support needed to be able to work / be more work-ready.*

READ OUT TO ALL

**I would now like to ask you about your future plans and your views about returning to work.**

ASK ALL

**C1 Which of the following is closest to how you currently feel about work?**

*READ OUT. SINGLE CODE.*

My health condition/disability rules out work as an option	1	
On some days I could consider a return to work	2	
I could return to work now if the right job was available	3	
I am currently in work	4	

ASK ALL UNLESS C1=4

**C1A To what extent would you like to return to work in the future?**

*READ OUT. SINGLE CODE.*

To a great extent	1	
To some extent	2	
A little	3	
Not at all	4	
Don't know / prefer not to say	6	

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ASK ALL UNLESS C1=4 OR C1A=4

**C1B At what stage in the future do you think you will be able to work? Would you say...**

*READ OUT. SINGLE CODE.*

Within the next six months	1	
Within the next year	2	
Within the next two years	3	
Later than 2 years	4	
Never	5	
Don't know / prefer not to say	6	

**C2 QUESTION REMOVED**

**C3 QUESTION REMOVED**

**C4 QUESTION REMOVED**

**C5 QUESTION MOVED TO AFTER C8**

**C6 QUESTION REMOVED**

**C7 QUESTION REMOVED**

ASK ALL NOT CURRENTLY IN WORK (C1=1/2/3)

**C8 On a scale of 1 to 5 where 1 is strongly disagree and 5 is strongly agree, to what extent do you agree or disagree with the following statements about your health condition / disability and finding work?**

*READ OUT. SINGLE CODE EACH STATEMENT.*

	Strongly disagree		Strongly agree			DK
_1 I am worried people won't employ me because of my health condition	1	2	3	4	5	6
_2 I know of many jobs that I could do with my health condition / disability	1	2	3	4	5	6
_3 I am worried that working could make my health condition worse	1	2	3	4	5	6
_4 The idea of working makes me feel anxious	1	2	3	4	5	6
_5 I think employers could accommodate my health needs	1	2	3	4	5	6
_6 I need better social care support, such as assistance at home, to enable me to work	1	2	3	4	5	6

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ASK ALL NOT CURRENTLY IN WORK (C1/2/3)

**C8A Which of the following would you say are preventing you from working?**

*READ OUT. CODE ALL THAT APPLY.*

There are not many suitable jobs in my local area	1	
I don't have the right qualifications, skills or experience	2	
I don't know what suitable jobs are available	3	
I don't feel confident about applying for jobs	4	
I am worried people won't employ me because of my age	5	
I may find it difficult to travel to work	6	
I have family or caring responsibilities	7	
I am not sure I would be financially better off in work	8	
Other (specify)	9	
None of these	10	

ASK ALL WHO FACE BARRIERS C8A=1-9 OR ANY C8=4/5

**C5 And have you made Jobcentre Plus aware of these issues that might make it difficult for you to find work?**

Yes	1	
No	2	

**C9 QUESTION REMOVED**

**C10 QUESTION REMOVED**

**C11 QUESTION REMOVED**

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ASK ALL

C12 IF DUMMY1A=1: **In the 12 months before you started receiving the more personalised support, how many...?**

IF DUMMY1A=2: **Thinking about the 12 months prior to [CLAIM DATE], how many...?**

	WRITE IN	DK
_1 Job applications did you make		3
_2 Job interviews did you attend		3

IF DON'T KNOW EXACT NUMBER AT EITHER C12\_1 OR C12\_2 – PROMPT WITH RANGES

C13 **Would you say you** [TEXT SUB IF C12\_1=DK: **made**] [TEXT SUB IF C12\_2=DK: **attended**]...?

0 [TEXT SUB IF C12_1=DK: applications] [TEXT SUB IF C12_2=DK: interviews]	1
1-2 [TEXT SUB IF C12_1=DK: applications] [TEXT SUB IF C12_2=DK: interviews]	2
3-4 [TEXT SUB IF C12_1=DK: applications] [TEXT SUB IF C12_2=DK: interviews]	3
5-9 [TEXT SUB IF C12_1=DK: applications] [TEXT SUB IF C12_2=DK: interviews]	4
10-14 [TEXT SUB IF C12_1=DK: applications] [TEXT SUB IF C12_2=DK: interviews]	5
15-19 [TEXT SUB IF C12_1=DK: applications] [TEXT SUB IF C12_2=DK: interviews]	8
20+ [TEXT SUB IF C12_1=DK: applications] [TEXT SUB IF C12_2=DK: interviews]	9
Don't Know	6
Refused	7

## D General Wellbeing

*PROCESS NOTE: The purpose of this section is to measure individuals' mental well-being*

READ OUT FOR ALL

**D1A We'd also like to understand how you are feeling more generally about your life. Everything you tell me will be kept in the strictest confidence and to re-iterate, none of your answers will ever be attributed to you as an individual**

ASK ALL

**D1 [IF CARER OR ADVOCATE (S2A=1): For the next set of questions it is important that the answer comes is from the perspective of NAME. Please can you refer the question to them to obtain an answer, or let us know if you are not able to do so.]**

**I'm now going to read you a series of statements. For each, can you please tell me whether over the last weeks you have experienced these all of the time, most of the time, more than half of the time, less than half of the time, some of the time, or at no time?**

READ OUT. SINGLE CODE EACH STATEMENT

	All of the time	Most of the time	More than half of the time	Less than half of the time	Some of the time	At no time	Refusal	Carer unable to answer
_1 I have felt cheerful and in good spirits	5	4	3	2	1	0	6	7
_2 I have felt calm and relaxed	5	4	3	2	1	0	6	7
_3 I have felt active and vigorous	5	4	3	2	1	0	6	7
_4 I woke up feeling fresh and rested	5	4	3	2	1	0	6	7
_5 My daily life has been filled with things that interest me	5	4	3	2	1	0	6	7

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ASK ALL

**D2 And how often do you do each of these things? Would you say you...?**

*READ OUT. SINGLE CODE EACH STATEMENT*

	<b>None of the time</b>	<b>Rarely</b>	<b>Some of the time</b>	<b>Often</b>	<b>All of the time</b>	<b>Refusal</b>	<b>Carer unable to answer</b>
_1 Leave the house	1	2	3	4	5	6	7
_2 Meet up with friends and / or family	1	2	3	4	5	6	7
_3 Go out to meet new people	1	2	3	4	5	6	7

**D3 QUESTION REMOVED**



## E Nature of Health Condition / Disability

*PROCESS NOTE: The purpose of this section is to explore in more detail the nature of an individual's health condition and how it affects them on a day to day basis. Where an individual has multiple conditions they will be asked to concentrate on their 'main' health condition or disability.*

READ OUT FOR ALL

**E1A I'd like to ask you a few questions about your health condition and how this affects you on a day-to-day basis. Please be assured that any information you provide throughout the interview will be held in the strictest confidence.**

ASK ALL

**E1 Firstly, do you have any physical or mental health conditions or illnesses lasting or expecting to last 12 months or more?**

Yes	1	
No	2	
Refused	3	

ASK ALL

**[IF DUMMY1A=1: I understand that you were invited to more personalised support because you have or had a health condition /disability and the support offered through the programme is designed to help you back into work.]**

**E2A Please can you tell me if you have or recently had any of the following..**

*READ OUT. CODE ALL THAT APPLY.*

Problems with arms or hands	1	
Problems with legs or feet	2	
Problems with neck or back	3	
Difficulty with seeing (while wearing spectacles or contact lenses)	4	
Difficulty with hearing	5	
Speech problems	6	
Skin conditions or allergies	7	
Chest or breathing problems	8	
Heart or blood pressure problems	9	
Problems with bowels, bladder, stomach, liver, kidneys or digestion	10	

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Diabetes	11	
Depression	12	
Stress or anxiety	13	
Epilepsy	14	
Autism or Asperger’s syndrome	15	
Other learning difficulties or disabilities	16	
Problems due to alcohol or drug addiction	17	
Fatigue or problems with concentration or memory	18	
Other mental health condition (other than depression / stress)	19	
Progressive illness not covered above <i>INTERVIEWER NOTE: e.g. cancer not included elsewhere, multiple sclerosis, symptomatic HIV, Parkinson’s disease, Muscular Dystrophy</i>	20	
Other health or disability issue 1 (SPECIFY)	21	
Other health or disability issue 2 (SPECIFY)	22	
Other health or disability issue 3 (SPECIFY)	23	

ASK IF >1 CODE SELECTED AT E2A (DS: IF ONE RESPONSE AT E2A, FORCE INTO APPROPRIATE CODE AT E2B)

**E2B And which of those would you consider to be your *main* health condition?**

*PROMPT AS NECESSARY. SINGLE CODE.*

DS: SHOW ALL CODES SELECTED AT E2A.

Problems with arms or hands	1	
Problems with legs or feet	2	
Problems with neck or back	3	
Difficulty with seeing (while wearing spectacles or contact lenses)	4	
Difficulty with hearing	5	
Speech problems	6	

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Skin conditions or allergies	7	
Chest or breathing problems	8	
Heart or blood pressure problems	9	
Problems with bowels, bladder, stomach, liver, kidneys or digestion	10	
Diabetes	11	
Depression	12	
Stress or anxiety	13	
Epilepsy	14	
Autism or Asperger's syndrome	15	
Other learning difficulties or disabilities	16	
Problems due to alcohol or drug addiction	17	
Fatigue or problems with concentration or memory	18	
Other mental health condition (other than depression / stress)	19	
Progressive illness not covered above <i>INTERVIEWER NOTE: e.g. cancer not included elsewhere, multiple sclerosis, symptomatic HIV, Parkinson's disease, Muscular Dystrophy</i>	20	
Other 1 (SHOW TEXT PROVIDED AT E2)	21	
Other 2 (SHOW TEXT PROVIDED AT E2)	22	
Other 3 (SHOW TEXT PROVIDED AT E2)	23	
DO NOT READ OUT: Cannot distinguish main health condition	24	

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ASK ALL.

E2C [IF MORE THAN ONE CODE SELECTED AT E2A: **Do your health conditions**] [IF 1 CODE SELECTED AT E2A: **Does your condition or illness reduce your ability to carry out day-to-day activities?**

*READ OUT. SINGLE CODE.*

Yes, a lot	1	
Yes, a little	2	
Not at all	3	
Refused	4	

- E2 **QUESTION REMOVED**
- E3 **QUESTION REMOVED**
- E4 **QUESTION REMOVED**
- E5 **QUESTION REMOVED**
- E6 **QUESTION REMOVED**
- E7 **QUESTION REMOVED**

UNLESS NO REDUCTION IN ABILITY (UNLESS E2C=3)

E8 [IF CARER OR ADVOCATE (S2A=1): **For the next two of questions it is important that the answer comes is from the perspective of [NAME]. As before, please can you refer the question to them to obtain an answer, or let us know if you are not able to do so.**

**How often** [IF ONE CODE SELECTED AT E2A: **does this condition / disability**] [IF MORE THAN ONE CODE SELECTED AT E2A: **do your health conditions**] **limit the amount or kind of activities that you can do?**

*PROMPT AS NECESSARY. SINGLE CODE.*

Always	1	
Often	2	
Sometimes	3	
Rarely	4	
Never	5	
Carer unable to answer	6	

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ASK ALL

E9 **Overall, how well would you say you are able to manage** [IF ONE CODE SELECTED AT E2A: **this condition / disability**][IF MORE THAN ONE CODE SELECTED AT E2A: these health conditions /disabilities] on a day to day basis?

*READ OUT. SINGLE CODE*

Very well	1	
Quite well	2	
Not very well	3	
Not at all well	4	
DO NOT READ OUT: It varies too much to say	5	
Carer unable to answer	7	
Refused	6	

## F Contact with the health sector

*PROCESS NOTE: The purpose of this section is to understand an individual's current level of interaction and dependency on the health system and what the wider impact of the pathfinders programme might be on public health services.*

ASK ALL

**Thank you. I'd now like to understand a bit more about how often you require treatment for, or assistance, for your health.**

ASK ALL

**F1 Has your health required you to attend any of the following types of appointment?**

*DEFINITIONS IF NECESSARY:*

**An outpatient appointment is when a patient is hospitalised for less than 24 hours. They do not necessarily need to stay overnight. This includes consultations, tests and scans, for example.**

**A day patient could use a wide range of services from a hospital or clinic, and tends to undergo a more involved procedure than an outpatient, for example minor surgery. They may need some recovery time but they are expected to go home on the same day.**

*READ OUT. MULTI-CODE*

In patient visits (overnight or longer)	1	
Casualty / Accident and Emergency visits	6	
Your family doctor or your GP	2	
Outpatient appointments	7	
Day patient appointments	8	
Appointments with other healthcare professionals	3	
None of the above	4	
Refused	5	

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ASK FOR EACH TYPE OF APPOINTMENT AT F1  
F2 **In the last 12 months, approximately how many times did you attend [INSERT CODE FROM F1]?**

WRITE IN		
Refused	1	

- F3 **QUESTION REMOVED**
- F4 **QUESTION REMOVED**
- F5 **QUESTION REMOVED**
- F6 **QUESTION REMOVED**
- F7 **QUESTION REMOVED**

## G Demographics

*PROCESS NOTE: The purpose of this section is to collect basic demographic information on programme participants to allow for analysis by key groups of individuals.*

**The next few questions are about you and are for classification purposes only. All information you provide is held in the strictest of confidence.**

G1 **QUESTION REMOVED**

G2 **QUESTION REMOVED**

ASK ALL

G3 **Which of the following best describes your legal marital or same-sex civil partnership status...?**

*PROMPT AS NECESSARY. SINGLE CODE*

Single (or engaged) - that is, never married and never registered in a same-sex civil partnership		
Married		
Separated, but still legally married		
Divorced		
Widowed		
In a registered same-sex civil partnership		
DO NOT READ OUT: Refused		

ASK IF SINGLE (G3=1)

G4 **May I just check are you living with someone in this household as a couple?**

Yes	1	
No	2	
Refused	3	



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ASK ALL.

**G5 And can I just check do you have any dependent children aged under 16? This includes all dependent children, regardless of whether they live in your household.**

Yes	1	
No	2	
Refusal	3	

ASK IF HAVE DEPENDENT CHILDREN UNDER THE AGE OF 16 (G5=1)

**G6 How many dependent children aged under 16 do you have?**

WRITE IN (DP: DO NOT ALLOW 0 OR MORE THAN 10)S		
Refused	1	

ASK IF HAVE DEPENDENT CHILDREN UNDER THE AGE OF 16 (G5=1)

**G7 And please can I check the age of your [IF G6>1: youngest] child?**

*INTERVIEWER TO CODE AS PER OPTIONS BELOW*

0 – 1 year	1	
1-5 years	2	
5+ years	3	
Refusal	9	

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ASK ALL

**G8 Which of the following best describes your ethnic background?**

*PROMPT AS NECESSARY. SINGLE CODE*

WHITE British	1	
WHITE Irish	2	
WHITE Other background (SPECIFY)	3	
MIXED White and Black Caribbean	4	
MIXED White and Black African	5	
MIXED White and Asian	6	
MIXED Other mixed background (SPECIFY)	7	
BLACK OR BLACK BRITISH Caribbean	8	
BLACK OR BLACK BRITISH African	9	
BLACK OR BLACK BRITISH Other background (PLEASE SPECIFY)	10	
ASIAN OR ASIAN BRITISH Indian	11	
ASIAN OR ASIAN BRITISH Pakistani	12	
ASIAN OR ASIAN BRITISH Bangladeshi	13	
ASIAN OR ASIAN BRITISH Other background (PLEASE SPECIFY)	14	
CHINESE	15	
OTHER ETHNIC BACKGROUND (PLEASE SPECIFY)	16	
DO NOT READ OUT: Don't know	17	
DO NOT READ OUT: Refused	18	

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ASK ALL

**G9 Thinking about where you live, do you (or your household) own or rent this accommodation?**

*PROMPT AS NECESSARY. SINGLE CODE.*

Own it outright	1	
Buying it with the help of a mortgage/loan	2	
Part own and part rent (shared ownership)	3	
Rent it ( <i>includes all those who are on Housing Benefit or Local Housing Allowance</i> )	4	
Live here rent-free ( <i>including rent-free in relative's/friend's property but excluding squatters</i> )	5	
Squatting	6	
Paying rent to relatives / friends	8	
Refused	7	

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ASK ALL

**G10 What is your total annual household income? This is your [TEXT SUB IF (G3=2 OR 6) OR G4=1]: and your partner's] income from all sources before deductions for tax and National Insurance?**

*INFORMATION FOR INTERVIEWERS IF NEEDED TO PROMPT RESPONDENT:*

*Amounts for the support allowances do vary, but some guidelines of typical amounts provided are:*

*JSA / ESA pre-WCA:*

*£57.90 per person / week (18 – 24 years old) – this equates to around £3020 a year*

*£73.10 per person / week (25+) – this equates to around £3800 a year*

*ESA:*

*£102.15 per person / week – this equates to around £5330 a year*

*£109.30 per person / week – this equates to around £3800 a year*

WRITE IN		
Don't know	1	
Refused	2	

*IF DON'T KNOW OR REFUSED EXACT NUMBER – PROMPT WITH RANGES*

Less than £5,000 per year	1
£5,000 but less than £10,000	2
£10,000 but less than £15,000	3
£15,000 but less than £20,000	4
£20,000 but less than £25,000	5
£25,000 but less than £30,000	6
£30,000 but less than £35,000	7
£35,000 but less than £40,000	8
£40,000 but less than £45,000	13
£45,000 but less than £50,000	9
£50,000 or more	10
Don't Know	11
Refused	12

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**G11 QUESTION REMOVED**

ASK ALL

**G12 What is the highest qualification you have achieved?**

*PROMPT IF NECESSARY SINGLE CODE.*

Entry level qualification, for example Entry level certificates, Skills for Life at Entry level, Entry level awards, certificates and diplomas, Foundation Learning Tier pathways, Functional Skills at Entry level	1	
LEVEL 1 qualifications, for example GCSEs graded D-G, NVQs at level 1, Key Skills level, Skills for Life, Foundation Diploma, BTEC awards, certificates and diplomas at level 1, Functional Skills level 1, OCR Nationals, Foundation Learning Tier pathways	2	
LEVEL 2 which includes 5 GCSEs Grades A*-C, GCEs O Level, CSEs Grade 1, NVQ Level 2, Level 2 VQs, Key Skills Level 2, Skills for Life, Higher Diploma, BTEC awards, certificates and diplomas at level 2, Functional Skills level 2	3	
LEVEL 3 which includes 2 A levels, 3 AS levels, Advanced Extension Awards, International Baccalaureate, Key Skills level 3, NVQs at level 3, Cambridge International Awards, Advanced and Progression Diploma, BTEC awards, certificates and diplomas at level 3, BTEC Nationals, OCR Nationals	4	
LEVEL 4 which covers NVQs at level 4, Key Skills level 4, Certificates of higher education, BTEC Professional Diplomas, Certificates and Awards	5	
LEVEL 5 or above which covers undergraduate degrees (BSc, BA etc.), HNDs, Postgraduate certificates and diplomas, BTEC Professional Diplomas, Certificates and Awards, BTEC advanced professional awards, certificates and diplomas, Fellowships and fellowship diplomas, diplomas in Higher Education	6	
Don't know / Refused		
No formal qualifications		

ASK ALL

G13 **Would you like to make any other comments about the personalised support you've been receiving that we haven't covered today?**

WRITE IN		
No / Nothing to add	1	

## H Permission to link data and re-contact

H1 **Thank you very much for taking the time to speak to us today. The information we have collected from you is really important in helping the Department for Work and Pensions to understand how well help and support for ESA/JSA claimants is working.**

**Occasionally, it is necessary to call people back to clarify information; may we please call you back if required?**

*REASSURE IF NECESSARY: Your details will only be used by IFF Research to call you back regarding this particular study.*

Yes		
No		

ASK ALL

H2 **We would like to contact you again in a few months' time when you have completed your personalised support to talk about your experiences of it. Would you be willing to take part in this follow-up survey? You do not have to agree to an interview at this stage, I'm just asking if we might be able to call you to find out if you are interested.**

Yes		
No		

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ASK IF WILLING TO BE CALLED BACK (H1=1)

H2 **What would be the best number to contact you on? You can provide up to 2 different telephone numbers**

WRITE IN NUMBER 1:
WRITE IN NUMBER 2:

ASK IF WILLING TO BE CALLED BACK (H1=1)

H3 **Can I also take a number of a close family member or friend who we can contact in case we cannot reach you? Please don't forget to tell this person that you have given us their contact details.**

WRITE IN NUMBER
-----------------

ASK ALL

H4 **The Department for Work and Pensions (DWP) would like to add information held on your benefits, employment and tax records to your answers to this interview. This will give them a better picture of the circumstances of people participating in the Personalisation Pathfinder Programme.**

**If you agree, your answers will be linked using a unique identifier to your government records. All information will be used for research and statistical purposes only. Your responses would only be seen by a small number of specialist analysts within DWP, and no-one else. Your personal details will, of course, be kept completely confidential and your dealings with DWP, Jobcentre Plus, or any other government agencies will not be affected in any way.**

**Would it be ok for us to let DWP match your answers to your records?**

Yes	1	
No	2	

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### THANK RESPONDENT AND CLOSE INTERVIEW

That is the end of the interview, thank you very much for your time.

USE IF NECESSARY: If you have any concerns or questions about your existing ESA/ JSA claim you can contact Jobcentre Plus on 0345 608 8545. There is also information on

ESA at <https://www.gov.uk/employment-support-allowance>

JSA at <https://www.gov.uk/jobseekers-allowance/overview>

USE IF NECESSARY: If you would like to speak to anyone about the issues we have covered today, you can contact the Samaritans through one of the following ways:

Call *free* helpline number :116 123 (UK)

Email: [jo@samaritans.org](mailto:jo@samaritans.org)

Post: Freepost RSRB-KKBY-CYJK, PO Box 9090, STIRLING, FK8 2SA

You can also find their local branch by going to <http://www.samaritans.org/>

Finally I would just like to confirm that this survey has been carried out under IFF instructions and within the rules of the MRS Code of Conduct. Thank you very much for your help today.



# Appendix 4: Wave 2 quantitative claimant questionnaire

## S Screener

ASK PERSON WHO ANSWERS PHONE

**S1 Good morning / afternoon / evening. My name is NAME and I'm calling from IFF Research. Please can I speak to NAME?**

Respondent answers phone	1	CONTINUE
Transferred to respondent	2	
Hard appointment	3	MAKE APPOINTMENT
Soft Appointment	4	
Refusal	5	CLOSE
Not available in deadline	6	
Not able to take part due to health condition	7	
Engaged	8	
Fax line	9	
No reply / Answer phone	10	
Business number	11	
Dead line	12	
Deceased	13	

ASK ALL

**S2 Good morning / afternoon, my name is NAME, calling from IFF Research, an independent market research company.**

**We're conducting a survey on behalf of the Department for Work and Pensions (DWP) about the services and support provided by Jobcentre Plus. You took part in the research about seven months ago and kindly agreed to be re-contacted for the second stage of the research. Back then we asked you about how you came to receive an employment support package that was meant to be personalised, entirely voluntary and tailored to focus on you and your specific needs. You might know it as the Personalisation Pathfinder, or recall speaking to a specialist advisor or work coach at the Jobcentre Plus**

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**about help you can receive to support you in your journey to work. We would like to talk to you about your experience of this support now that more time has passed.**

**IF SAY NO LONGER RECEIVE JSA/ESA: Even though you are no longer receiving Jobseeker’s Allowance/ Employment Support Allowance we would still like to talk to you about your experiences whilst you were on this programme.**

**IF SAY NO LONGER RECEIVING PERSONALISED SUPPORT: Even though you are no longer receiving personalised support we would still like to talk to you about your experiences while you were on this programme.**

**IF NO RECOLLECTION OF THE PERSONALISATION PATHFINDER: The Personalisation Pathfinder is a pilot programme aiming to provide personalised support to Jobcentre Plus customers with a disability or health condition. You may have met with a specialist advisor or work coach and discussed how they could help you in your journey to work. The support would have been tailored to your needs but was/is entirely voluntary.**

**IF NO RECOLLECTION OF TAKING PART IN WAVE 1: When we last spoke we asked you how you came to take part in the Personalisation Pathfinder. We also asked you some questions about your health condition and your employment history. As part of this interview you kindly agreed to take part in the second part of this research.**

**Please be assured that participating in the survey will not affect your benefits or the support you receive in any way, now or in the future. Your answers will be held in the strictest confidence by the research team, unless you tell us that you or someone else is at risk.**

**[ADD IF NECESSARY: We will use the information you and others give us to produce statistics on what everyone has said. This will help DWP to understand the way in which people have been supported and may help to make improvements].**

Continue	1	CONTINUE
Referred to someone else in household NAME_____	2	S2A
Hard appointment	3	MAKE APPOINTMENT
Soft appointment	4	
Refusal	5	THANK AND CLOSE
Refusal – company policy	6	
Refusal – taken part in recent survey	7	
Not available in deadline	8	

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Face-to-face appointment request	9	
Foreign language request	10	
Reassurances needed	11	
Reassurance email	12	

IF S2=2

**S2A IF NOT ALREADY READ TO CARER / ADVOCATE: Good morning / afternoon, my name is NAME, calling from IFF Research, an independent market research company.**

**We're conducting a survey on behalf of the Department for Work and Pensions (DWP) about the services and support provided by Jobcentre Plus. NAME took part in the research about seven months ago and kindly agreed to be re-contacted for the second stage of the research. Back then we asked NAME about how they came to receive an employment support package that was meant to be personalised, entirely voluntary and tailored to focus on NAME and their specific needs. They might know it as the Personalisation Pathfinder, or recall speaking to a specialist advisor or work coach at the Jobcentre Plus about help they could receive to support them in their journey to work. We would like to talk to you about their experience of this support now that more time has passed.**

**READ FOR ALL: In order to respond on behalf of NAME, you must be an advocate or carer for them, and they must be present in the room while we conduct the interview. Are you happy to take part now?**

**IF SAY NO LONGER RECEIVE JSA/ESA: Even though they are no longer receiving Jobseeker's Allowance/ Employment Support Allowance we would still like to talk to you about their experiences whilst they were on this programme.**

**IF SAY NO LONGER RECEIVING PERSONALISED SUPPORT: Even though they are no longer receiving personalised support we would still like to talk to you about their experiences while they were on this programme.**

**IF NO RECOLLECTION OF THE PERSONALISATION PATHFINDER: The Personalisation Pathfinder is a pilot programme aiming to provide personalised support to Jobcentre Plus customers with a disability or health condition. NAME may have met with a specialist advisor or work coach and discussed how they could help NAME in their journey to work. The support would have been tailored to their needs but was/is entirely voluntary.**

**IF NO RECOLLECTION OF TAKING PART IN WAVE 1: When we last spoke we asked NAME/YOU how they came to take part in the Personalisation Pathfinder. We also asked some questions about NAME'S health condition and their employment history. As part of this interview NAME kindly agreed to take part in the second part of this research.**

**Please be assured that participating in the survey will not affect their benefits or the support they receive in any way, now or in the future. Your answers will be held in the strictest confidence by the research team, unless you tell us that you or someone else is at risk.**

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[ADD IF NECESSARY: **We will use the information you and others give us to produce statistics on what everyone has said. This will help DWP to understand the way in which people have been supported and may help to make improvements**].

Continue	1	CONTINUE
Referred to someone else in household NAME_____	2	S2A
Hard appointment	3	MAKE APPOINTMENT
Soft appointment	4	
Refusal	5	THANK AND CLOSE
Refusal – company policy	6	
Refusal – taken part in recent survey	7	
Not available in deadline	8	
Face-to-face appointment request	9	
Foreign language request	10	
Reassurances needed	11	
Reassurance email	12	

ASK IF CANNOT TAKE PART DUE TO HEALTH CONDITION (S1=7).

**S2B Would you be able and willing to take part if the interview was conducted face-to-face?**

*SINGLE CODE.*

Yes	1	GO TO S3B
No	2	THANK AND CLOSE

F2F REQUESTS (S2=9 OR S2A=9 OR S2B=1)

**S2C A colleague will be in touch soon to organise the best time and place for a face-to-face interview. What would be the best number to contact you on to do so?**

**Evaluation of the Personalisation Pathfinder Trial**

WRITE IN NUMBER 1:

WRITE IN NUMBER 2:

IF RESPONDENT WOULD PREFER TO COMPLETE IN ANOTHER language  
(S2=10 OR S2A=10)

**S2D Please can you tell me your level of English and preferred language?**

WRITE IN

**We will try our best to call back soon with an interviewer who can speak this language and help you complete the survey.**

**S3 This call may be recorded for quality and training purposes only.**

INFORMATION TO USE IF NEEDED DURING INTERVIEW:

If you would like to speak to anyone about the issues we have talked about, you can contact the Samaritans through one of the following ways:

Call *free* helpline number: 116 123 (UK)

Email: [jo@samaritans.org](mailto:jo@samaritans.org)

Post: Freepost RSRB-KKBY-CYJK, PO Box 9090, STIRLING, FK8 2SA

You can also find their local branch by going to <http://www.samaritans.org/>

**REASSURANCES TO USE IF NECESSARY**

The interview will take around 20 minutes to complete.

Please note that all data will be reported in aggregate form and your answers will not be reported to our client in any way that would allow you to be identified.

If respondent wishes to confirm validity of survey or get more information about aims and objectives, they can call:

MRS: Market Research Society on 0500 396999

## A Pathfinder Status

**PROCESS NOTE:** *The purpose of this section is to understand whether or not individuals are still receiving personalised support and how long they received support for.*

ASK ALL.

**A1 First of all, can I just check whether you are still receiving personalised support to help you move into employment? [PROMPT: Are you still meeting with a [IF PLT\_MARKERNO=7 work coach][else: Specialist Health and Disability Coach] or taking part in a job club?]**

*[INTERVIEW NOTE: RESPONDENTS MAY NOT BE FAMILIAR WITH THE TERM SPECIALIST HEALTH AND DISABILITY COACH BUT MAY REFER TO THIS PERSON AS THEIR ADVISER OR COACH. THROUGHOUT THE INTERVIEW WHEN THE QUESTION IS REFERRING TO THE SPECIALIST HEALTH AND DISABILITY COACH PLEASE USE THE TERM THE RESPONDENT IS FAMILIAR WITH.]*

SINGLE CODE

Yes	1	
No	2	
Don't know	3	

IF NO LONGER RECEIVING PERSONALISED SUPPORT (A1=2)

**A2 When did you stop receiving this personalised support?**  
SINGLE CODE. PROMPT AS NECESSARY.

0-2 months ago	1	
3-5 months ago	2	
6-8 months ago	3	
9-11 months ago	4	
12 or more months ago	5	
Don't know	7	

IF NO LONGER RECEIVING PERSONALISED SUPPORT (A1=2)

**A3 Why did you leave the programme?**  
MULTICODE. PROMPT AS NECESSARY

## Evaluation of the Personalisation Pathfinder Trial

Found work	1	
The programme wasn't relevant to my needs	2	
I had a Work Capability Assessment and was put into the Support Group / found not to be fit for work	3	
I started the Work Programme and had to leave	4	
I was signed off JSA/ESA	5	
I started a course at college or training centre	6	
I moved away	7	
I wasn't looking for work	8	
Jobcentre Plus told me I could not stay on the programme any longer	9	
Caring responsibilities	10	
My health deteriorated	11	
Other domestic or personal reasons	12	
Programme of support came to an end	15	
Other (please specify)	13	
Don't know	14	

## D Current Status

*PROCESS NOTES: This section aims to understand the respondent's current employment/benefit situation.*

ASK ALL

[IF STILL RECEIVING PERSONALISED SUPPORT (A1=1):

**D1 Just to check, which of the following would you say best describes][IF NO LONGER RECEIVING PERSONALISED SUPPORT/ DON'T KNOW (A1=2/3: I now have a few questions about your current employment status. Which of these best describe] your current situation?**

*INTERVIEWER NOTE: IF THE RESPONDENT IS DOING MORE THAN ONE ACTIVITY, PLACE GET THEM TO FOCUS ON THE MAIN ACTIVITY THEY ARE CURRENTLY DOING.*

READ OUT. SINGLE CODE

Self-employed	1	
Working full time for an employer in a paid role	2	
Working part time for an employer in a paid role	3	
Working in an unpaid/voluntary role for an employer	4	
Not working and claiming an out-of-work benefit	5	
Not currently working but due to start work within the next month	9	
In education or training	6	
Something else (please specify)	7	
Refused	8	



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ASK IF CURRENTLY WORKING OR DUE TO START WORK (D1=1,2,3,4,9)  
 D1A **And, can I just check, is this [IF D1=2,3,4,0: with an employer you were working for][IF D1=1: work that you did] prior to receiving the personalised support through the Pathfinder programme?**

*SINGLE CODE.*

Yes	1	
No	2	

<b>A1Dum DUMMY VARIABLE, DO NOT ASK</b>		
WORKING FOR NEW EMPLOYER / IN NEW ROLE	1	D1=1,2,3,4 AND D1A=2
STARTING WORK FOR A NEW EMPLOYER SOON	2	D1=9 AND D1A=2
WORKING FOR PREVIOUS EMPLOYER / IN PREVIOUS ROLE / STARTING AGAIN SOON	3	D1A=1
NOT WORKING	4	D1=NOT 1,2,3,4,9

ASK IF CLAIMING OUT-OF-WORK BENEFIT (D1=5)  
 D1B **Can I just check, what type of benefit are you currently claiming? Is it..**

Jobseeker's Allowance Support / JSA	1	
Employment and Support Allowance / ESA	2	
Don't know	3	

**Evaluation of the Personalisation Pathfinder Trial**

ASK IF CLAIMING ESA (D1B=2)

**D1C And which of the following best describes your current ESA group...**

<b>Support group</b> – you do not need to prepare for work or attend any interviews at the Jobcentre and are receiving the highest rate of the benefit	
<b>WRAG</b> (work related activity group) - you have to attend occasional work-focussed interviews at the Jobcentre and perhaps do work related tasks to help prepare you for work e.g. writing an action plan or producing an up-to-date CV	
<b>Awaiting assessment / outcome</b> – you have not undergone a Work Capability Assessment (WCA) or are awaiting the outcome of one	
DO NOT READ OUT: Had assessment / outcome but don't know what group you were placed in	
DO NOT READ OUT: Don't know if had an outcome	

ASK IF WORKING FOR AN EMPLOYER (D1=2,3,4)

**D2 What is the name of the organisation you are working for?**

*IF RESPONDENT HAS MORE THAN ONE JOB PLEASE ASK THEM TO NAME THEIR MAIN JOB*

WRITE IN		
Refused	1	

ASK IF WORKING(D1=1,2,3,4)

**D3 What is your job title [IF D2=2,3,4: at [INSERT EMPLOYER NAME FROM D3]]? What are your main duties or responsibilities? What do you mainly do in your job?**

*INTERVIEWER PROBE FOR FULL DETAILS.*

*E.G. IF RESPONDENT was "SUPERVISOR" ASK WHAT KIND OF ACTIVITIES THEY SUPERVISED, IF 'ASSISTANT, WHAT SORT OF ASSISTANT?*

WRITE IN. TO BE CODED TO 4 DIGIT SOC 2010. ALLOW REFUSED.		
Refused	1	

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ASK IF WORKING (D1=1,2,3,4)

**D4 How many hours per week do you currently work?**

*PROBE FOR ESTIMATES. USE DON'T KNOW AS LAST RESORT*

WRITE IN HOURS		
Don't know / it varied	1	

ASK DON'T REMEMBER / IT VARIED (D4=1)

**D4A Would you say you usually work...?**

*READ OUT. SINGLE CODE*

30 or more hours per week	1	
16 to 29 hours per week	2	
Fewer than 16 hours per week	3	

ASK IF CURRENTLY IN WORK (D1=1,2,3,4,9)

**D5 And on a scale of 1 to 5 where 1 is not at all and 5 is a great deal, to what extent do you think the advice and support you received from the Personalisation Pathfinder programme helped you [IF D1Dum=1/2: move into this job][IF D1Dum=2: you are due to start][IF D1Dum=3: return to work]?**

*SINGLE CODE*

1 – Not at all	1	
2	2	
3	3	
4	4	
5 – A great deal	5	
Don't know	7	

ASK IF CURRENTLY IN WORK (D1=1,2,3,4)

**D6 Since finding employment, have you received any of the following from anyone involved in the Pathfinder programme, such as [IF PLT\_MARKERNO=7 a work coach][else: the Specialist Health and Disability Coach] or the Community Employment Specialist?**

**Evaluation of the Personalisation Pathfinder Trial**

**[IF NECESSARY: You will have met the Specialist Health and Disability Coach in the Jobcentre. The Community Employment Specialist was involved with the job clubs, sometimes referred to as Journey 2 Employment, and you could have met with this person outside the Jobcentre.]**

*DS INSTRUCTION: ROTATE CODES 1-4*

*MULTICODE. READ OUT.*

**D6b How useful was this?**

**DS INSTRUCTION: DISPLAY FOR ALL CODES SELECTED AT D6 IMMEDIATELY AFTER CORRESPONDING ITERATION OF D6 IS SELECTED YES**

	D6	D6b				
		Not at all useful	Not very useful	Fairly useful	Very useful	DO NOT READ OUT DK
_1 A follow up from the [if PLT_MARKERNO=7 work coach] [else: Specialist Health and Disability Coach] to see how you were doing	1	1	2	3	4	5
_2 Follow up from the Community Employment Specialist to see how you were doing	2	1	2	3	4	5
_5 Other (please specify)	5	1	2	3	4	5
_6 Don't know	6					
_7 None of these	7					

## B Experience of the Pathfinder Programme

PROCESS NOTE: The purpose of this section is to understand individual’s experience of the delivery of the personalisation pathfinder programme, including their experience with the specialist health and disability coach.

**I would now like to ask you about the specific types of support you might have received between [start date] and [A1=2/3 AND LAST\_EXIT\_DT exists on sample [LAST\_EXIT\_DT] if LAST\_EXIT\_DT =blank OR A1=1 [now]].**

IF ESA PRE-WCA OR ESA WORK PROGRAMME RETURNER OR JSA CASELOAD GROUP

**B1 As part of the Personalisation Pathfinder programme you will have met with a work coach [UNLESS PLT\_MARKERNO=7: or Specialist Health and Disability Coach. On how many occasions did you meet or interact with the work coach or [UNLESS PLT\_MARKERNO=7: Specialist Health and Disability Coach], either face-to-face or via telephone or email?**

[Prompt: It doesn’t matter if you can’t remember exactly, please give an estimate.]

*SINGLE CODE*

0	1	
1	2	
2	3	
3	4	
4	5	
5	6	
6	7	
7 or more	8	
Don't know	9	

**Evaluation of the Personalisation Pathfinder Trial**

ASK IF NO MEETINGS B1=1

**B2 Why did you not meet with a [IF PLT\_MARKERNO=7 work coach] [else:Specialist Health and Disability Coach]?**

*MULTICODE. DO NOT READ OUT*

My health condition made it too difficult	1	
Transportation was not available/too difficult	2	
I decided I didn't want to join the Pathfinder programme after all	3	
I decided I didn't need support to find work	4	
I didn't want to go to the Jobcentre	5	
I didn't want to work and assumed that was the purpose of the programme	6	
Other (please specify)	7	
Don't know	8	

ASK IF EVER MET WITH A COACH B1=2-8

**B3 Where did these appointments take place?**

*MULTICODE. PROMPT AS NECESSARY*

At Jobcentre Plus offices	1	
Over the phone	2	
Another venue (please specify)	3	
Don't know	4	

**Evaluation of the Personalisation Pathfinder Trial**

ASK IF EVER MET WITH A COACH B1=2-8

**B4** **Approximately, how often did you have an appointment with [IF PLT\_ MARKERNO=7 a work coach][else: the Specialist Health and Disability Coach], either face to face or over the phone?**  
*SINGLE CODE. PROMPT AS NECESSARY*

About once a week	1	
About once every two weeks	2	
About once a month	3	
About once every two months	4	
It varied too much to say	5	
Other (please specify)	6	
Don't know	7	

ASK IF EVER MET WITH A COACH B1=2-8

**B5** **And how long did these appointments usually last for?**  
*WRITE IN IN MINUTES. PROBE FOR AN ESTIMATE IF RESPONDENT IS UNSURE AS APPOINTMENT LENGTH MIGHT HAVE BEEN IRREGULAR. ASK FOR AVERAGE IF RESPONDENT SAYS IT VARIED*

WRITE IN MINUTES		
It varied too much to say	1	
Don't know	2	

**Evaluation of the Personalisation Pathfinder Trial**

ASK IF EVER MET WITH A COACH B1=2-8

**B6 And on a scale of 1 to 5, where 1 is not at all useful and 5 is very useful, how useful did you find the sessions with the [IF PLT\_MARKERNO=7 work coach][else:Specialist Health and Disability Coach]?**

*SINGLE CODE*

1 – Not at all useful	1	
2	2	
3	3	
4	4	
5 – Very Useful	5	
Don't know	6	

ASK ALL UNLESS B1=1

**B7 So that we can better understand the interactions you've had with the Jobcentre, please could you tell me which of the following types of advice and activities you received or undertook at any point between [if A1=2/3 AND LAST\_EXIT\_DT exists on sample [LAST\_EXIT\_DT] if LAST\_EXIT\_DT =blank OR A1=1: now] when you received your personalised support from the [IF PLT\_MARKERNO=7 work coach][else: Specialist Coach]? (INTERVIEWER NOTE: Answer options in B7b below).**

*DS INSTRUCTION: ROTATE CODES 1-15*



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**B7b How helpful were these activities or advice in moving you [IF D1Dum=1,2: into][IF D1Dum=3 back into][IF D1Dum=4: closer towards] work?**

*AFTER READING ITERATION: Would you say it was...*

*READ OUT. CODE ALL THAT APPLY.*

DS INSTRUCTION: DISPLAY FOR ALL CODES SELECTED AT B7 IMMEDIATELY AFTER CORRESPONDING ITERATION OF B7 IS SELECTED YES

	B7	B7b				
	USED	Not at all helpful	Not very helpful	Quite helpful	Very helpful	DO NOT READ OUT DK
Advice or guidance about what sorts of work or training you could do	1	1	2	3	4	5
Training in how to look for work	2	1	2	3	4	5
Help with writing/making changes to a CV	3	1	2	3	4	5
Help with job interview techniques	4	1	2	3	4	5
Help with IT skills	5	1	2	3	4	5
Work experience or a work placement	6	1	2	3	4	5
Advice on money management (including benefits payments or debt)	7	1	2	3	4	5
Advice on how to manage your health condition / disability (both in and out of the work environment)	8	1	2	3	4	5
Training or advice about making general lifestyle changes (e.g. quitting smoking, healthy eating)	9	1	2	3	4	5
Group sessions with your peers	10	1	2	3	4	5
Training or advice on communication skills	11	1	2	3	4	5

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Information about other local support to help your condition or help you into work	12	1	2	3	4	5
Developing an action plan	13	1	2	3	4	5
Support from Community Employment Specialist (PROBE: You may have met with the Community Employment Specialist as part of a job club or group session. This would have taken place outside the Jobcentre).	14	1	2	3	4	5
IF D1=1,2,3,4: In-work support (ADD IF NECESSARY: By this we mean continued support from the Jobcentre such as advice on how to talk to your employer about your condition and possible adjustments that could be made)	15	1	2	3	4	5
Anything else (please specify)	16	1	2	3	4	5
DO NOT READ OUT None of these	17					

ASK IF TAKEN PART IN GROUP SESSIONS (B7=10)

**B8 You mentioned that you have taken part in group sessions with your peers. I'm going to read you a list of statements about these group sessions. For each statement please tell me, on a scale where 1 is strongly disagree and 5 is strongly agree, to what extent do you agree or disagree.**

*READ OUT. SINGLE CODE EACH STATEMENT.*

	Strongly disagree		Strongly agree			DK
_1 IF D1Dum=1,2,4: The group sessions made me feel more confident looking for work.	1	2	3	4	5	6
_4 IF D1Dum=1,2,4: I have developed new skills relevant to job seeking	1	2	3	4	5	6
_5 IF D1Dum=1,2,4: The group sessions helped me find work or a work placement	1	2	3	4	5	6
_6 The group sessions helped me find training opportunities or volunteering opportunities	1	2	3	4	5	6

**Evaluation of the Personalisation Pathfinder Trial**

ASK IF INFORMED ABOUT LOCAL SUPPORT (B7=12)

**B9 You mentioned being informed about other local support to help with your health condition/disability or to help you get into work. Did you receive any of this local support?**

SINGLE CODE.

Yes	1	
No	2	
Don't know	3	

ASK IF INDIVIDUAL DID NOT RECEIVE LOCAL SUPPORT (B9=2)

**B10 Why was that?**

*DO NOT READ OUT. MULTI CODE.*

What I was offered didn't seem appropriate to my needs	1	
It didn't seem important enough	2	
I thought I had to pay for it	3	
It was too difficult for me to get to (i.e. transportation and costs)	4	
There was too long a waiting list for the support offered	5	
I didn't get round to sorting it out	8	
I managed to find employment	9	
Other (please specify)	6	
Don't know	7	

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ASK ALL

**B11 As part of the programme, you may have received support outside of the Jobcentre. This could be support that the Jobcentre pointed you towards, or support that you found some other way. So that we can better understand this support, please can you tell me which of the following types of services and activities you have received or undertaken at any point between [start date] and [if A1=2/3 AND LAST\_EXIT\_DT exists on sample [LAST\_EXIT\_DT] when you received your personalised support [if LAST\_EXIT\_DT =blank or A1=1: now].**

DS INSTRUCTION: ROTATE CODES 1-6.

*READ OUT. CODE ALL THAT APPLY.*

**B11b How useful was this? Would you say it was...**

DS INSTRUCTION: DISPLAY FOR ALL CODES SELECTED AT B11 IMMEDIATELY AFTER CORRESPONDING ITERATION OF B11 IS SELECTED YES

	B11	B11b				
	Used	Not at all useful	Not very useful	Fairly Useful	Very useful	DO NOT READ OUT DK
Mental health services (for example, counselling)	2	1	2	3	4	5
Other specialist services specific to your health condition / disability (e.g. physiotherapy)	1	1	2	3	4	5
Training or courses	3	1	2	3	4	5
Volunteering or work placements	6	1	2	3	4	5
Anything else (please specify)	7	1	2	3	4	5
DO NOT READ OUT Don't know	8	1	2	3	4	5
None of these	9	1	2	3	4	5

ASK IF B11=1-7

**B12 And which of these activities did you undertake as a result of conversations with your [if PLT\_MARKERNO=7 work coach] [else: Specialist Health and Disability Coach]**

DS: DISPLAY ALL CODES CHOSEN IN B11	1	
DO NOT READ OUT Don't know	4	
None of these	5	

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ASK ALL

B13 I'd now like to ask you a few questions about any job searching activity that you may have undertaken while receiving personalised support. Please be assured that anything you tell me will be held in the strictest confidence and will not have any impact on your dealings with the Jobcentre.

ASK IF STARTING NEW WORK OR NOT WORKING (D1DUM=1,2,4)

Between [start date] and [if A1=2/3 AND LAST\_EXIT\_DT exists on sample [LAST\_EXIT\_DT] if LAST\_EXIT\_DT =blank OR A1=1: now] roughly how many....?

	WRITE IN	DK
_1 Job applications did you make	max 10,000	3
_2 Job interviews did you attend	max 1,000	3

IF UNSURE AT B13 PROMPT WITH RANGES

B14 Would you say you [TEXT SUB IF B13\_1=DK: made] [TEXT SUB IF B13\_2=DK: attended]?

0 [TEXT SUB IF B13_1=DK: applications] [TEXT SUB IF B13_2=DK: interviews]	1
1-2 [TEXT SUB IF B13_1=DK: applications] [TEXT SUB IF B13_2=DK: interviews]	2
3-4 [TEXT SUB IF B13_1=DK: applications] [TEXT SUB IF B13_2=DK: interviews]	3
5-9 [TEXT SUB IF B13_1=DK: applications] [TEXT SUB IF B13_2=DK: interviews]	4
10-14 [TEXT SUB IF B13_1=DK: applications] [TEXT SUB IF B13_2=DK: interviews]	5
15-19 [TEXT SUB IF B13_1=DK: applications] [TEXT SUB IF B13_2=DK: interviews]	8
20-29 [TEXT SUB IF B13_1=DK: applications] [TEXT SUB IF B13_2=DK: interviews]	9
20-29 [TEXT SUB IF B13_1=DK: applications] [TEXT SUB IF B13_2=DK: interviews]	10
30-39 [TEXT SUB IF B13_1=DK: applications] [TEXT SUB IF B13_2=DK: interviews]	11
40-49 [TEXT SUB IF B13_1=DK: applications] [TEXT SUB IF B13_2=DK: interviews]	12
50-99 [TEXT SUB IF B13_1=DK: applications] [TEXT SUB IF B13_2=DK: interviews]	13

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<b>100-199</b> [TEXT SUB IF B13_1=DK: <b>applications</b> ] [TEXT SUB IF B13_2=DK: <b>interviews</b> ]	14
<b>200+</b> [TEXT SUB IF B13_1=DK: <b>applications</b> ] [TEXT SUB IF B13_2=DK: <b>interviews</b> ]	15
Don't Know	6
Refused	7

ASK IF B13\_1>0 OR B13\_2>0 OR B14\_1=2-9 OR B14\_2=2-9}

**B15 And were any of these applications or interviews a result of discussions with the [IF PLT\_MARKERNO=7 work coach][else: Specialist Health and Disability Coach/Work Coach]?**

Yes	1	
No	2	
Don't know	3	

**B16 REMOVE**

**B17 REMOVE**

ASK ALL

**B18 Is there any other type of support to help you move closer to work that you wish you had received but didn't?**

*WRITE IN. PROBE IF NECESSARY: ANYTHING ELSE WHICH WOULD HAVE BEEN USEFUL?*

WRITE IN		
No	2	
Don't know	1	

## C Overall views of the Personalisation Pathfinder

PROCESS NOTES: The purpose of this section is to understand the individual’s overall experience of the personalisation pathfinder programme and what impact it has had on their motivation to find work.

ASK ALL

**In this next section I would like to understand a bit more about your overall experience of the Personalisation Pathfinder. For this section I would like you to consider the programme and the support you received as a whole.**

**C1 I’m going to read you a list of statements about the personalised support you received through the Pathfinder programme. On a scale where 1 is strongly disagree and 5 is strongly agree, for each statement please tell me to what extent you agree or disagree.**

*READ OUT. SINGLE CODE EACH STATEMENT.*

	Strongly disagree	Disagree somewhat	Neither agree nor disagree	Agree somewhat	Strongly agree	DK
_1 The support I received was tailored to my needs.	1	2	3	4	5	6
_3 The Specialist Health and Disability Coach was understanding of my needs.	1	2	3	4	5	6
_4 IF D1Dum=1,2,4: I feel/felt more confident disclosing my health condition when applying for jobs	1	2	3	4	5	6
_5 IF D1Dum=1,2,4: I feel/felt more confident attending job interviews	1	2	3	4	5	6
_6 IF D1Dum=1,2,4: I am better at identifying job vacancies that are suitable for me	1	2	3	4	5	6

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<u>7</u> IF D1Dum=1,2,4: I feel better equipped to write applications and CVs	1	2	3	4	5	6
<u>2</u> IF D1Dum=1,2,4: The programme has helped me move [IF D1Dum=1,2: into][IF D1Dum=4: closer towards employment].	1	2	3	4	5	6

ASK IF SUPPORT DID NOT HELP, C1\_2=1 OR 2

C2 **Why did it not help you move** [IF D1Dum=1,2: into][IF D1Dum=4: **towards**]  
**work?**

*MULTICODE. PROMPT AS NECESSARY*

I needed medical help they could not give me	1	
The timing of the support was wrong	2	
[IF PLT_MARKERNO=7 <b>Work coach</b> ][else: Specialist Health and Disability Coach] did not understand my needs	3	
[IF PLT_MARKERNO=7 <b>Work coach</b> ][else: Specialist Health and Disability Coach] did not have the right skills or experience	4	
The support I received focused too much on my health condition/disability and not enough on finding work	5	
The support I received focused too much on finding work and not enough on my health condition/disability	6	
Other (please specify)	7	
Don't know	8	



**Evaluation of the Personalisation Pathfinder Trial**

ASK ALL

**C3 To what extent do you think your involvement in the Pathfinder and the personalised support you have received has had any impact on your:**

*READ OUT. MULTICODE.*

*DS: ROTATE CODES*

	Improved a lot	Improved a little	No change	Not applicable	DO NOT READ OUT: DK
_2 Communication skills	1	2	3	4	6
_5 Ability to travel independently	1	2	3	4	6
_6 Understanding of what is needed to find and retain work	1	2	3	4	6

ASK IF STARTING NEW WORK OR NOT WORKING (D1DUM=1,2,4)

**C4 To what extent, if any, would you say your confidence to find work has increased or decreased from when you began receiving personalised support and [if A1=2/3 AND LAST\_EXIT\_DT exists on sample leaving the programme] [if LAST\_EXIT\_DT date=blank OR A1=1 now]?**

*SINGLE CODE*

Increased a lot	1	
Increased a little	2	
No effect on confidence	3	
Decreased a little	4	
Decreased a lot	5	
Don't know	6	

**Evaluation of the Personalisation Pathfinder Trial**

ASK IF STARTING NEW WORK OR NOT WORKING (D1DUM=1,2,4)

**C5 And a similar question about motivation, to what extent, if any, would you say your motivation to find work has increased or decreased from when you began receiving personalised support and [if LAST\_EXIT\_DT exists on sample leaving the programme] [if A1=2/3 AND LAST\_EXIT\_DT=blank OR A1=1: now]?**

*SINGLE CODE.*

Increased a lot	1	
Increased a little	2	
No effect on motivation	3	
Decreased a little	4	
Decreased a lot	5	
Don't know	6	

ASK IF INCREASE IN MOTIVATION C5=1,2

**C6 Why do you think your motivation to find work has increased?**

*MULTICODE. PROMPT AS NECESSARY*

My health has improved	1	
I am better equipped to manage my health condition	2	
My overall confidence has improved	3	
I have gained new work related skills	4	
Support and encouragement from my [if PLT_MARKERNO=7 work coach] [else: Specialist Health and Disability Coach] has helped	5	
My job seeking and interviewing skills have improved	6	
I didn't want to keep going to the Jobcentre	7	
I didn't want to still be on benefits	8	
Other (please specify)	9	
DO NOT READ OUT Don't know	10	

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ASK IF NO INCREASE IN MOTIVATION, C5=3,4,5

**C7 Why do you think that is?**

*MULTICODE. PROMPT AS NECESSARY*

I didn't want to do the activities that were suggested for me	1	
I don't want to work	2	
My health condition has deteriorated	3	
I am not better off financially	4	
Other (please specify)	5	
Don't know	6	

**E Confidence about returning to work**

PROCESS NOTES: This section aims to explore the individual's feelings about work, what barriers they feel they face and what further support they feel they need.

ASK ALL UNLESS CURRENTLY IN WORK OR DUE TO START WORK D1=1,2,3,4,9

**E1 I would now like to ask you a few questions about how you feel about returning to work. Which of these statements best describe how you currently feel about returning to work?**

*READ OUT. SINGLE CODE.*

My health condition/disability rules out work as an option	1	
On some days I could consider a return to work	2	
I could return to work now if the right job was available	3	

ASK ALL UNLESS CURRENTLY IN WORK OR DUE TO START WORK D1=1,2,3,4,9

**E2 To what extent would you like to return to work in the future?**

*READ OUT. SINGLE CODE.*

To a great extent	1	
To some extent	2	
A little	3	
Not at all	4	
Don't know / prefer not to say	5	

Evaluation of the Personalisation Pathfinder Trial

ASK ALL UNLESS E2=4

**E3 At what stage in the future, if ever, do you think you will be able to work?  
Would you say...**

*READ OUT. SINGLE CODE.*

Within the next six months	1	
Within the next year	2	
Within the next two years	3	
Later than 2 years	4	
Never	5	
Don't know / prefer not to say	6	

ASK ALL UNLESS CURRENTLY IN WORK OR DUE TO START WORK D1=1,2,3,4,9

**E4 On a scale of 1 to 5 where 1 is strongly disagree and 5 is strongly agree, to what extent do you agree or disagree with the following statements about your health condition / disability and finding work?**

*READ OUT. SINGLE CODE EACH STATEMENT.*

	Strongly disagree                      Strongly agree					DO NOT READ OUT DK
<b>_1 I am worried people won't employ me because of my health condition / disability</b>	1	2	3	4	5	6
<b>_2 I know of many jobs that I could do with my health condition / disability</b>	1	2	3	4	5	6
<b>_3 I am worried that working could make my health condition worse</b>	1	2	3	4	5	6
<b>_4 The idea of working makes me feel anxious</b>	1	2	3	4	5	6
<b>_5 I think employers could accommodate my health needs</b>	1	2	3	4	5	6
<b>_6 I need better social care support, such as assistance at home, to enable me to work</b>	1	2	3	4	5	6

**Evaluation of the Personalisation Pathfinder Trial**

ASK ALL UNLESS CURRENTLY IN WORK OR DUE TO START WORK D1=1,2,3,4,9

**E5 Which of the following would you say are preventing you from working?**

*READ OUT. CODE ALL THAT APPLY.*

There are not many suitable jobs in my local area	1	
I don't have the right qualifications, skills or experience	2	
I don't know what suitable jobs are available	3	
I don't feel confident about applying for jobs	4	
I am worried people won't employ me because of my age	5	
I may find it difficult to travel to work	6	
I have family or caring responsibilities	7	
I am not sure I would be financially better off in work	8	
Other (specify)	9	
None of these	10	

## F General Wellbeing

PROCESS NOTES: The purpose of this section is to measure the individual's overall wellbeing.

READ OUT FOR ALL.

I would now like to ask you a few questions about how you are feeling more generally **about your life. Please be assured that everything you tell me will be kept in the strictest confidence and to re-iterate, none of your answers will ever be attributed to you as an individual.** [IF CARER OR ADVOCATE (S2A=1): **For the next set of questions it is important that the answer comes from the perspective of [NAME]. Please can you refer the question to them to obtain an answer, or let us know if you are not able to do so.**]

F1 I'm now going to read you a series of statements. For each, can you please tell me whether over the last 2 weeks you have experienced these all of the time, most of the time, more than half of the time, less than half of the time, some of the time, or at no time?

*READ OUT AND SINGLE CODE EACH STATEMENT.*

	All of the time	Most of the time	More than half of the time	Less than half of the time	Some of the time	At no time	Refusal	Carer unable to answer
_1 I have felt cheerful and in good spirits	5	4	3	2	1	0	6	7
_2 I have felt calm and relaxed	5	4	3	2	1	0	6	7
_3 I have felt active and vigorous	5	4	3	2	1	0	6	7
_4 I woke up feeling fresh and rested	5	4	3	2	1	0	6	7
_5 My daily life has been filled with things that interest me	5	4	3	2	1	0	6	7

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ASK ALL.

**F2 And how often do you do each of these things? Would you say you...?**

*READ OUT. SINGLE CODE EACH STATEMENT.*

	None of the time	Rarely	Some of the time	Often	All of the time	Refusal	Carer unable to answer
<b>_1 Leave the house</b>	1	2	3	4	5	6	7
<b>_2 Meet up with friends and / or family</b>	1	2	3	4	5	6	7
<b>_3 Go out to meet new people</b>	1	2	3	4	5	6	7

ASK ALL

**F3 I'd like to ask you a couple questions about your health condition or disability. [IF CARER OR ADVOCATE (S2A=1): For the next two of questions it is important that the answer comes from the perspective of [NAME]. As before, please can you refer the question to them to obtain an answer, or let us know if you are not able to do so.]**

**How often does your health limit the amount or kind of activities that you can do?**

*READ OUT. SINGLE CODE.*

Always	1	
Often	2	
Sometimes	3	
Rarely	4	
Never	5	
DO NOT READ OUT Carer unable to answer	6	

**Evaluation of the Personalisation Pathfinder Trial**

ASK ALL

**F4 Overall, how well would you say you are able to manage your health condition or disability on a day to day basis?**

*READ OUT. SINGLE CODE.*

Very well	1	
Quite well	2	
Not very well	3	
Not at all well	4	
DO NOT READ OUT: It varies too much to say	5	
DO NOT READ OUT Carer unable to answer	7	
Refused	6	



## G Contact with the health sector

*PROCESS NOTE: The purpose of this section is to understand an individual's current level of interaction and dependency on the health system and what the wider impact of the pathfinders programme might be on public health services.*

ASK ALL

**Thank you. I'd now like to understand a bit more about how often you require treatment, or assistance, for your health.**

ASK ALL

**G1 Has your health required you to attend any of the following types of appointment in the past 12 months?**

*DEFINITIONS IF NECESSARY:*

**An outpatient appointment is when a patient is hospitalised for less than 24 hours. They do not necessarily need to stay overnight. This includes consultations, tests and scans, for example.**

**A day patient could use a wide range of services from a hospital or clinic, and tends to undergo a more involved procedure than an outpatient, for example minor surgery. They may need some recovery time but they are expected to go home on the same day.**

*READ OUT. MULTI-CODE*

In patient visits (overnight or longer)	1	
Casualty / Accident and Emergency visits	6	
Appointments with your family doctor or your GP	2	
Outpatient appointments	7	
Day patient appointments	8	
Appointments with other healthcare professionals	3	
DO NOT READ OUT None of the above	4	
DO NOT READ OUT Refused	5	

**Evaluation of the Personalisation Pathfinder Trial**

ASK FOR EACH TYPE OF APPOINTMENT AT G1

**G2 In the last 12 months, approximately how many times did you attend [INSERT CODE FROM G1]?**

WRITE IN		
Refused	1	

ASK ALL

**G3 Would you like to make any other comments about the personalised support you've been receiving that we haven't covered today?**

WRITE IN		
No	1	

## H Permission to re-contact and thank you

**H1 Thank you very much for taking the time to speak to us today. The information we have collected from you is really important in helping the Department for Work and Pensions to understand how well help and support for ESA/JSA claimants is working.**

**Occasionally, it is necessary to call people back to clarify information; may we please call you back if required?**

**REASSURE IF NECESSARY: Your details will only be used by IFF Research to call you back regarding this particular study.**

Yes	1	
No	2	

IF CONSENT TO RECONTACT

**H2 And could I just check, what is the best number to call you on?**

WRITE IN NUMBER 1:
WRITE IN NUMBER 2:

ASK ALL

**H3 To help with analysis for this research, the DWP would like to add information held on your benefits, employment and tax records to your answers to this interview. This will give them a better picture of the circumstances of people participating in the Personalisation Pathfinder Programme.**

**If you agree, we will pass DWP a code that links your answers to this interview to your government records. All information will be used for research and statistical purposes only. Your responses would only be seen by a small number of specialist analysts within DWP, and no-one else. Your personal details will, of course, be kept completely confidential and your dealings with DWP, Jobcentre Plus, or any other government agencies will not be affected in any way.**

**Would it be ok for us to let DWP match your answers to your records?**

Yes	1	
No	2	

## Evaluation of the Personalisation Pathfinder Trial

### ASK ALL

READ OUT FOR ALL: Finally I would just like to confirm that this survey has been carried out under IFF instructions and within the rules of the MRS Code of Conduct. Thank you very much for your help today.

USE IF NECESSARY: If you have any concerns or questions about your existing ESA/ JSA claim you can contact Jobcentre Plus on 0345 608 8545. There is also information on

ESA at <https://www.gov.uk/employment-support-allowance>

JSA at <https://www.gov.uk/jobseekers-allowance/overview>

USE IF NECESSARY: If you would like to speak to anyone about the issues we have covered today, you can contact the Samaritans through one of the following ways:

Call *free* helpline number :116 123 (UK)

Email: [jo@samaritans.org](mailto:jo@samaritans.org)

Post: Freepost RSRB-KKBY-CYJK, PO Box 9090, STIRLING, FK8 2SA

You can also find their local branch by going to <http://www.samaritans.org/>

Finally I would just like to confirm that this survey has been carried out under IFF instructions and within the rules of the MRS Code of Conduct. Thank you very much for your help today.

# Appendix 5: Topic guide for qualitative depth interviews with claimants

## Background for interviewer

Overall, the project aims to evaluate the success of the Personalisation Pathfinder both at an overall level and of its component parts. It will establish whether the Pathfinder works in moving individuals with disabilities and/or health conditions closer to employment and – if it does – how/why it achieves this.

As part of the qualitative aspect of this project we are looking to interview up to 30 claimants who have taken part in the Personalisation Pathfinder trial in each of the three districts involved; South West Wales, Greater Wessex and Surrey and Sussex. Note that some respondents have already taken part in a quantitative telephone interview and may also have agreed to take part in a follow up telephone interview (to be completed Summer/Autumn 2016).

We have previously interviewed a range of staff involved in delivering the programme. For more information about the project please see the separate briefing document.

Interviews will cover the nature of Personalisation Pathfinder delivery, quality of the experience for participants, impact on claimant attitudes, confidence, motivation, wellbeing and employability outcomes. Please note that the participant may not know the pilot by the name Personalisation Pathfinder and it may be necessary to explain what you are referring to when using this name. Furthermore, respondents may not know they are participating in a trial or pilot. The pilot will have been presented to them as an opportunity to receive additional support.

This document is a guide to the principal themes and issues to be covered. Questions can be modified and followed up in more detail where necessary.

# A Background

**Interviewer and IFF introduction** – thank you for agreeing to take part.

**Background to the research:** Series of face to face interviews conducted with customers of the Personalisation Pathfinder programme to understand the type of support that is being delivered through the programme, how this is being delivered and how well it is helping participants move closer to / into work. The Personalisation Pathfinder is a pilot programme which was introduced in April 2015. As part of this pilot you may have met with a Specialist Health and Disability Coach or with a Work Coach. You may also have been referred to a peer support job club delivered by an independent organisation (you may know this as Journey 2 Employment).

**MRS Code of Conduct and Confidentiality:** IFF Research is an independent market research company, operating under the strict guidelines of the Market Research Society’s Code of Conduct. This means that anything you tell us will be treated in the strictest confidence, and none of your answers will be attributed to you unless you give explicit permission for us to do so.

**Participation is voluntary** – there are no right or wrong answers, you can choose to not discuss any issue or to end the interview at any time should you wish. Should you wish you can also request that information you have shared is taken out of consideration at any time, including once the interview has been completed. As a thank you for taking part you will receive £30 either by cheque or via PayPal.

**Data use:** The answers you provide will be analysed by the IFF research team and used to evaluate the Personalisation Pathfinder programme. We are due to deliver a report on initial findings from the trial in autumn 2016. These findings will be published but individuals’ names or any other identifiable information will not be included in the report. The answers you give me today will not in any way affect your dealings with the Jobcentre now or in the future.

**Permission to record and client presence:** We like to audio record all interviews of this nature so we don’t have to take a lot of notes and also to accurately capture our discussion – the recording will only be used for analysis purposes. The recorder is encrypted and the recordings will be securely stored in folders that only the IFF research team will have access to. All recordings will be deleted at the end of the research. Ask whether participant is happy to take part and for permission to start recording.

**PROCESS NOTES:**

*The purpose of this section is to explain what will be covered during the face to face discussion, explain how their answers will be used, provide assurances around anonymity and request permission to record*

<p><i>Interviewer to read out consent statement above to gain verbal consent. Switch digital recorder on if participant agrees to be recorded and confirm verbal consent.</i></p> <p><b>The interview will last around 60-70 minutes.</b></p>	
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## B Personal circumstances and entry into the Pathfinder (15 min)

<p><b>B1 Firstly, can you tell me a little bit about yourself?</b></p> <p>PROBE: age, who do you live with, where do you live (owned or rented accommodation), educational background, claim history (what benefits and why), whether previously in employment and if so role and sector, when did they stop working, their disability /health condition.</p> <p><b>B2 I'd now like to ask you a few questions about how you came to take part in the Personalisation Pathfinder. By that I mean the personalised support you received, beginning around summer 2015. As part of the Pathfinder you will have been working with a Specialist Coach/Work Coach to identify the best way to help you move into employment. The support received through this programme is personalised, entirely voluntary, tailored to focus on you and your specific needs and is expected to last for up to 12 months.</b></p> <p><b>From my records I can see that you joined the Pathfinder in [month]. Is that right?</b></p> <p><b>How did you first hear about this support?</b></p> <p>PROBE: spoke to someone from the Jobcentre on the phone, received a letter, spoke to someone while attending an appointment at the Jobcentre.</p> <p>Can you remember what information you were given about the programme?</p> <p>What did you think of it?</p> <p>PROBE: Awareness of the programme being voluntary and whether this was important to take part.</p> <p>Why did you decide to sign up?</p> <p><b>B3 What were your expectations of the programme?</b></p> <p>What did you think it would involve?</p> <p>And what were you hoping to get out of it?</p>	<p><b>PROCESS NOTES:</b></p> <p><i>The purpose of this section is to understand the individual's employment situation at the time of joining the Pathfinder. It also explores how the customer first came to hear about the pilot and their first impressions.</i></p> <p><i>B2: Customers may not know the term Personalisation Pathfinder. Provide more information to the respondent if needed.</i></p> <p><i>The programme may have been presented to customers as additional help and support from the Jobcentre and as a voluntary programme. The pilot focused on providing tailored support for those with a disability or health condition to help people back into work. This involves a series of sessions with a</i></p>
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<p>What were you looking forward to?          Anything you weren't looking forward to?          And was there anything you weren't sure about or would have liked more information about?</p> <p><b>B4 Did you take part in a group meeting where you received information about the programme before joining?</b>          IF YES: What was your experience of taking part in this?          IF NO: Did you have an initial meeting with a Specialist Coach/Work Coach to discuss what taking part in this programme would involve?          What was your experience of this?          What was your first experience of the Specialist Coach/Work Coach you met with?</p> <p><b>B5 I'd like you to think about where you were before you started to receive personalised support. Can you remember how you felt about work? PROBE: Did you want to return to work and did you feel able to do so?</b>          What do you think were the barriers preventing you from entering employment when you first began receiving more personalised support?          PROBE: Physical and/or mental health condition, employment history, financial situation, housing, transportation, confidence, any other barriers, employers, lack of jobs in the locality.</p> <p><b>B6 Are you still receiving support through the Pathfinder?</b></p> <p><b>B7 IF NO: When did you stop receiving personalised support through the Pathfinder?</b>          Were you due to finish the programme at this point or did you leave the programme early?          IF LEFT EARLY: Why did you decide to leave the programme early? PROBE: Jobcentre said you could not stay on the programme any longer, found work, programme wasn't relevant to your needs, signed off JSA/ESA, started the Work Programme, had a Work Capability Assessment and put into a support group/found unfit for work, health condition deteriorated, moved away, any other reason.</p>	<p><i>Specialist Coach at the Jobcentre and can involve accessing courses particularly aimed at individuals with disabilities or health conditions.</i></p> <p><i>Customers were first informed about the pilot either by letter, by a phone call from the Jobcentre or as part of a mandatory appointment with the Jobcentre.</i></p> <p><i>B4: Customers were invited either to a group information session or a one-to-one session with a Specialist Coach to learn more about the programme.</i></p> <p><i>B7: Some customers may have left the Pathfinder earlier than expected. Probe reasons for leaving the programme early. The Pathfinder is expected to last up to 12 months.</i></p>
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## C Claimant experience (15-20 min)

**I would now like to ask you a few questions about your overall experience of the Pathfinder programme.**

**C1 As part of the Personalisation Pathfinder you will have met with a coach which might have been your usual Work Coach or a new Specialist Health and Disability Coach. When did you first meet with the coach?**

How often would you typically meet?

And did this feel appropriate or would you have preferred meeting more or less often?

Did you meet with the same Specialist Coach/Work Coach every time?

How long would you typically meet for?

Did this feel appropriate or would you have preferred meeting for longer?

Did you communicate with the Specialist Coach/Work Coach outside the coaching sessions? PROBE: telephone conversations, text, emails etc. and examples of how each medium was used.

IF YES: How useful was this?

How easy was it for you to communicate with the Specialist Coach/Work Coach outside the meetings?

And when did you stop seeing the Specialist Coach/Work Coach?

To what extent did you feel the meeting arrangements and duration of the meetings were suitable to your needs?

Any ways this could be improved?

Was there anything that made it difficult for you to attend the meetings with the Specialist Coach/Work Coach or any of the forms of support you were offered? PROBE: difficult to get to, either due to transportation issues or health condition.

**C2 What sorts of things did you talk about with the Specialist Coach/Work Coach?**

PROBE: barriers to work, health condition, previous work experience, interest and hobbies, relevant support, job searching etc.

Did you talk about a personal action plan with the Specialist Coach/Work Coach?

IF YES: Can you tell me more about the personal action plan? How was it put together? How was it used?

**PROCESS NOTES:**

*The purpose of this section is to understand the customer's overall experience of being on the Pathfinder.*

*C1: As part of the Pathfinder Specialist Health and Disability Coaches and Work Coaches have more time to spend with each claimant and more flexibility in how they spend their time. This means that while some customers might have met with the coach every fortnight others might have met less frequently. ESA-pre WCA claimants not participating in the trial do not have any interaction with Work Coaches until their WCA. Some customers may also have had frequent communication with their coach outside their meetings, for example via email or telephone.*

*Note that it is possible the respondent has not met with a Specialist Coach but instead continued to meet with their usual Work Coach. Please ask these respondents the*

<p>How useful was it having a personal action plan? PROBE: helped you understand your capabilities, increased your motivation etc.?</p> <p>And was the action plan something you were in charge of yourself or did the Specialist Coach/Work Coach lead on this? PROBE: degree of ownership of the action plan and/or job searching and work related activities.</p> <p>IF NO: As part of your conversations with the Specialist Coach/Work Coach, did you discuss next steps and what you would need to do to reach these?</p> <p>IF NO: Would you have liked to have a personal action plan? Why/why not?</p> <p><b>C3 Did you discuss different types of support that might be relevant to you with the Specialist Coach/ Work Coach and how you could access these?</b></p> <p>PROBE: This could be things like training courses, counselling, help with your health condition, confidence building workshops, IT training, delivered by Jobcentre or external organisations etc.</p> <p>IF YES: Did you make use of any of this?</p> <p>IF YES: What was this? How useful was this? Why did you choose to take part in this?</p> <p>IF NO: Why not?</p> <p>Are there any forms of support you weren't offered as part of your meetings with the Specialist Coach/Work Coach that you wish you were offered?</p> <p><b>C4 Did the Specialist Coach/Work Coach tell you about any other local organisations that could support you? IF NECESSARY: This could include local charities or support groups, health organisations, training providers etc.</b></p> <p>What types of support did you discuss with the Specialist Coach/Work Coach?</p> <p>And did you make use of any of this local support?</p> <p>IF YES: For each one ask:</p> <p>How useful was this?</p> <p>How relevant to your needs did it feel?</p> <p>Were you aware of this organisation/offer before the Specialist Coach/Work Coach mentioned it to you?</p>	<p><i>same questions but exclude reference to a Specialist Health and Disability Coach. For information about whether or not respondent met with a Specialist Coach please refer to briefing materials.</i></p> <p><i>C3: The Pathfinder aimed to be more personalised and tailored to each customer's needs. Customers were offered (but not pressured into) provision which was seen to be relevant to their needs.</i></p> <p><i>C4: The Pathfinder aimed to improve integration between the Jobcentre and other local organisations. A Specialist Health and Disability Partnership Manager worked to identify and source specialist provision from local organisations. This provision was communicated to the Specialist Health and Disability Coaches so they could offer it to their customers.</i></p>
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How easy was it to access this support? PROBE: location and transportation, how soon after being informed of the support did they access it, any other issues related to access.

IF NO: Why not?

Was there any additional support you would have liked but that wasn't available?

What was this? And why do you think it wasn't available?

**C5 I'm interested to know whether you felt that the support you received through the meetings with the Specialist Coach/Work Coach was suitable to your needs and specific enough to address your barriers to employment?**

In what ways was it suitable to your needs? Can you give me any examples? PROBE: Personalised, flexible, more time with the the Specialist Coach/Work Coach, less structured, less pressured than other forms of support received previously etc.

Any ways in which the support felt less relevant to you?

As part of the personalised support, did the Specialist Coach/Work Coach ever suggest things the Jobcentre could pay for? This could be things like clothes for interviews, training courses or equipment that you might need for a job or anything else.

IF YES: What was this? How useful was this?

Did you feel you had choice over the support received? Why is that?

**C6 What was your overall experience of meeting with the Specialist Coach/Work Coach?**

These are some things other people have said about the Specialist Coach/Work Coach they met with. For each one, how much do you agree?

PROBE: Understanding of your personal circumstances, understanding of your needs, supportive, encouraging, did not pressure you.

How useful did you think these meetings were? Why is that?

Any aspects which were more useful?

Or less useful?

<p><b>C7 Did you meet with a Community Employment Specialist? You may have met with a Community Employment Specialist at the Jobcentre or somewhere else.</b></p> <p>Can you tell me a bit about the Community Employment Specialist?</p> <p>Where did you meet with the Community Employment Specialist? And for how long did you typically meet?</p> <p>These are some things other people have said about the Community Employment Specialist they met with. For each one, how much do you agree?</p> <p>PROBE: Understanding of your personal circumstances, understanding of your needs, someone you could relate to, supportive, encouraging, did not pressure you.</p> <p>How useful did you think these meetings were? Why is that?</p>	<p><i>C7: The Community Employment Specialist met with customers in the Jobcentre and through the J2E job clubs, which were hosted outside the Jobcentre. If the respondent is a J2E participant please ask this question as part of section D (Journey 2 Employment).</i></p> <p><i>The Community Employment Specialist was often someone with lived experience of disability. Please probe whether this was the case and how important this was felt to be.</i></p>
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## D Claimant Experience: Journey 2 Employment (15min)

<p><b>Note that this section is only relevant for customers who took part in job clubs (see process notes).</b></p> <p><b>D1 Did you take part in group sessions with other people who had long-term health conditions and who were looking for work (this might have been called a job club or Journey 2 Employment)?</b></p> <p><b>D2 How did you first hear about the group sessions or job club?</b></p> <p>Can you remember what you were told about it?</p> <p>Did you receive enough information about what the job club would involve?</p> <p>Why did you decided to sign up? PROBE: whether or not customers understood participation was voluntary and how important this was for them to want to sign up.</p> <p>Can you remember how long it took from when you first heard about it and when you began attending the job club?</p>	<p><b>PROCESS NOTES:</b></p> <p><i>The purpose of this section is to understand the customer's experience of taking part in Journey 2 Employment. If the individual did not take part in Journey 2 Employment please ask D1 and if no skip to the following section. Please note that respondents might not know the job club as Journey 2 Employment.</i></p>
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<p><b>D3 How often would you attend the job club?</b>          Do you still attend the job club?          IF YES: Have you completed the J2E course?          IF YES: Why do you still want to attend J2E?          IF NO: When did you stop going to the job club?          And why did you stop going to the job club?</p> <p><b>D4 I'd like to understand a bit more about what you thought of the people running the job club. How would you describe the people who ran the job club?</b>          PROBE:          Understanding of your needs          Supportive          Encouraging          Good at facilitating a group          Knowledgeable of disability employment and the health and disability benefit system          Did you/do you ever communicate with the person running the club other than the times when you met, e.g. over the phone, emails, texting etc.?          IF YES: How useful was this?</p> <p><b>D5 How many other people usually came to the job club?</b>          And did other people in the job club face similar types of barriers to finding work as you?          Did you/do you ever meet with any other participants outside of the job club?          And did you/do you ever communicate with others in the club other than the times when you meet, e.g. over the phone, emails, texting etc?          How important was the group element of the job club to you?          Do you think you learned anything from others in the job club?          IF YES: What have you learned?</p>	<p><i>Refer to respondent details to confirm whether they are J2E sample.</i></p> <p><i>If respondent is not J2E sample please still ask D1 as some areas that did not have J2E provision set up their own job clubs. Ask subsequent questions if respondent has attended other group sessions/job club.</i></p> <p><i>D3: From previous interviews we know some participants continued coming to job club even after their 12 week course ended.</i></p> <p><i>D4: From previous interviews we know the people running job clubs (known as CES) often kept in touch with participants over the phone, text or email in between job club meetings.</i></p>
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**D6 What sort of activities did the job club usually include? Can you give any examples?**

PROBE: IT training, CV and applications, job searching, interview training, confidence building, team building, health management.

For each one ask:

How useful was this?

How was this delivered?

What did you think of the way it was delivered?

Were any activities better than others? Why is that?

And did you feel that the sorts of activities or conversations you took part in during the job club were relevant to your needs? Why is that?

Were some more/less relevant? Why is that?

**D7 Did the person running the job club ever suggest jobs that you might apply to?**

IF YES: In your opinion, how relevant were these vacancies?

Did you apply for any of these vacancies?

IF NO: Why is that?

Did he/she ever suggest a work trial/taster that you might apply to?

IF YES: In your opinion, how relevant were these?

Did you apply for any of these?

IF NO: Why is that?

And did the person running the job club ever suggest volunteering opportunities that you might apply to?

IF YES: In your opinion, how relevant were these opportunities?

Did you apply for any?

IF NO: Why is that?

**D8 What was your overall experience of taking part in the job club?**

Do you think you've learned anything from taking part in the job club?

IF YES: What was this?

Do you think taking part in the job club has helped you to move into / closer to employment?

IF YES: In what way?

## E Impact: Claimant Outcomes (15min)

The next questions are about any job searching that you may have done while you were taking part in the Pathfinder. Please note that the answers you give are completely confidential and will not affect your dealings with the Jobcentre in any way.

### **E1 Are you in employment at the moment?**

IF YES: When did you move into employment?

IF YES: What type of employment are you in?

IF YES: To what extent do you think the support you received from the Jobcentre as part of the Pathfinder helped you find employment?

Why is that? Which types of support received from the Pathfinder were more effective in helping you to move into work? (PROBE: support from Specialist Coach/Work Coach, job clubs etc.)?

IF NOT IN EMPLOYMENT: What support do you need to move into work?

### **E2 IF IN EMPLOYMENT: Do you receive any in-work support from the Pathfinder programme? PROBE: any support from the Pathfinder programme that helps you stay in employment.**

What type of support are you receiving?

IF NOT RECEIVING IN WORK SUPPORT FROM THE PATHFINDER: Have you spoken to anyone from the Pathfinder programme since entering employment? What did you talk about?

IF NOT RECEIVING IN WORK SUPPORT FROM THE PATHFINDER: Do you feel you require any support to stay in employment?

### **E3 IF NOT IN EMPLOYMENT: To what extent do you think the support you received has made you more able or ready to find work?**

In what ways? PROBE IF NECESSARY: job applications more targeted, increased confidence for job interviews, overall confidence has improved)

IF NOT: Why do you say that?

To what extent do you think the activities suggested to you by your Specialist Coach/Work Coach addressed your needs?

And to what extent do you feel you were able to determine what activities or forms of support would help you the most?

### **PROCESS NOTES:**

*The purpose of this section is to understand what impact the Pathfinder has had on customer's employability, confidence, motivation and general wellbeing.*

*E2: Participants who moved into employment were offered in-work support. For some this may merely be follow ups from their Specialist Coach/Work Coach, which respondents may not recognise as support. If respondent says they did not receive support please ask whether they have been in communication with the Specialist Coach/Work Coach since entering employment.*

**E4 Have you taken part in any volunteering activities since you started receiving personalised support?**

IF NO: Why is that?

IF YES: What sort of volunteering have you taken part in?

What made you want to do this?

And what has been your experience of volunteering?

To what extent, if any, do you think taking part in volunteering has helped you move closer to work? Why is that?

Are you currently volunteering?

IF NO: Why did you stop volunteering?

**E5 Have you taken part in any work placements, work tasters or trials?**

IF YES: Where was this?

How did you secure this placement or trial?

And what was your experience of this placement or trial?

Why is that?

To what extent, if any, do you think taking part in a work placement/taster/trial has helped you move closer to work? Why is that?

**E6 And have you taken part in any training or achieved any qualifications?**

IF YES: What was this?

How useful was this?

To what extent, if any, do you think taking part in training has helped you move closer to work? Why is that?

IF NO: Would you have like to have taking part in any forms of training that might give you a qualification?

Why is that?

**E7 I would like you to think back to before you started to receive personalised support through the Pathfinder pilot and reflect on any changes that might have occurred since then. These are some things that other people have told us may have changed as part of receiving personalised support, to what extent do you think this has been the case for you? PROBE: Whether there has been an increase / decrease in any of the below:**

Confidence and self esteem

*E4/E5: Please skip these questions if work trials/tasters and volunteering has been covered in section D.*



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<p>Understanding of what is needed to find and retain work Communication skills Ability to work with others, collaborate Ability to travel independently Overall health and wellbeing Feelings about work The extent to which you feel you will be able to return to work in the near future</p> <p>For each one: Why do you say that?</p> <p><b>E8 Can you think of any other changes that might have happened since you started receiving more personalised support?</b></p> <p><b>E9 IF NOT IN WORK: How do you feel about your prospects for finding paid work now?</b></p> <p>To what extent do you want to return to work? PROBE: more or less than before the trial</p> <p>And to what extent do you feel able to return to work? PROBE: more or less than before the trial</p> <p>To what extent, if any, has the personalised support you received contributed to this change? Why is that?</p> <p>What other support would you have liked to receive?</p>	
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## F Summary and Wrap Up (10 min)

<p><b>For the final few questions I would like to ask you to summarise your experience of taking part in this pilot.</b></p> <p><b>F1 Overall, how would you describe the support you received to someone who knew nothing about the programme and what it was about?</b></p> <p>What has been the best part of the support you received?</p> <p>And if you could make any changes to the support you received, what would they be? Why is that?</p> <p><b>F2 Can you sum up your experience of the Pathfinder?</b></p> <p>Was the support personalised / tailored to your needs? Did you have choice on support received and timing?</p> <p>How satisfied are you with the support received from the Pathfinder?</p> <p>What support, if any, will you no longer receive now you have finished / when you finish the Pathfinder that you would like to continue to receive?</p> <p>What aspects on the programme, if any, will you be pleased to leave behind?</p> <p><b>F3 Any final comments?</b></p> <p><b><u>Thank and close, switch off recorder.</u></b></p>	<p><b>PROCESS NOTES:</b>  <i>The purpose of this section is to summarise the experience of being on the Pathfinder.</i></p>
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I declare that this interview has been carried out under IFF instructions and within the rules of the MRS Code of Conduct.		
Interviewer signature:	Date:	
Finish time:	Interview Length	Mins

# Appendix 6: Topic guide for depth interviews with staff involved in Pathfinder delivery

## Background for interviewer

Overall, the project aims to evaluate the success of the Personalisation Pathfinder both at an overall level and of its component parts. It will establish whether the Pathfinder works in moving individuals with disabilities and/or health conditions closer to employment and – if it does – how/why it achieves this.

### **We are looking to speak to individuals involved in running the programme:**

**Project Managers:** Manage Personalisation Pathfinder implementation in their district.

**Specialist Health and Disability Coaches:** Combines Disability Employment Allowance (DEA) and Employment Support Allowance (ESA) Adviser roles, but has increased time allocated to claimants and greater flexibility in how to support claimants and what provision to refer them to.

**Specialist Health and Disability Partnership Managers:** Ensures a coherent local offer is in place for providing support for people with disabilities and illnesses. Develops relationships with local employers and increases awareness of disability employment.

**Admin staff involved in recruitment:** Staff involved in recruiting claimants onto the Personalisation Pathfinder. Note that the three groups of claimants are potentially recruited by different staff: New ESA pre WCA claimants will be recruited by Jobcentre admin staff or Specialist Coaches. New JSA claimants will be recruited as part of face-to-face meetings with a Work Coach. ESA WP Returners will be recruited by Jobcentre staff as part of a mandatory interview.

**Work Service Managers:** Manage teams of Specialist Coaches.

**Local Stakeholders:** Local organisations involved in Personalisation Pathfinder provision.

Interviews will cover the nature of Personalisation Pathfinder delivery, quality of the experience for participants, impact on partnership working, claimant attitudes and employability outcomes, and lessons learnt.

This document is a guide to the principal themes and issues to be covered. Questions can be modified and followed up in more detail where necessary.

Some questions may be relevant to different individuals, depending on their role and the processes followed to engage and recruit participants in that Jobcentre; please review the recruitment notes and focus on questions relating the professional role of the interviewee.

## A Introduction (2 mins)

**Interviewer and IFF introduction** – thank you for agreeing to take part.

**Background to the research:** Series of face to face interviews, focus groups and telephone interviews conducted with stakeholders in the Personalisation Pathfinder programme to understand the type of support that is being delivered through the programme, how this is being delivered and how well it is helping participants move closer to / into work.

**MRS Code of Conduct and Confidentiality:** IFF Research is an independent market research company, operating under the strict guidelines of the Market Research Society's Code of Conduct. This means that anything you tell us will be treated in the strictest confidence, and none of your answers will be attributed to you unless you give explicit permission for us to do so.

**Participation is voluntary** – there are no right or wrong answers, you can choose to not discuss any issue or to end the interview at any time should you wish. Should you wish you can also request that information you have shared is taken out of consideration at any time, including once the interview has been completed

**Data use:** The answers you provide will be analysed by the IFF research team and used to evaluate the Personalisation Pathfinder programme. We are due to deliver a report on initial findings from the trial in summer / autumn 2016. These findings will be published but individuals' names or any other identifiable information will not be included in the report.

**Permission to record and client presence:** We like to audio record all interviews of this nature so we don't have to take a lot of notes and also to accurately capture our discussion – the recording will only be used for analysis purposes. The recorder is encrypted and the recordings will be securely stored in folders that only the IFF research team will have access to. All recordings will be deleted at the end of the research. Ask for permission to start recording.

*Interviewer to read out consent statement to gain verbal consent. Switch digital recorder on if participant agrees to be recorded and confirm verbal consent.*

**The interview will last around an hour.**

**The group discussion will last 1.30-2 hours.**

### **PROCESS NOTES:**

*The purpose of this section is to explain what will be covered during the face to face discussion, explain how their answers will be used, provide assurances around anonymity and request permission to record*

## B Recruitment

<p><b>Firstly I'd like to understand a bit more about the structure of the Personalisation Pathfinder here and how participants are recruited to take part in the Personalisation Pathfinder.</b></p> <p><b>B1 Can you first tell me about your role in the Personalisation Pathfinder? [ASK ALL]</b></p> <p>Can you tell me about your previous experience working with claimants with health conditions or disabilities?</p> <p>How long have you been involved in delivering the Pathfinder?</p> <p>And in your view, what is the overall goal of the Personalisation Pathfinder trial?</p> <p><b>B2 What other organisations in the local area are involved? [Project Managers, Work Service Managers, Specialist Health and Disability Coaches, Specialist Health and Disability Partnership Managers]</b></p> <p>How do they help?</p> <p>To what extent was this existing provision and to what extent has it been developed as part of the programme?</p> <p>And what about local employers?</p> <p><b>B3 Can you briefly describe the recruitment process for the Personalisation Pathfinder? [Project Managers, Recruitment Staff, Specialist Health and Disability Coaches, Work Service Managers]</b></p> <p>What has been your role in recruitment for the Personalisation Pathfinder?</p> <p>Which customers have you recruited on to the Personalisation Pathfinder?</p> <p><b>B4 What has been your experience of the recruitment process? How easy/difficult has it been? [Project Managers, Recruitment Staff, Specialist Health and Disability Coaches, Work Service Managers]</b></p> <p>Overall, what response have you seen among claimants?</p> <p>Did this match your expectations or goals in terms of how many to recruit?</p> <p>Have some groups of claimants been more difficult to recruit than others? PROBE FOR: Differences between ESA pre WCA, JSA and ESA WP Returners, any other characteristics (e.g. health condition, employment history)</p> <p>IF YES: Why have some groups been more difficult to reach than others?</p>	<p><i>The purpose of this section is to understand how effective the recruitment process of the Personalisation Pathfinder was and what challenges arose. It is particularly important to understand the differences between the three claimant groups, ESA pre WCA, JSA and ESA WP /Completers.</i></p> <p><i>B3: Recruitment staff will be responsible for recruiting different groups of claimants depending on their role. New ESA pre WCA claimants will be recruited by Jobcentre admin staff or Specialist Coaches New JSA claimants will be recruited as part of face to face meetings with a Work Coach. ESA WP Returners will be recruited by Jobcentre staff as part of a mandatory interview after they complete 2 years on the WP.</i></p>
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IF YES: How have any challenges in recruiting any group of claimants been addressed?

Were there any claimants who declined to join the trial? Why? Were they different from claimants who accepted to join the Pathfinder? If so, in what way?

**B5 How is the scheme presented to eligible claimants in order to make them sign up? What methods do staff use to encourage claimants to sign up? [Project Managers, Recruitment Staff, Specialist Health and Disability Coaches, Work Service Managers]**

Overall, what was the response? Did claimants need much persuading?

What are participants' reasons for wanting to take part? Do the reasons for wanting to take part differ by claimant group? How? Or by any other characteristics (e.g. health or employment history)

And what are their reasons for refusing to take part? Do the reasons for not wanting to take part differ by claimant group? How? Or by any other characteristics (e.g. health or employment history)

How has the voluntary nature of the programme been communicated to claimants?

What feedback have you had on the exploratory appointments and/or group session which claimants attend before signing on to the Personalisation Pathfinder? What questions do they have?

**B6 What has been your experience of the initial exploratory interview with claimants?/ What has been your experience of the initial exploratory interview between the Specialist Health and Disability Coach and claimants? [Project Managers, Specialist Health and Disability Coaches, Work Service Managers]**

Can you explain the purpose of the exploratory interview? What does it typically cover? PROBE: employment and health related goals.

How long is the interview? Is this enough time?

How do you/how does the Specialist Health and Disability Coach accurately determine what support a claimant needs in order to move closer to employment? Are there any circumstances in which you feel you need more support to make these decisions?

What type of provision or additional support may you/may the Specialist Health and Disability Coach refer a claimant to?

Did you make use of any digital tools to identify support needs, local provision, job opportunities etc.?

## C Nature of delivery

**C1 How does the Specialist Health and Disability Coach/how do you work with participants on the Personalisation Pathfinder? [Project Managers, Specialist Health and Disability Coaches, Work Service Managers]**

How often will the claimant and the Specialist Health and Disability Coach typically meet/ How often will you typically meet?

What is the nature of these interviews?

How do you/how does the Specialist Health and Disability Coach decide which provision is most appropriate for each client?

How much time to you/do coaches typically spend with each claimant overall? Is this enough?

What types of venues are/is the coaching interviews held in? In what way do you think the venue of these interviews impacts attendance and participation?

And how do you/how do the coaches communicate with claimants? PROBE: email, telephone, texting etc.

ASK COACHES: Approximately how often do you communicate with claimants outside the coaching interviews?

Has the Specialist Health and Disability Coaches/have you been able to refer claimants to any local specialist provision or support?

IF YES: What were these? IF NO: Why is that?

With regards to ESA Pre WCA customers on the Pathfinder, how soon after registering their claim have you been able to meet them? What has been the value of this?

Do what extent, if any, has the approach taken and support offered to this group differs from other claimants groups?

**WORKING RELATIONSHIPS**

**C2 Do you have a Community Employment Specialist working in your area? [Project Managers, Work Service Managers, Specialist Health and Disability Coaches]**

**C3 IF YES, Can you tell me more about the role of the Community Employment Specialist (CES)? [Project Managers, Work Service Managers, Specialist Health and Disability Coaches]**

What sorts of activities are they involved in?

*The purpose of this section is to explore how the Personalisation Pathfinder programme is delivered, who is involved and how well the relationship between the different roles works. It also explores what support has been provided to claimants and the extent to which this has been tailored to meet the individual's needs.*

*C1: Specialist Health and Disability Coaches can spend up to 6 hours with each claimant on the Pathfinder. This is significantly more than under normal provision. It is important to understand what impact this has had on claimant outcomes.*

*Under Personalisation Pathfinder provision ESA Pre WCA customers should meet with the Specialist Health and Disability Coach within one month, whereas on normal provision they would meet within 9-12 months.*

<p>What support has the CES provided to staff e.g. Specialist Coaches?</p> <p>What support do they provide to participants?</p> <p>Is the CES role beneficial to participants? In what ways?</p> <p>What feedback have you had, if any, about the CES?</p> <p><b>C4 Can you describe how you work with the Specialist Health and Disability Partnership Managers and the Specialist Health and Disability Coaches/ Can you describe how you work with the Specialist Health and Disability Partnership Manager in your area? / Can you describe how you work with the Specialist Health and Disability Coaches in your area? [Project Managers, Specialist Health and Disability Coaches, Specialist Health and Disability Partnership Managers, Work Service Managers]</b></p> <p>What about this working relationship works well?</p> <p>And what about it works less well?</p> <p><b>C5 How have you gone about working with existing and new partners to gain additional provision that is useful for Specialist Health and Disability Coaches and their customers? [Project Managers, Specialist Health and Disability Partnership Managers]</b></p> <p>Can you describe to me how the District Provision Tool is managed and updated? Who is responsible for this and how does this work?</p> <p>Who in the local community do you/does the Specialist Health and Disability Partnership Manager work with to create new provision?</p> <p>How is new provision communicated from Partnership Managers to Specialist Coaches?</p> <p>And how is new provision communicated to customers?</p> <p>How well does this process work?</p> <p><b><u>DELIVERY</u></b></p> <p><b>C6 What is the general profile or characteristics of individuals that participate in the programme? [Project Managers, Specialist Health and Disability Coaches, Work Service Managers]</b></p> <p>Do you see a range in the types of health conditions / disabilities participants have?</p> <p>PROBE: Any other characteristics of claimants, e.g. levels of skills and work experience, age, financial and residential situation etc.</p>	<p><i>C2. The role of the CES is to provide a link between J2E and the Jobcentre; lived in experience of being unemployed and disabled; help identify barriers and manage conditions to overcome these; challenge participants' views on what they can / can't do; identify a range of role models.</i></p> <p><i>J2E was only available in specific locations e.g. Southampton, Bournemouth, Swindon, Hove, Guildford, Swansea, Pontypridd and Llanelli.</i></p>
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**Evaluation of the Personalisation Pathfinder Trial**

<p>How do you tailor interviews to accommodate the range of experience between participants? / How do coaches tailor interviews to accommodate the range of experience between participants?</p> <p><b>C7 And what type of support do you currently offer to Pathfinder participants? [Project Managers, Specialist Health and Disability Coaches, Specialist Health and Disability Partnership Managers]</b></p> <p>How often do you typically refer claimants to additional support such as GPs or mental health services?</p> <p><b>For each type of support can you tell me..?</b></p> <p>What does the support aim to help with specifically?</p> <p>What types of claimants is it targeting and why?</p> <p>How is it delivered and by who</p> <p>How do you tailor support to individual needs?</p> <p><b>C8 To what extent have claimants been referred to J2E provision? [Project Managers, Specialist Health and Disability Coaches]</b></p> <p>What has been your experience of this?</p> <p>In your opinion, what impact, if any, has J2E provision had?</p> <p><b>C9 To what extent has the Personalisation Fund been employed? [Project Managers, Specialist Health and Disability Coaches]</b></p> <p>What kind of provision has the Personalisation Fund been used to fund?</p> <p>What has been the impact of this?</p> <p>IF NOT USED: Why is that?</p>	<p><i>C7: The Specialist Health and Disability Coaches explore what provision claimants feel they need and report this to the Partnership Manager who in turn assesses what local provision is in place and what can new provision can be created. The Health and Disability Coaches should then communicate the local provision to claimants in the coaching sessions.</i></p>
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**D Quality of experience**

<p><b>I'd now like to get your thoughts on how you think participants engage with the Personalisation Pathfinder.</b></p> <p><b>D1 Can you describe to me how participant action plans are designed, developed and used as part of the coaching interviews/your interviews with participants for the purposes of the Pathfinder? [Project Manager, Specialist Health and Disability Coaches, Work Service Managers]</b></p>	<p><i>The purpose of this section is to understand how participants have engaged with the provision available and the extent to which support</i></p>
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<p>What is the aim of the action plan? How is it different from the action plan devised between Work Coaches and claimants at the Jobcentre?</p> <p>When and how are these devised? How do you identify participants' needs and agree the most appropriate course of action with claimants?</p> <p>What types of goals do the action plans usually include and how does this vary by individuals?</p> <p>How are a participant's goals / objectives identified?</p> <p><b>D2 What level of ownership (if any) do individual participants take of their action plan? [Project Managers, Specialist Health and Disability Coaches]</b></p> <p>How does this vary by individual / claimant type?</p> <p>Do participants' goals / objectives change over time?</p> <p>IF YES: how have their goals changed? Why is that?</p> <p><b>D3 What do you think has been the overall impact of the individual action plan? [Project Managers, Specialist Health and Disability Coaches]</b></p> <p>How useful a tool do you think this has been in helping participants realise their potential?</p> <p>Any ways in which the use of the personal action plan could be improved?</p> <p><b>D4 How do participants become involved in individual activities offered as part of the Personalisation Pathfinder support? [Project Managers, Specialist Health and Disability Coaches]</b></p> <p>To what extent do they choose to participate in each activity? To what extent are activities selected on their behalf?</p> <p>Why do claimants decide to participate in individual activities?</p> <p>IF ACTIVITIES ARE CHOSEN BY PARTICIPANTS: How do you ensure that the support chosen by participants is most appropriate to their needs? Which types of claimants choose which activities?</p> <p>IF ACTIVITIES ARE CHOSEN ON BEHALF OF PARTICIPANTS: How do you make a decision about what activities the participants should be involved in? Who is involved in this decision and what do you consider?</p>	<p><i>has been tailored to participants' individual needs.</i></p> <p><i>D1-D3: As part of their interviews / appointment with the Specialist Health and Disability Coaches participants should develop personal goals, objectives and action plans to work towards.</i></p> <p><i>We are asking specifically about the action plans devised for the Pathfinder. Claimants may also have other action plans devised as part of J2E or as part of their fortnightly signing so need to be clear that here we are asking about the former.</i></p> <p><i>D4. We want to understand the extent to which provision has been personalised and a choice given to participants about what activities they engage in.</i></p>
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**D5 Does the level of engagement from participants vary by their route onto the programme, i.e. whether they are pre-work capability assessment ESA claimants, ESA Work Programme Completers, or JSA claimants? [Project Managers, Specialist Health and Disability Coaches]**

IF YES: In what ways? Why do you think this is? What impact does this have on their experience?

Does engagement vary according to any other factors?  
PROBE: health condition, age, skills and work experience etc.

**D6 How does the level and type of support offered and provided vary according to a claimant's individual situation and needs? [Project Managers, Specialist Health and Disability Coaches]**

Are there aspects of the Personalisation Pathfinder that are better suited to support certain types of claimants? PROBE: any relevant characteristics, e.g. age, health, financial situation, work experience etc.

Are there any types of conditions or disabilities that you think the Personalisation Pathfinder is less able to cater for? IF YES: Which conditions / disabilities?

Have there been any circumstances in which the available support offered was not sufficient for a participant's needs? What support or provision was needed?

**D7 Are there any other factors which impact on the level and type of support offered to participants, and their experience of the Personalisation Pathfinder? [Project Managers, Specialist Health and Disability Coaches]**

PROBE FOR: Other perceived barriers to work e.g. Age, previous experience, skills, confidence

And which of these barriers does the Personalisation Pathfinder provision cater (less) well for?

**D8 Overall, how well would you say the support offered and provided reflects individual participants' needs? [Project Managers, Specialist Health and Disability Coaches, Specialist Health and Disability Partnership Managers]**

How well would you say individuals' needs are met in the short term?

And the longer term?

<p><b>D9 What types of support have been more popular with claimants? Why do you think this is? [Project Managers, Specialist Health and Disability Coaches, Specialist Health and Disability Partnership Managers]</b></p> <p>And which are seeing lower levels of take-up? Why do you think this is the case?</p> <p><b>D10 To what extent are participants encouraged and challenged to take-up activities they initially did not want to do / feel confident to volunteer for? [Project Managers, Specialist Health and Disability Coaches]</b></p> <p>What reasons do participants give for not wanting to participate in activities?</p> <p>What methods do you use to encourage participation? And which of these do you find is most effective in getting individuals on board with these activities?</p> <p>IF ENCOURAGED: What activities tend to require the most encouragement? What is most effective in getting participants to take part?</p>	
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## E Impact: Claimant attitudes

<p><b>This next series of questions will focus on how you think the Personalisation Pathfinder has impacted on participants' perception of their own capability.</b></p> <p><b>E1 What change, if any, have you seen in participants' confidence about being more work-ready / undertaking work-related activity / move into work? PROBE EACH FULLY [Project Managers, Specialist Health and Disability Coaches, Work Service Managers]</b></p> <p>IF POSITIVE CHANGE: In what ways have participants become more confident? PROBE FOR EXAMPLES</p> <p>IF NECESSARY, PROBE FOR: Confidence in job search, more generally or in terms of managing their health condition(s) / disability?</p> <p>Why do you think this has come about? What specific support / activities do you think has led to this?</p> <p>Are there any particular types of participants among who an increase in confidence has been most / least marked?</p> <p>PROBE FOR DIFFERENCES BY: Health condition, route onto the programme (i.e. ESA pre-WCA, ESA WP completer, JSA), Other perceived barriers like age, previous experience, distance from labour market, anything else?</p>	<p><i>The purpose of this section is to explore the role of the Personalisation Pathfinder in a participants' journey to employment and how participants' confidence and motivation levels have changed.</i></p>
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<p><b>E3 Have you seen any other positive outcomes as a result of the Personalisation Pathfinder? [Specialist Health and Disability Coaches, Work Service Managers]</b></p> <p>Do they seem better able to manage their health condition? Any impact on the use of NHS services?</p> <p>Has it had any effect on participants' general wellbeing and quality of life?</p> <p>Has there been any effect on participants' ability to manage their financial situation?</p> <p>Are these positive outcomes more prominent with some claimant groups than others? Why is that?</p> <p>Have you seen any other unintended consequences?</p> <p><b>E4 Are you aware of any participants who left the Personalisation Pathfinder programme early? [Project Managers, Work Service Managers, Specialist Health and Disability Coaches]</b></p> <p>IF YES: Why did some participants leave the programme early?</p> <p>Probe: Was timing of engagement wrong? Too early to engage? Didn't need support? Did they move into work?</p>	
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## F Impact: Employability / employment

<p><b>I'd now like to ask about employment outcomes your participants might have achieved since starting on the Personalisation Pathfinder.</b></p> <p><b>F1 To what extent, if any, do you think participation in the Personalisation Pathfinder programme has improved claimants' employability prospects? [Project Managers, Specialist Health and Disability Coaches, Work Service Managers]</b></p> <p>In what way?</p> <p>Have some claimant groups benefited more than others?</p> <p><b>F2 Have any of your participants achieved new qualifications since starting on the Personalisation Pathfinder? [Specialist Health and Disability Coaches]</b></p> <p>IF YES: How many participants approximately have achieved qualifications?</p> <p>IF YES: What impact do you think the Personalisation Pathfinder has had on the type of qualifications achieved?</p>	<p><i>The purpose of this section is to gauge the level of success of the Personalisation Pathfinder in terms of getting participants into work and explore the in-work support that is being delivered to these individuals.</i></p> <p><i>F2 prompts onwards will not be asked to those who have not had any participants move into employment</i></p> <p><i>JSA claimants make more job applications</i></p>
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<p>What aspects, if any, of the Personalisation Pathfinder supports participants with achieving qualifications?</p> <p><b>F3 Have any of your participants gained work experience since starting on the Personalisation Pathfinder? [Specialist Health and Disability Coaches]</b></p> <p>IF YES: How many participants have gained work experience?</p> <p>IF YES: What role do you think the Personalisation Pathfinder has had on helping claimants gaining work experience ?</p> <p>What aspects, if any, of the Personalisation Pathfinder supports participants with achieving work experience?</p> <p><b>F4 Have any of your participants made job applications since starting on the Personalisation Pathfinder? [Specialist Health and Disability Coaches]</b></p> <p>IF YES: Roughly how many job applications being made? And this is from a total of how many participants?</p> <p>IF YES: What impact do you think the Personalisation Pathfinder has had on people's readiness / willingness to make job applications?</p> <p>IF YES: Does the level of job application activity for participants change over time and if so, how?</p> <p>IF YES: And does the quality of job applications change over time? PROBE: More targeted applications, better application letters etc.</p> <p>What aspects, if any, of the Personalisation Pathfinder support participants with job applications?</p> <p><b>F5 Has anyone attended a job interview or interviews during this time? [Specialist Health and Disability Coaches]</b></p> <p>IF YES: How many participants have attended interviews? Roughly many interviews have they attended?</p> <p>What aspects, if any, of the Personalisation Pathfinder support participants preparing for a job interview?</p> <p><b>F6 Have any of your participants entered into employment since starting on the Personalisation Pathfinder? [Project Managers, Specialist Health and Disability Coaches, Work Service Managers]</b></p>	<p><i>due to their fortnightly signing requirement</i></p> <p><i>F4-F6. Interviewer to establish how many participants have entered into employment. If the respondent struggles to give absolute numbers we will probe whether they'd guess more or less than half / more or less than a quarter / 1 or 2 – whichever they feel most able to respond to</i></p>
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*By employment I mean, self-employment, full-time work in a paid role for an employer, part-time work in a paid role for an employer.*

IF YES: How many participants have entered into employment?

What type of employment?

What role did the Personalisation Pathfinder programme play in moving these individuals into work and in the type of work they found?

And have any participants entered into voluntary work?

**F7 Which employers have provided these jobs? [Project Managers, Specialist Health and Disability Coaches, Work Service Managers]**

What level of involvement have they had with the Personalisation Pathfinder more generally?

Have some employer sectors been easier to engage with than others? Why is that?

Is there anything specific about these types of employers that has helped participants into work?

**F8 How easy or difficult has it been to help participants secure employment? [Project Managers, Specialist Health and Disability Coaches, Work Service Managers]**

What have been the key challenges? How were these overcome?

What support has helped individuals into employment?

Are there any factors that have made the transition into employment smoother than you might have envisaged?

Are there types of participants who have found it easier than others to secure or move towards employment? Are there any who have found it more difficult?

PROBE FOR DIFFERENCES BY: Health condition, route onto the programme (i.e. ESA pre-WCA, ESA WP completer, JSA), perceived barriers to employment like age, previous experience, anything else?

IF SOME PARTICIPANTS FIND IT MORE DIFFICULT: For those who find it more difficult, why do you think that is the case? What could be done to improve confidence levels among these individuals?

<p><b>F9 Have you offered any in-work support to those who have entered into work? [Specialist Health and Disability Coaches]</b></p> <p>IF NOT: Why is that?</p> <p>IF YES: What type of support? What has been the impact of this?</p> <p>How often do you continue to see these individuals and for how long? PROBE: Methods of communication, including telephone, emails, text etc</p> <p>Do employers continue to help these individuals? How?.</p> <p>How do you allocate time and resource between participants who have entered into employment and those who have not? How easy or difficult is this to manage?</p> <p>Have there been circumstances when you have not been able to provide the in-work support requested by participants? Why was this? PROBE FOR: time constraints, employer not willing to engage etc.</p>	
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## G Impact: Local integration / Partnership Working

<p><b>I'd like to understand a bit about the impact the Personalisation Pathfinder has had on interactions between individuals, organisations and services within the local community.</b></p> <p><b>G1 Thinking about the partnership working involved in a participant's journey back to work, what changes, if any, have there been as a result of the Personalisation Pathfinder? [Project Managers, Specialist Health and Disability Partnership Managers, Local Stakeholders]</b></p> <p>PROBE FOR IMPACT (IF ANY) ON INTEGRATION WITHIN AND BETWEEN AND WHY THIS HAS BEEN ACHIEVED OR NOT:</p> <p>Participants</p> <p>Local provision (e.g. mental health trusts, health providers etc.)</p> <p>Local employers</p> <p>Local Authorities</p> <p>IF POSITIVE CHANGE: Do you think that this improved integration enables better outcomes for participants? In what ways?</p> <p>Are there any elements of this journey which need improvement in terms of interactions between all those involved?</p>	<p><i>The purpose of this section is to gauge whether and how the Personalisation Pathfinder is improving integration within the local community, who this integration is occurring between, and how this affects claimant on their journey into work.</i></p> <p><i>G1: There are various schemes which could contribute to greater local integration:</i></p> <p><i>Peer support – As part of the J2E job clubs individuals are encouraged to work together to setup and run social activities and events.</i></p>
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<p><b>G5 Have you collaborated with any J2E projects in your areas?</b></p> <p>IF YES: What has been your experience of this? [Specialist Health and Disability Coaches, Partnership Managers]</p>	
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## H Training and Support

<p><b>H1 What support have you been offered from the Project Manager and Work Service Manager in your area? [Specialist Health and Disability Coaches, Specialist Health and Disability Partnership Managers, Work Service Managers]</b></p> <p>How helpful was this?</p> <p>Are there any other forms of support you would have liked to receive?</p> <p><b>H2 What training did you offer the Specialist Health and Disability Coaches in your area during the implementation of the programme? / What training did you offer the Specialist Health and Disability Partnership Managers in your area during the implementation of the programme? What training did you receive at the beginning of this programme? [Project Managers, Specialist Health and Disability Coaches, Work Service Managers, Specialist Health and Disability Partnership Managers]</b></p> <p>Has there been any training or support since then?</p> <p>How useful was this? Why is that?</p> <p>ASK COACHES: What additional support, if any, would you have liked to receive?</p> <p>ASK COACHES: Have there been any situations or circumstances in which you would have liked additional support? What were these and what support would you have liked to receive?</p> <p>ASK COACHES: In your own opinion, what skills and training to you think is needed in order for Specialist Health and Disability Coaches to effectively work with people with health conditions or disabilities?</p>	<p><i>The purpose of this section is to understand what training and support staff have received and whether there have been any gaps in training provision.</i></p>
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## I Impact: Lessons learnt

In this final section, I'd like you to reflect on the Personalisation Pathfinder package, whether in your view it has so far achieved its aims and what the challenges have been in delivering it.

### **I1 What about the Personalisation Pathfinder programme has worked well? [ASK ALL]**

In what ways have participants benefited most?

Where and how has it had its greatest impact? PROBE: Impact on moving participants further towards employment, impact on general wellbeing, any other impact which may not have been achieved without Pathfinder provision.

### **I2 Are there any elements that have not worked so well? What, if any, challenges have you faced in its delivery? [ASK ALL]**

What might have helped you overcome these challenges?

Is there anything else that might have made the delivery easier?

What (if any) improvements could be made?

Did you encounter any problems in setting up the project?

IF YES: What were these problems? Why did they arise? How did you overcome them? What would you do differently next time to avoid these issues?

IF NO: Why do you think you experienced no issues?

### **I3 What, if anything, makes the Personalisation Pathfinder different from other schemes aiming to help disabled people/ those with health conditions into employment? [ASK ALL] FOR EACH QUESTION, PROBE FOR IMPACT ON MOVING PARTICIPANTS CLOSER TO WORK, GENERAL WELLBEING, CONFIDENCE, MOTIVATION ETC.**

What difference, if any, has the personalised approach of the Personalisation Pathfinder made?

What difference, if any, has the early intervention for ESA pre WCA claimants made?

What difference, if any, has specialist staff (e.g. the Specialist Coaches, the Specialist Partnership Managers, the Community Employment Specialist) made?

What difference, if any, has the increased amount of time with a Specialist Health and Disability Coach made?

What difference, if any, has the peer support element, made?

*In this final section we ask staff to sum up their experience of the Personalisation Pathfinder and talk about what they have learnt from their experience*

**Evaluation of the Personalisation Pathfinder Trial**

<p>Has the pathfinder led to culture change in the way that Coaches deal with claimants with a disability or health condition? Why/ Why not?</p> <p>Has there been a culture change for claimants in terms of ownership of action plans and engagement with the support offered by the Pathfinder? Why/ Why not?</p> <p><b>I4 Overall, how would you sum up the Personalisation Pathfinder programme? [ASK ALL]</b></p> <p><b>I5 What would you say are your key learnings from your experience of the Personalisation Pathfinder programme? [ASK ALL]</b></p> <p>If you were to be part of the scheme / a similar scheme again, what (if anything) would you change?</p>	
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**J Wrap up**

**J1 Is there anything we haven't covered relating to this topic that you would like to discuss?**

**THANK RESPONDENT AND CLOSE INTERVIEW**

I declare that this survey has been carried out under IFF instructions and within the rules of the MRS Code of Conduct.		
Interviewer signature:	Date:	
Finish time:	Interview Length	Mins

# Appendix 7: Observation plan for coaching sessions

## Stakeholder Observation plan

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The below outlines the type of information we will look to gather through observations of coaching sessions.

- **Nature and quality of delivery**
  - What the session involved (i.e. different activities / elements)
  - How long the session lasted
  - Claimant- staff interactions i.e. was the atmosphere friendly,
  - Venue – accessible? Appropriate for all claimants' e.g. those with MH conditions?
  - Elements which seemed to work well
  - Elements which did not seem to work well
- **Claimants attitudes:**
  - How engaged participants are
  - Overall feedback from participants on how helpful they are finding the coaching sessions
  - Any activities / elements of the session which participants responded more *positively* towards
  - Any activities / elements of the session which participants responded more *negatively* towards
  - How participants interact with the coach (i.e. any indications of good / bad relationships)
- **Impact:**
  - Anecdotal evidence from participants:
    - Helped them manage their health condition
    - Increased their confidence
    - Increased their motivation to look for work
    - Improve their well-being
  - Anecdotal evidence from participants on interaction with employers and role of the Pathfinder:
    - Job applications
    - Interviews
    - Volunteering / work experience
  - Anecdotal evidence of softer outcomes, e.g. confidence levels, friendships

# Appendix 8: Observation plan for Journey 2 Employment sessions

The below outlines the type of information we will look to gather through observations of J2E sessions.

- **Nature and quality of delivery**
  - How many staff run the session / their roles
  - How many J2E participants there are / types of participants (benefit type/ condition).
  - Whether the staff / participant balance works
  - What the session involved (i.e. different activities / elements)
  - How long the session lasted
  - Claimant- staff interactions i.e. was the atmosphere friendly,
  - Venue – accessible? Appropriate for all claimants' e.g. those with MH conditions?
  - Elements which seemed to work well
  - Elements which did not seem to work well
- **Claimants attitudes:**
  - How engaged participants are / any variance by type of participant
  - Overall feedback from participants on how helpful they are finding J2E
  - Any activities / elements of the session which participants responded more *positively* towards
  - Any activities / elements of the session which participants responded more *negatively* towards
  - How participants interact with each other and staff (indications of good / bad relationships)
  - Feedback on peer support element
- **Impact:**
  - Anecdotal evidence from participants on use of wider support / provision and role of J2E here
  - Anecdotal evidence from participants on whether / how J2E has:
    - Helped them manage their health condition
    - Increased their confidence
    - Increased their motivation to look for work
    - Improve their well-being
  - Anecdotal evidence from participants on interaction with employers and role of J2E in this.
  - Job applications
  - Interviews
  - Volunteering / work experience
  - Anecdotal evidence of softer outcomes, e.g. confidence levels, friendships