One to One Project Evaluation Report

An independent evaluation by
The mental health services in West Norfolk have the utmost respect for the work done by the One to One Project and have relied upon yourselves to support in meeting the overall mental health needs of West Norfolk Residents.

Mr Michael Scott, Chief executive Norfolk & Suffolk NHS Foundation Trust
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1. Executive Summary

1.1 Evaluation Aims

In May 2016 the One to One Project commissioned Enable East to undertake an evaluation of their Big Lottery funded counselling, mentoring and group work services. The objective of the evaluation was to provide a robust and well evidenced assessment of the impact of the services over the past four years and also help inform the strategic planning as the project nears the end of its 5 year Big Lottery Funding.

The evaluation outcomes defined by the One to One project were:

• To engage with key stakeholders to assess the impact of the services provided
• To review the project’s progression against its contractual grant outcomes
• To make recommendations on areas for development to inform strategic planning

1.2 The One to One Project

The One to One Project provides open access, flexible and free, long-term professional support to adults in King’s Lynn and the West Norfolk area, who are experiencing emotional and or social distress and mental health difficulties.

The project provides client led support, utilising a bank of professional volunteer counsellors and mentors to provide tailored support that meets the needs of each individual.

The project accepts self-referrals and also receives referrals from a range of statutory and community based providers. Individuals are assessed to establish the most appropriate support which could include:

- Long-term counselling for up to 52 sessions
- Goal focused mentoring in the community for up to 6 months
- Participating in a range of self-help group workshops

During the past four years of delivering services in King’s Lynn and West Norfolk, the One to One Project has achieved a great deal in reaching vulnerable groups experiencing mental ill health and has provided free, longer term, client led support that is not available elsewhere.

The project has already exceeded 3 of its 5 Big Lottery Fund milestones, having already engaged 951 individuals in 4 years against an original target of 846 individuals by the end of year 5. As such, with one year of delivery remaining, the project is set to significantly exceed that figure by the end of 2016. The project is also making good progress towards achieving the remaining milestones by the end of the funding period.

In addition to the milestones and outcomes achieved, feedback from clients and key stakeholders has been overwhelmingly positive.
1.3 Key Conclusions

In the four years of delivering services, the One to One Project has engaged 951 individuals of which 511 were parents and carers.

Provided outreach to 272 individuals in rural areas.

Provided over 15,000 client contact hours.

Of the 951 individuals who actively accessed support over the 4 years...

- 42% were male
- 58% were female
- 68% were either unemployed, on benefits, retired or a student
- 14% were aged 18-24
- 80% were aged 25-64
- 6% were aged 65+

60 min
In reviewing our evaluation evidence we can identify that the One to One Project has proved successful at:

- Making considerable progress in achieving their contractual grant outcomes and milestones. The project is on track to reaching all of their contractual milestones and outcomes, and in some cases exceeding them by the end of the funding period.

- Providing a tailored approach to supporting individuals experiencing emotional and social distress and mental ill health. Feedback from all stakeholder groups was that the project excelled at providing support that focused on the needs of individuals, rather than offering a prescriptive service.

- Providing a responsive, client led service that works closely with the individual to establish the length of time they require support. Although the project provides up to 52 1 hour sessions of counselling, we found that many individuals did not utilise the full quota available. The feedback from clients was that by having the option of long-term counselling, they felt that they could engage fully and develop a trusted relationship with their counsellor. They said they were not worrying about a ‘ticking clock’ and the threat of sessions ending too quickly and were supported to end their therapy at a time of their choosing.

- The overwhelming feedback from volunteers was that they felt supported, safe and valued by the project. The regular supervision, training programmes and ‘open door policy’ to speak to management were some of the reasons cited for choosing to volunteer at the project.

- Creating a supportive and welcoming culture. The nurturing and engaging culture at the One to One Project was widely commented on by all stakeholders groups. The welcoming environment and accessibility of speaking to core staff was often mentioned as a particular strength of the project.

- Providing a tailored service that many individuals experiencing financial disadvantage would not be able to access elsewhere. The services offered by the One to One Project are free and many beneficiaries and external stakeholders observed that this made the project unique in the area and was meeting a real need that no other providers could support.

The One to One Project has proved less successful at:

- Establishing clear and robust ways of capturing the outcomes they have achieved for all clients. Throughout the evaluation we have, on the whole, received very positive feedback from a range of key stakeholders about the services offered. However, the level of feedback captured from beneficiaries represents a relatively small percentage of individuals supported, therefore the project is unable to demonstrate the breadth of the impact achieved.

- Improving external communications was also regularly fed back from stakeholders. This was largely relating to how the project should raise its profile and engage more people. However it should be noted that in recent months the One to One project has embarked on a communications campaign to raise awareness of the services provided, so steps are already being taken to address this issue.

- Developing a broader mix of income to sustain the service post funding. Whilst developing funding streams was not a direct outcome specified by the Big Lottery Fund, financing of the project was reported as the greatest concern for stakeholders. With only a small core team of staff, there are capacity issues which, at times, impact on some of the strategic developments such as broadening the funding streams.
The One to One Project has achieved many successes in the four years of delivering its Reaching Communities funded services. It has supported significantly more people than it had initially set out to and offers a unique service to those who experience emotional and social distress, who are unable to fully address their needs through statutory services or due to financial constraints.

It should be highlighted that the project team consists of just 3 funded posts, none of which are full time, and yet they have achieved significant success, due to the excellent relationships they have built with their volunteer base, which again it should be noted, is without any dedicated volunteer co-ordinator in place. The project is reliant on the support of volunteer counsellors and mentors which presents potential risk. However, it is evident that the One to One Project has developed an engaging and supportive culture, coupled with a high calibre professional development programme that not only engages but fosters a long-standing relationship with their dedicated volunteers.

External stakeholders have praised the One to One Project for their ability to provide client led support, which coupled with the ability to offer long-term counselling, enables individuals with complex needs to fully engage with the service.

Whilst there are areas that could be improved in future delivery, relating to communications and the monitoring of outcomes, the overwhelming feedback from all stakeholders is that the One to One Project provides a valuable service that meets the needs of vulnerable groups and offers services that statutory provision cannot provide.

1.4 Key Recommendations

Following the conclusions above, we identify the following key recommendations for developing the One to One Project in the future:

- **Review the monitoring practices used to ensure there are appropriate methods that engage all participants to ensure a consistent approach to the reporting and monitoring process.** A Lessons Learnt review should take place with the staff and volunteers to identify why the current monitoring methods have not been as successful as initially planned, to inform future monitoring procedures.

- **Review the PR and Communications methods used and develop a communications strategy that enables the project to raise its profile within the community, particularly around demonstrating the impact of the service to potential funders.** Capacity issues within the core team are likely to be the main reason why communications is curtailed and the project could explore the possibility of voluntary or pro bono support to support their communications.

- **To develop a broader fundraising mix to build the stability of the project in the long term.** The management team and Trustees all acknowledge that funding uncertainties are the biggest risk to the project and again it is capacity issues within the team that limits the amount of fundraising work that is carried out. The project is focused on the immediate need of securing continuation funding for the service, but they should consider developing a broader mix of income, to reduce their reliance on one source of income. Collaboration with other community partners and raising the profile of the project is an integral part of broadening the funding possibilities.
2. Introduction

2.1 Background to the One to One Project

The One to One Project is a registered charity that has supported people in King’s Lynn and the West Norfolk area for over 30 years. The project provides professional long-term counselling, mentoring and group work to adults experiencing emotional and social distress and mental health difficulties. The project also offers support to parents and carers of those seeking help who find their everyday lives are also affected.

The project consists of 3 paid members of staff, all of whom work part time hours and currently has a bank of 25 volunteers who are professionally trained to deliver counselling and mentoring support.

The project is currently funded by a 5 year Reaching Communities grant from the Big Lottery Fund and also receives a grant from the Tudor Trust towards running costs.

The project offers all of its services free of charge to enable individuals to access long-term counselling who would otherwise be unable to afford private therapy. However it should be noted that the project tactfully promotes donating to the charity, so that those who can make a contribution can do so with ease and without pressure.

The project is located on an industrial park in North Lynn, within a relatively spacious unit that provides numerous private rooms for counselling. The project also provides outreach services in the rural communities of Terrington St Clement, Downham Market and Swaffham utilising community buildings as a base to deliver services; some of which are free of charge and some for a nominal fee.

The One to One Project works with a range of community providers accepting referrals of clients, with a high proportion coming from primary and secondary care mental health services, family services such as Sure Start and Home-Start centres and the voluntary sector including domestic violence, sexual abuse, eating disorders and offender programmes. It was interesting to note that the service also receives referrals from community employability providers who recognise that emotional and social distress can be significant obstacles to people returning to work, and have found the One to One services beneficial in achieving a holistic approach to supporting people back into work.

2.2 Methodology

Our methodology has been developed around data collection approaches that best assess the performance of the One to One Project against the evaluation outcomes specified.

Our methodology involved four phases of work:

- Scoping and initial interviews
- Secondary analysis of existing One to One Project data
- Qualitative and quantitative surveys of stakeholders
- Analysis and reporting

Phase 1 - Scoping and Initial Interviews

We started the evaluation work with scoping and initial interviews with the Management team to ensure that we understood the scope of the evaluation, the aims and objectives of the service, its initial development and progress to date.
Phase 2 - Secondary analysis of existing One to One Project data

We undertook an analysis of the existing monitoring data and records collected to identify patterns, outcomes and impacts. The outcome of this phase of work was an understanding of the reported outcomes achieved and the progress it had made against its grant contractual outcome targets.

Phase 3 - Qualitative and Quantitative Surveys of stakeholders

Interviews and surveys have been conducted with key stakeholders utilising an online survey, face to face interviews and telephone interviews capturing mainly qualitative information. The survey sought feedback on the effectiveness of the programme and identified strengths and weaknesses.

The outcome of this survey work is a detailed picture of the views of stakeholders on the effectiveness of the One to One Project and the impact made.

Phase 4 – Analysis and Reporting

We carried out a detailed analysis of all the evaluation material collated to produce a report that identifies:

- The effectiveness and impact of the One to One Project
- Identify the success of the One to One Project
- Make recommendations for the future delivery of the project

2.3 Summary of Enable East data collection

By using a range of engagement and communication methods we received feedback from 52 individuals as detailed below:

Interviews:

Telephone and face-to-face interviews were conducted with a range of key stakeholders

<table>
<thead>
<tr>
<th>Stakeholder Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>One to One Project - key personnel</td>
<td>3</td>
</tr>
<tr>
<td>One to One Project volunteers</td>
<td>6</td>
</tr>
<tr>
<td>Beneficiaries</td>
<td>5</td>
</tr>
<tr>
<td>Other stakeholders</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>18</strong></td>
</tr>
</tbody>
</table>

Online Stakeholder Survey:

We contacted 54 stakeholders from statutory and voluntary sector services such as the wellbeing service, GP surgeries, children’s centres and numerous voluntary sector organisations inviting them to participate in an online survey. We received 18 completed surveys.

Volunteer Surveys:

A survey was sent to 42 current and past volunteers who are involved with the One to One project, we received 16 completed surveys.

Review of One to One Project data collection:

To inform our evaluation we reviewed the monitoring and reporting documents used by One to One Project which included data collected using the Clinical Outcome in Routine Evaluation method and reviewing client exit surveys.
3 Analysis of the project’s Outcomes Statistics

The One to One Project reports against 4 outcomes to the Big Lottery Fund’s Reaching Communities grant programme.

- **Improved mental health and wellbeing of adults in King’s Lynn and West Norfolk, enabling them to cope with life stressors more easily**

- **Increased access to outreach services by rurally isolated adults/families, who would otherwise have been unable to benefit from counselling/mentoring/group work due to rural isolation**

- **Greater access to support by parents and carers of those with mental ill health, leading to reduced risk of family disruption and breakdown**

- **15 plus trainee counsellors and 20 plus mentors will have qualified, increasing the project’s capacity to deliver support services to clients and communities**

Furthermore the project has specific milestones to achieve those outcomes including...

...by the end of year five

- **846** people will have demonstrated an improved capacity to cope with life stressors by reduced dependence on health and social care interventions

- **392** rurally isolated clients will be accessing an outreach service

- **598** parents/carers will have demonstrated increased coping abilities by continuing to live within their homes and/or family environments

- **35** volunteers will be offered a placement as trainee counsellors/mentors

- **19,838** client contact hours will have been delivered by counselling and mentoring volunteers
3.1 Methods for monitoring outcomes

In order to assess the impact of the One to One Project’s services and report against their contractual outcomes, they have adopted a range of methods to capture qualitative feedback and quantitative data to evidence the impact of the service.

Clinical Observations in Routine Evaluation (CORE)

Over the past four years, 306 individuals have completed the CORE outcome measure. This represents 32% of those engaged. The project is aware that some clients are reluctant to score their health and wellbeing through a ‘tick box exercise’ and therefore it is not a requirement for clients to participate in the survey.

The CORE outcome measure is a client self-reporting questionnaire that is designed to be used at the beginning and end of therapy. The client is asked to respond to 34 questions about how they have been feeling over the last week, using a 5-point scale ranging from ‘not at all’ to ‘most or all of the time’. The 34 questions used to inform the measurement cover four dimensions;

- Subjective Wellbeing
- Problems/Symptoms
- Life Functioning
- Risk/Harm

The responses are designed to be averaged by the practitioner to produce a mean score that indicates the level of current psychological distress from ‘healthy’ to ‘severe’. The questionnaire is repeated after the last session of treatment; and comparison of the pre- and post-therapy scores provides a measure of outcome that indicates whether or not the client’s level of distress has changed, and if so, by how much.

Across all four dimensions, the average total score reduced from 68 to 22, indicating that clients moved from a severity level of ‘Moderate to Severe’ to ‘Low Level’ throughout therapy.

<table>
<thead>
<tr>
<th>Scale of CORE severity levels</th>
<th>Pre-therapy</th>
<th>Post-therapy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Severe (85+)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moderate to Severe (68-84)</td>
<td>68</td>
<td></td>
</tr>
<tr>
<td>Moderate (51-67)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mild (34-50)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low Level (21-33)</td>
<td></td>
<td>22</td>
</tr>
<tr>
<td>Healthy (1-20)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

There were positive improvements identified in all 4 areas;

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Pre-therapy</th>
<th>Post-therapy</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subjective Wellbeing</td>
<td>2.49</td>
<td>0.82</td>
<td>1.67</td>
</tr>
<tr>
<td>Problems/Symptoms</td>
<td>2.44</td>
<td>0.84</td>
<td>1.60</td>
</tr>
<tr>
<td>Life Functioning</td>
<td>2.04</td>
<td>0.67</td>
<td>1.37</td>
</tr>
<tr>
<td>Risk/Harm</td>
<td>0.55</td>
<td>0.13</td>
<td>0.42</td>
</tr>
</tbody>
</table>

Subjective Wellbeing and Problems/Symptoms were recorded as the biggest issues faced by clients at the beginning of their treatment and these were also the areas that reported the biggest improvements at the end of treatment, which would demonstrate the positive impact the service has made to address the priority needs of individuals.
This method of reporting also records the area that people live and their referral route.

The graph below shows that of the 306 clients recorded, the highest number of clients were self-referred, with the second highest referrals coming from The Norfolk and Suffolk NHS Foundation Trust.

Of the 306 who completed the CORE outcome measure...

192 were from Kings Lynn
14 were from Terrington St Clement
28 were from Swaffham
39 were from Downham Market
33 were from the surrounding areas
Client feedback survey

Over the past 4 years 104 clients have completed a Feedback Survey, which represents 11% of those supported over the 4 year period.

The survey focused on capturing key outcome data for clients in the following areas:

- Referral & Initial Assessment
- Services Received
- Suitability of the volunteer
- The extent the service helped
- The impact on health & wellbeing
- Overall satisfaction with the service

96% of people reported an improvement in their mental and emotional health.

- 51% were seen within 0-2 months
- 28% were seen within 3-5 months
- 12% were seen within 6-8 months
- 8% were seen within 9+ months
- 2% weren’t sure

“I never cease to be impressed with the really quite superb work they are doing on behalf of my constituents. They are quite one of the best run charities I have ever come across, and I do believe that they are making a real difference to many people’s lives.”

Sir Henry Bellingham MP
Of those responding...

- 81% had accessed counselling services
- 99% of people said they had received a prompt initial assessment
- 39% had accessed mentoring services

- 85% reported that they were extremely satisfied with the volunteer they were matched with
- 89% said the services had helped them completely or very much
- 82% reported that the service had completely or very much improved the quality of their life
- 83% rated their overall experience as excellent
Whilst this method of monitoring provided strong quantitative feedback to help evidence outcomes, unfortunately only a small proportion of clients completed the survey. The main reason for the shortfall is attributed to the survey being sent to clients once their treatment has ended. Before a client is discharged by their therapist they reflect on their therapy and the progress they have made, but this is verbal and is not recorded for reporting purposes. After discharge a survey is posted to the client at home, but it is evident that either the level of engagement has now reduced or more likely, that home/life commitments mean that the survey is forgotten and valuable feedback is not reported.

The One to One Project acknowledges that improvements should be made to strengthen their monitoring processes and are finalising plans to change their monitoring that will enable them to capture feedback throughout the client journey and before discharge. They have also sought advice from a third sector consultancy regarding developing a new management information system to strengthen their reporting and monitoring in the future.

**Case Study - Peter’s Story**

Peter is 31 year old, he has been diagnosed with Bi-Polar Disorder and in the past has suffered with alcohol addiction.

I was diagnosed as bi-polar after years of using alcohol to help me cope with my lows. It was really spiralling out of control and I tried to take my own life. It was at that point that I received my diagnosis and was referred to a psychiatrist and prescribed medication. The problem is, the medication just made me feel like a zombie and it felt like if I wasn’t compliant with the NHS model then they just wasn’t interested.

I had been referred by my GP to a counsellor but it didn’t work out well. I felt rushed and I just couldn’t connect with them. To be honest it felt more like a tick box exercise than being listened to and I always felt like the clock was ticking over me because I only had 6 sessions of therapy. I looked into what other support was available, but the services were either private or required a financial contribution and I just couldn’t afford it either of those options. That’s when I found out about One to One Project so I got in touch. It didn’t take long to be seen, just a couple of weeks, I had my assessment and I was assigned a counsellor to work with. There was a waiting list but it was shorter than what I had expected.

I saw my counsellor on a weekly basis, at first I didn’t really know what to expect but as time went on we found more things to talk about and it became easier. She gave me tools to help me manage my condition and also recognise early warning signs of when I was becoming unwell which I found really empowering. Eventually, through my therapy, I was able to give up drinking.

It’s been over 4 years since I ended my therapy at the One to One Project, I continue with counselling on a private basis now but I can’t stress how much the One to One Project helped me. More than anything I felt empowered and it helped build my confidence. I am now able to give something back to the charity through my role as a Trustee, in the past I would never have had the confidence to do something like this but it’s yet another thing that the therapy helped me overcome.

I have worked with four other charities offering mental health support, and only one has anything approaching such solid and open support. I think this is something we may not realise without experiencing what it’s like to work as a counsellor with less support, and how essential it is to be able to provide good practice, keeping oneself and one’s clients safe.
3.2 Statistical Summary of the One to One Project external stakeholder survey

In order to engage with as many stakeholders as possible and provide an opportunity for feedback, we designed an online survey. We sent the survey link out to 54 stakeholders identified by the One to One Project and invited anonymous feedback between the 6th and the 25th June 2016.

The survey comprised of 11 questions, of which 4 were quantitative and results are detailed below; the remaining questions allowed for free text replies that are summarised further in the report.

There were 18 responses to the survey. We asked responders in which capacity they were replying, and we received 12 replies to this question. The largest group represented were from the voluntary sector and family support services.

In which capacity are you replying?

Which service have you accessed?

We asked respondents to detail all of the services that they have referred clients to, the most popular being the one to one counselling service for individuals and group work. 17 people answered this question.
We asked respondents to rate on a scale of 1 to 10 how beneficial they felt the service was to participants. 17 people responded, with 10 people scoring it 10.

From your experience, on a scale of 1 to 10, how beneficial do you think the One to One project has been to people? (1 being the least beneficial and 10 being the most beneficial)

We asked respondents to rate on a scale of 1 to 10 the One to One Project’s information sharing and communications activities. 17 people responded with 10 people scoring it 10.

On a scale of 1 to 10, how would you rate the One to One Project’s information sharing and communication activities? (1 being the lowest score and 10 being the highest)
3.3 Feedback from external stakeholders

To understand the impact and significance of the One to One Project services we asked stakeholders via the online survey and interviews to provide qualitative feedback. A summary of common themes is detailed below and full responses are available in Appendix 1.

What are the greatest benefits of the services offered?

**Accessibility**

- The staff at the service are so welcoming and approachable
- It enables people to access good quality counselling who can’t afford private therapy
- Not being able to afford to see a counsellor can be a massive barrier for people gaining the support they need to help them manage their wellbeing

**Not time limited**

- There are no restrictions on the length of time offered meaning that clients can fully engage
- The long-term mentoring support that One to One offer people is a unique service that has benefited my patients

**Client Led Support**

- The service isn’t restrictive like statutory provision; it is person centred and accepts that everyone is different
- Client choice itself is very empowering

How does the service complement existing health and social care provision?

- Many of the issues families have do not fit within a 6 week ‘fix it box’. So One to One can complement provisions already offered to families by offering the long-term group activities alongside targeted 1-1 support

- In my opinion the One to One Project help to bridge a gap between the constraints and limitations of the NHS and what it can offer people

- Without the One to One Project there would be a gap in provision for families in West Norfolk as the statutory services cannot cope with the demand and offer very little in comparison
There are limitations in the services provided by mental health and wellbeing (IAPT) in this area and One to One provides an invaluable contribution.

There isn’t any other scheme out there which offers this service.

It provides more time and a tailored approach which complements the NHS and voluntary sector provisions.

The Wellbeing Service can only provide brief interventions so One to One bridges NHS provision.

What would it be like without the One to One Project?

It would be very difficult with a gap in service provision. I dread to think as there is nothing else like it in this area.

There is nothing else like it. There would be people left in the system with no one to help them.

It would have a devastating impact on the local community. The people who are trying to manage their wellbeing and mental health would lose a valuable resource which is not and would not be replaced by other statutory services.

Despite improved NHS wellbeing services we would notice the gap if this service was not around to access. It would definitely impact badly on GPs, having such an excellent resource no longer available.

Are there other areas of the service that you believe could be improved?

Many of the respondents said that increasing the capacity of the service would be beneficial as it would enable more people to access the service and also reduce the waiting time, however people were mindful that this was dependent on funding.

Another common theme was that the One to One Project could do more to raise the profile of its work. There were a number of different angles to this, in that some said they felt increased communications would enable more individuals in need of help to become aware of the service. Others said that there should be improved communication to raise the profile of the services and highlight the good work that was being done, which might lead to further funding being available and one provider said that they felt there could be an improvement in the communication to providers, so that they had a clear understanding of the services offered by the One to One Project.
3.4 Feedback from clients

The Client Feedback Survey provides clients the opportunity to provide qualitative feedback on the service they have received. A summary of some of the comments received is detailed below.

**Counselling**

"The One to One was a lifesaver and I thank them for their care, provision of an experienced counsellor exceedingly well matched to my needs. Without this service I have no idea where I (or my family) would be today."

"I now have plans for the future that are positive, previously I had none."

"I am extremely thankful to One to One Project. Without the project I would not have had access to counselling due to financial constraints. When I contacted the service I was drinking heavily, on antidepressants, depressed and unable to work. Now I am medication free, drinking far less and have completed an access to HE Certificate. I am starting an English Literature degree in September."

**Mentoring**

"I really appreciate the help and support that my mentor gave me. It made a big difference. It has been great fun talking and doing activities with him. He was very understanding, encouraging and supportive. At each meeting he really came forward and he was very receptive and easy to talk to which helped me with my confidence a lot."

"I couldn’t have accessed the service if my volunteer hadn’t come to my home."

**Group Work**

"I used to think there was no light at the end of the tunnel, that others were more important than me and that I would always say stupid things. The group has helped me change all those."

"This course has made a profound effect on me, not only has it helped me with my own anger it has helped me understand anger itself, I have learnt that I have been holding on to a lot of past problems that have even physically harmed me. The course has helped me reduce my medication, it has also helped me deal with situations at home, I can also now get a good night’s sleep so it’s helped my insomnia. I’m not so tense so my shoulder and back no longer hurt. I would recommend this course to anyone as I have found this has helped me overcome a lot of year’s worth of pent up frustration and anger."

**General client comments**

"Before being referred to your service I had a few sessions within the NHS with CBT, which I felt was inappropriate for my problems. The One to One Project has helped me to get my life back on track and also that of my family because of the service I received. My very many thanks to you all."

"The One to One Project is an extremely safe, friendly environment which has helped me to overcome the shame and stigma of emotional and mental health."

enableEast

making improvements actually happen
3.5 Feedback from volunteers

The volunteer base is a critical part of the service delivery and we gathered qualitative feedback from them via an online survey and interviews to identify areas for service development and achieve a greater understanding of what influenced their decision to be a volunteer. A summary of common themes is detailed below and full responses are available in Appendix 2.

What do you think have been the successes of the project?

**Not time limited**

- The project reaches people that the wellbeing service can’t support due to the restrictions of their service
- The project delivers free long-term mental health services to the community; I have seen with my own clients the value it brings to people’s lives
- The project offers up to a year of counselling for adults experiencing mental health difficulties, something that is so desperately needed and yet extremely difficult to source

**Volunteer support**

- I have always felt very supported and there are clear expectations and boundaries
- The supervision and training is excellent
- The training provided really is exemplary, and the ongoing support and supervision ensures that all the volunteers have the confidence to deliver a really excellent service

**Client choice**

- As a mentor I work closely with clients to develop a proactive relationship
- Group work is tailored to the individual needs of the participants. Group numbers are kept small (usually up to 12) enabling trust to become established quickly
- Service user involvement is provocatively promoted. I was a former mental health service user and the project took me on as a counsellor during my training
- The project embraces confidence and self-motivation for the clients which enables the project to progress and evolve
What have been the challenges?

The funding and survival of the charity has always been a concern.

The location of the office is problematic and people without transport have to take two buses to reach us.

At times we have so many referrals that the waiting list can become too long.

A lack of funding means there are so many people that need the project for support and will not be able to access such a service that is in high demand.

Are there services that you think could be improved or developed?

More local support in smaller community centres.

More funding would mean more trained mentors and so the waiting list for the project would be reduced.

Extend the out of office hours offering for services.

More effective publicity for the services we offer, particularly group work.

I wonder too if it would be possible to offer counselling or mentoring to those local people where English is a second language.

More outreach in rural locations.

Services reaching young people aged 16 to 18 as there is a great deal of need and very little service provision at present.

More collaboration with statutory services.

The problem with developing services is the risk of diluting what is already offered, this is a small team and a limit to what can be achieved whilst maintaining the same high standard.
What influenced you to volunteer at the One to One Project?

"The One to One Project had a really welcoming feel to it. I felt at ease very quickly. I have worked in many organisations in different roles and the level of support at 1 to 1 is outstanding."

"Originally I was looking for a placement during my diploma year of counselling degree, however I have stayed for 4 years!"

"It is a brilliant project that offers a badly needed service it is committed to its beliefs and ethics."

"It is a highly professional organization with excellent support and training for volunteers and a very caring attitude toward its users."

"Quality of the service it provides to its clients. The Project starts with its clients and everything else is informed by that."

"I was impressed by the ethos and culture and knew I wanted to be part of it."

What could be done to improve your experience as a volunteer?

The overwhelming response to this question was that nothing more could be done to improve the volunteer experience. Some respondents provided ideas for developing service provision but it was not directly related to volunteer engagement or management.

Case Study - Paul’s Story

Paul is 23 years old and had suffered from depression and low self-esteem.

My depression was starting to impact on my work and life and I felt that I needed to seek help. I went to see my GP but I felt like he wasn’t listening to me. He wanted to prescribe me medication and that wasn’t what I wanted.

A friend recommended the One to One Project so I got in touch with them. I was extremely nervous but my initial assessment went well and it helped me feel much more relaxed. The assessment made it really clear what was involved which put me at ease and I was assigned a therapist who was matched to my needs. At first I was sceptical about whether it would work out for me, but over time we developed trust and I was able to allay my fears.

I thought it might be a quick fix with just a few coping tools offered but it was longer and much more in depth, in the end I think I had about 15 sessions. The counsellor used language that I understood so I didn’t feel confused and it was set at a pace that suited my needs.

It’s one of those things where I don’t know if I’ll ever feel ‘cured’ but what it gave me was an understanding and almost permission to know that I could take things slow and that I wouldn’t just change overnight."
4. A review of the service areas

The One to One Project provides 3 services to support people with emotional and social distress.

After the referral has been made, a client meets with the project manager within 2 to 3 weeks, for an hour long initial assessment. The process assesses if a client is ready to engage with the service and if so the most appropriate method of support to address their particular needs.

During the process a risk assessment is also carried out in line with the project’s Client at Risk of Harm protocol to ensure the safety of the client, volunteers and staff at the One to One Project.

During the assessment the possibility of making a financial contribution is also discussed. The service is free and there is no pressure or obligation to provide financial support but the process of making donations is discussed and donation envelopes and a donations box is discreetly located within the building.

4.1 One to One Counselling

Following the assessment process, clients are matched to a volunteer counsellor who is considered the most suitable match, this takes into account the type of counselling required and other issues that could affect engagement such as gender, age and the counsellor’s model of practice. There is an average waiting list of approximately 3 months; the project maintains communication with the client throughout this period, providing regular updates on when they are likely to be seen to maintain engagement.

One to one counselling is available for up to 52 sessions. The majority of clients have a 1 hour weekly session. A small provision of twice weekly intensive support is available for very complex referrals. The average amount of sessions used by clients is between 30 to 40.

The counselling service offers a range of support and an integral part of the initial assessment is the consideration of the approaches that are available to decide what is most appropriate for the client, which could include person centred, psychoanalysis, psychodynamic, integrative, gestalt and humanistic.

Counselling is also offered as an outreach service in Terrington St Clement, Downham Market and Swaffham. In the past 4 years 57 people have accessed the outreach service. A number of respondents have suggested expanding the outreach support into more rural communities as a potential development in the future, citing that the distance that some people have to travel to receive support is a significant barrier to accessing the service.

In recent months the counselling service piloted a weekly evening service in response to feedback from clients that joined a working group to explore new service developments. They identified a need to support people who had restrictions on their availability in daytime hours. The service was mindful that work and childcare commitments often prevented people for accessing the services. The pilot was very successful and will be continued for the duration of the project.
4.2 Mentoring

The mentoring service offers goal focused emotional support to help people experiencing isolation and help overcome anxiety issues. The service is delivered within the home or in a community setting and is available for **one hour** per week for up to **6 months**. Common issues addressed include social and rural isolation, agoraphobia and anxiety in public spaces and social phobia. Individuals work with their mentor to agree and work towards achieving goals, such as increasing confidence in using public transport, accessing local groups and social activities and leaving the home and gaining independence.

62% of participants were aged between 25 to 49 years old. The service can be offered to clients who do not require one to one counselling and can also be offered prior to, or post one to one counselling if it is considered to be beneficial to help people bridge support into their everyday lives.

The service currently has **8 volunteer mentors** and it is recognised that more mentors are needed to meet demand. The recent recruitment of a deputy manager has enabled a concerted recruitment drive to build the pool of volunteer mentors.

4.3 Group Work

The group work sessions accept referrals from external organisations as well as referrals of clients receiving counselling or mentoring support. Over the 4 years the service has delivered a range of courses with the most popular being:

- **Anger Management**
- **Anxiety and assertiveness**
- **Self Confidence**

Although the format of the sessions is built around group work, the service maintains its ethos of providing tailored support and recruits only small numbers of clients to enable everyone to fully engage and participate in the sessions.

In recent months the project has experienced reduced numbers of referrals, which coupled with higher rates of DNA's (did not attend), means that at times the workshops have had lower numbers completing the courses than anticipated. The wellbeing service has more recently started delivering their own group workshops, resulting in a risk of duplicating some courses offered in the locality, which may have impacted on the low numbers for One to One sessions. However a practitioner within the wellbeing service said...
that their provision of workshops was on the whole a different format to that provided by One to One. Furthermore they reported that they continued to refer their clients on to One to One project's workshops if smaller groups were considered beneficial to the client and they continued to refer their clients to specific courses that were not available within the wellbeing service provision.

More recently the project has developed a pilot to be launched in the autumn time that provides group work support to clients whilst they are on the waiting list for one to one counselling or mentoring support. The project recognised the need to be able to support clients during the period of waiting to access a weekly service and are hopeful that by offering a drop-in workshop it will go some way to bridging the gap between referral and treatment.

Group work sessions have also been delivered as an outreach service when needed. For example, sessions have been delivered on site for a charity that supports females experiencing domestic abuse and another charity supporting female survivors of sexual violence. In both cases, attending an open session presented too many barriers but offering on site delivery enabled particularly vulnerable groups to access support.

### Case Study - Jean’s Story

It’s been almost 2 years since I left the service and I can’t say how much the One to One Project helped me.

I was sexually abused as a child and in those days there really wasn’t anywhere you could go to get help. Later in life, in my 50s, it seemed that everything I had buried for all those years was coming to the surface and it started impacting on my life.

I went to my GP but he just wasn’t helpful at all and if anything, he made me feel bad about wanting to seek help. A few years later I found a support group to attend and the One to One Project did a presentation to the group. It was that presentation that finally gave me the courage to seek therapy.

It was such a big step for me but they were so supportive and put me at ease. I waited about 6 months to start my therapy and received therapy for just over a year. I found it really beneficial as it gave me a sense of myself.

I also attended group work for improving self-esteem which was a really good experience. Meeting other people and hearing about their situation made me realise that I wasn’t alone and I formed friendships that remain to this day.

I have continued with counselling privately, because for me, there is still so much more than I need to deal with. But One to One helped me through that first stage and provided a safe and trusted environment which is so important.

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I cannot express strongly enough how much we need this service to help with a growing patient base.

The project is invaluable to so many.

No matter when I contact them, with whatever question I may have, I am always greeted with positivity and genuineness, and I have no doubt that this is the same for individuals using the service.
5. Strategic Recommendations & Areas for Development

Following our interviews with external stakeholders, volunteers and One to One Project staff and feedback received from clients, we have identified a number of recurring themes and areas that the One to One Project should consider when commencing their strategic planning as they near the end of their current Big Lottery funding.

**Young people’s service** - providing support to young people was recognised by many counsellors as an area for development. The project piloted an outreach service at a high school earlier in the year which, on the whole, was considered to be successful. A summary report highlighted learning points that should be considered for future project development relating to successful engagement and clear referral routes. Further research should be undertaken to assess if there is unmet need and to identify the most appropriate ways to engage young people which does not duplicate statutory service provision. Specific funding programmes that support youth projects should be considered to expand the income provision.

**Extend community outreach** - A number of beneficiaries and volunteers felt that extending the outreach provision would be beneficial to those living in rural areas, particularly in areas north of King’s Lynn and to the coast where existing outreach does not extend to. They acknowledged that transportation issues, coupled with the anxiety of having to travel significant distance for support, presented barriers to accessing support.

**Couples and family counselling** - A number of counsellors reported the lack of provision in the area for free, long-term couples and family counselling. Further research should be undertaken to assess the need in the locality and to map existing provision from the wellbeing service and organisations such as Relate, to ensure they do not duplicate services when developing a business case.

**Collaboration** - The general feedback from stakeholders is that the One to One Project works well with statutory and community providers, but it was also recognised that further collaborative work could be developed. The management team acknowledged that capacity issues had been the main cause of limiting developments with partners and felt that the appointment of the deputy manager earlier this year had already resulted in more time available to build relationships. An example being the Memorandum of Understanding recently established between One to One and the Norfolk & Suffolk NHS Foundation Trust which identifies a referral pathway for the project to accept more complex clients thereby offering joined up care provision. The current environment for funding from both grant providers and commissioners encourages collaborative working. The benefits of co-ordinating services and avoiding duplication, whilst maintaining the specialism and engagement that grassroots organisations achieve, makes for a strong case and the One to One Project should look to develop relationships further to widen the opportunities for partnership working and funding.

**Fundraising support** - The uncertainty of funding has been an ongoing concern for the One to One Project throughout its history, particularly after the withdrawal of statutory funding in 2011. The challenges that the One to One Project face are no different to those faced by many voluntary sector organisations both large and small across the UK, and the current environment of increased need and reduced funding only exacerbates the problems. However the reliance that the project has on just one or two large grants presents significant risk and it is vital that the project seeks to diversify its income streams. Whilst the project’s focus is to secure continuation funding to maintain the service provision, it should first develop a fundraising strategy that incorporates a broader mix of income, to reduce its reliance on one funding provider.

We also recommend that the project utilises the support available from organisations such as Voluntary Norfolk and the Norfolk Community Foundation, both of whom provide excellent support to small charities and could provide information and advice to benefit the organisation.
Case Study - Ferrylyn’s Story

Ferrylyn is 42 years old and has experienced mental ill health for a number of years.

I have experienced episodes of schizophrenia at different points in my life, and although I am in contact with NHS services I wanted to have someone to listen to me who wasn’t my GP or support worker.

I found out about the One to One project and was fortunate to receive about 12 weeks of therapy. My therapist listened to me and didn’t make me feel stupid, and more importantly they didn’t reinforce the negative beliefs that exist around schizophrenia. Because they were not judgemental it gave me the strength to get over it too, to put aside the negative connotations that exist around schizophrenia and allowed me to get on with my life.

I also attended the Group Work for loss which helped me deal with the loss of loved ones. I found it good being in a group and listening to the experiences of others, I didn’t feel alone and found ways to cope with my loss.

When I finished the loss group I felt that I still needed further support, particularly around my anxiety of being out in the community. I really struggled going out on my own and the team at One to One suggested I took part in the mentoring programme. It gave me such a lot of confidence; my mentor was able to witness at first hand the issues I faced on a daily basis and helped me find ways to deal with them. It was a professional service but it was done in such a way that it felt like spending time with a friend who wanted the best for me.

The One to One project is such an invaluable service, it has helped me so much and I don’t think there is anything else like it in the area.

Thank you, I felt secure and safe which for me was important. I trusted the service.

To my Volunteer and the One to One Team, thank you for helping me find the way out of the darkness.
### What have been the greatest benefits of the One to One Project?

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Details</th>
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<tbody>
<tr>
<td>Someone's physical and mental health is so important and being able to afford to see a counsellor can be a massive barrier for people gaining the support they need to help them manage their wellbeing. One to One provides services that do not demand a fee for the support someone receives only a donation depending on each person’s circumstances. One to One offers up to a year of counselling which is very rare and much needed within the West Norfolk Community, the outreach work is very needed and utilised. One to One also offers a very individual service the service and clients are invited to be very much part of choosing the service which suits their need most. Client choice itself is very empowering</td>
<td>Easy to understand referral criteria, quick response and clarity of whether service available and how quickly. Opportune to refer families for 1-1 or group sessions depending on their individual need. Patients have found the counselling to be greatly effective, with approachable, kind and intuitive counsellors. They found accessing the counselling acceptable-the waiting time did not seem to matter because they felt adequately listened to and informed. Overall excellent without exception. I am unable to comment on question 4 as I do not know how many of the carer’s I have referred have been seen and for how long as I do not stay involved with the carer indefinitely. One of the main benefits I feel the One to One Project has is that it supports an individual for up to a year, whereas most counselling services are limited to a certain amount of weeks. I feel that this is unhelpful to the individual and can leave them in a vulnerable emotional position. Also private counselling is very expensive which many people are unable to financially commit to long term. The project offers a space for adults to explore their lives in confidence via access to a free service - my referrals would not have been able to pay for private counselling. I am kept up to date with the group work available and I know I can be confident in recommending One to One. Their existence is in itself a huge benefit to the community. Being available on a regular basis over an extended period rather than just providing support for 5 or 6 sessions. Patients seeing someone for support. The one to one service enabled some of the parents we work with access counselling in an environment that they were comfortable in. The quality of service provided to individuals using their service, and professionals referring in. - The confidence and reassurance from a refer perspective, that people referred will get the upmost care and support when with the One to One Project. - The kind and helpful nature of the staff who work there. No matter when I contact them, with whatever question I may have, I am always greeted with positivity and genuineness, and I have no doubt that this is the same for individuals using the service. - The group workshops are fantastic, and when referring, if a group does not have enough people in it to run, a service is still offered on a individual basis which is excellent. - Training days are also offered, that are open to a wide range of people wanting to attend, which I think is fantastic. I have also attended some of these, and they are always informative and delivered by experienced facilitators. Easy of access, NOT time limited to 6 sessions. Experienced and ‘down to earth’ staff. excellent counselling. good communication.</td>
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![One to One Project Logo](image-url)
There was counselling for a year without charge. I had to wait but at the time there was nothing and no one else I trusted. I was able to move on from the place I had been for 5 years after being told by my doctor that counselling would cause me a lot of problems. I was sexually abused as a child and trying to come to terms and sort out why I was feeling so bad. I was in a group of people who had suffered the same fate and one of them had been to the 121 and had a good experience so I took the courage to try it. Everyone else had let me down until I went to the 121

<table>
<thead>
<tr>
<th>Easy access, quick assessments and reportedly very good therapy</th>
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<tbody>
<tr>
<td>They are very professional and always willing to help, offering a very good service. We had a client who was hard to engage and One to One went above and beyond to work with them</td>
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The long term mentoring support that One-to-One offer people is a unique service that has benefited my patients

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<tr>
<th>Clients that I have referred to the One to One Project have benefited from the non-time limited counselling service, which on occasions has been available locally. Many of my referred clients have benefited from the various courses - particularly when run locally in Swaffham. This is a very well run, well respected professional service</th>
</tr>
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<tbody>
<tr>
<td>Seeing the outcome of parents benefitting and therefore their children benefitting from a less stressed environment at home. Seeing the parent becoming more confident and outgoing</td>
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</table>

Long term counselling

| Allowing us to place positive requirements on offenders which allows them to address the root cause of their behaviour |

Have you any suggestions for how the project could be improved?

<table>
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<tr>
<th>A young people's counselling service is very much needed with in West Norfolk as other provisions are limited or non-existent. Possibly a support group for people especially the more mature generation to help address loneliness this might be a well-attended outreach project</th>
</tr>
</thead>
<tbody>
<tr>
<td>No good local service with friendly approach and quick referral processes</td>
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<tr>
<td>Difficult to say because all feedback has been positive. One mention was made of perhaps your group seminars, e.g. on anger management, being more frequent perhaps? But the quality of help has been brilliant</td>
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<tr>
<td>As someone who works for the local authority it would be helpful to be kept up to date with group work on offer, other courses on offer and if there is a waiting list and how long it is likely to be before an individual is seen (I appreciate that the One to One Project is unable to comment on a specific individual due to confidentiality)</td>
</tr>
<tr>
<td>More and consistent funding.</td>
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<tr>
<td>If it was expanded so that more people could benefit.</td>
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<tr>
<td>Shorter waiting times and easier access</td>
</tr>
<tr>
<td>Shorter waiting time!</td>
</tr>
<tr>
<td>I can honestly say I can’t think of anything that the Project could improve on, other than having more resource to be able to support and reach out to more people. Again, I have referred a few people for the mentoring programme which I think is a truly amazing part of the One to One Project, and I know more volunteers for this would be great, as again it could reach out to more people. I do not believe enough people know about this amazing organisation. Not only do I rave about it to colleagues, but I also tell friends and family how valuable the organisation is. I wonder whether it would be helpful for information to be given to the wider NHS mental health services on the criteria and set up of the One to One Project, as I wonder whether sometimes there is a lack of understanding from colleagues in other mental health teams in the NHS regarding what the One to One Project offers. Sadly, I think at times this leads clinicians to refer individuals who may not be ready to engage with this organisation and what they offer, and then leading to people becoming lost in the wider mental health service, which is potentially a real shame, and something I know the Project try hard to avoid - which is great</td>
</tr>
</tbody>
</table>
It would be good if they had counsellors who dealt with childhood sex abuse as I now go to Norwich each week to Sue Lamberts as the specialise, but if it hadn’t been for the 121 I wouldn’t have come as far as I have and have the courage to seek the help I am getting now.

It might be helpful to form closer links between services in the future.

More counsellors needed to cut waiting times.

If the service had more funding and could provide even more support with shorter wait times that would be great!

I would like to suggest more group work in Swaffham - courses/ one-off workshops on stress control, confidence building, managing panic attacks, managing low mood.

Evening sessions for clients that work. Better building, not on an industrial site.

**In your opinion, what do you think it would be like if the One to One Project was not available?**

It would have a devastating impact on the local community. The One to One project has been offering its services for over two decades and is a huge referral resource for local NHS wellbeing services. The people who are trying to manage their wellbeing and mental health would lose a valuable resource which is not and would not be replaced by other statutory services. The one to One waiting list demonstrates its need over and over.

There is a definite lack of easy to access services for families and young people with in the area. Despite improved NHS wellbeing services we would notice the GAP if this service was not around to access. For some of our families their needs are immediate and long term - this is something that the one to one project offers unlike other services.

I think that West Norfolk would be considerably lacking - the patients who have benefited from one-to-one would not be treated and would be on long waiting lists, taking spaces on wellbeing list. It would definitely impact badly on GPs, having such an excellent resource no longer available.

As many people I work with feel they have very few people to talk to and do not want to discuss the impact of their caring role on the cared for, it would leave many carer's reliant on their GP, wellbeing which is time limited or private counselling which is very expensive.

Tragic - there is nothing else like it and when asked, regularly, to advise on services in available, it becomes very apparent how much we need the project.

Many people would be left to fend for themselves as there are very few organisations/charities that can support in the manner that One to One have provided.

Even worse to get patients seen and supported.

It is a real concern as there is so little provision that deals with Mental Health.

Heart sink question....... I genuinely dread to even think about this concept. I work in a service where we can provide ‘brief’ counselling, and for many people this is enough. However, some people need longer without the constraints of limitations of sessions and the NHS. I often carefully consider who to recommend the One to One project to; namely that they are such an exquisite, but finite resource, that I never want to swamp them with referrals. To lose this organisation would be tragic for the people it reaches out to, and very sad from my perspective working within mental health services in West Norfolk.

There would be a long wait for limited services, difficulty in accessing counselling and support so an increase of serious mental health conditions. People would be put off accessing help.

Devastating, really bad as I would be in big trouble if I hadn’t manage to trust them.

Terrible! I have heard from many patients about the great service they have had from the One to One Project and I feel it would be a great shame to those living with mental health difficulties if it were removed.
In general, mental health provision in the area is poor, so it would be another blow to the clients who have to wait even longer.

There would be a gap in service provision for a vulnerable group of patients.

Disaster!

It would leave people struggling to cope with many and varied issues.

While it wouldn’t stop our work, it does make a difference to the offender by allowing them to address the core issues leading to their behaviour.

It would leave us with less options for our families who need counselling. I am not sure what the waiting list is like now via GP.

**Do you have any measurable or anecdotal evidence of the impact of the project?**

I have volunteered for the project for many years now as well as refereeing into the service I have been very privileged to see lots of evidence of the impact of the project but due to ethical confidentiality sadly I don’t feel able to share some very delicate outcomes which is such a pity but is the nature of the work that can be so difficult that we are unable to champion the work we do as others services might.

Unfortunately not at this time. Often once we have referred our families over to One to One the families leave our services to get the support from One to One.

Only that every patient I have referred across has had a positive and effective outcome from the counselling. It has made a large difference in their lives.

Only in terms of my own clients’ progress and gratitude to the project when I was a volunteer- there was huge movement and life improvement by their own admission.

Purely qualitative.......I have had feedback from clients I have worked with who have had nothing but praise for their support received when working with the One to One Project. - I have witnessed myself how both Chris and Hannah talk with people being referred and calling to self-refer, and they are without fail, always kind, caring, and considerate to who they are talking with. I have also had discussions myself with staff who work there, who are always welcoming and genuine, and at the heart of everything they do is person centred. I have attended an AGM meeting in the past, which again, was nothing but positive, and everyone there was so committed to making the One to One Project work for people seeking support. I can honestly say it was an absolute pleasure to be present, and hear all of the hard work people were putting in to keep the project going. Totally heart-warming.

I myself have used the service, as well as some of the families I work with. It enabled be to overcome a time of anxiety and mild depression, without it I would have been signed off work sick for some time, thank you.

There is a big group of women in the same position as I am and a lot of them have and are going through the 121 for help in more ways than one. I also went on the group course which helped me meet people and gave me a lot of information tools and help.

Anecdotal evidence from many patients (at least 10) who have accessed the service and found it infinitely better than the local Wellbeing service.

Our clients have told us how much they have achieved through working with the One to One Project, regaining their confidence and being able to move on with their lives.

Patients have reported to me how valuable they have found the support of the counsellors and mentors.

Yes, our family workers record outcomes of families they have referred to the One to One Project.

I have spoken to people that have had counselling from the one to one project and they have found it beneficial. I haven’t heard anything negative.

There has been no breaches of the injunction since it was obtained in October 2015.
How does this service complement existing health and social care provision?

It offers the longevity of support for service users that other organisations are not able to sustain or offer. Many of the issues families have do not fit within a 6 week “fix it box”. So one to one can complement provisions already offered to families by offering the long term group activities alongside targeted 1-1 support.

Excellent alternative to wellbeing service

I am unable to remain involved with an individual once I have completed a review. I am not a trained counsellor, however it is very helpful to be able to offer a referral to the One to One Project where the person will be supported for up to a year

This is a necessary outlet for referrals

Some of the families we worked with were able to manage their own issues at a time when their children were not with them, giving them a time when they could think about themselves

The NHS has a waiting list and only supports for a short time. One to One can be the long term support that can make the difference

Limited availability of all services - every little helps

This service offers something unique in my opinion, but something that does compliment the wider health and social care arena, but I think this could be enhanced further with more recognition and understanding from the wider health and social care provision as to what the project offers. In my opinion the One to One Project help to Bridge a gap between the constraints and limitations of the NHS and what it can offer people. The Project I know have their targets which I am sure they need to meet, but they still maintain person centred care at the forefront, and are able to offer what individuals need, and can be more flexible with this, which in the world of mental health is paramount

It provides additional support which works alongside other professional input to families. It offers a unique service, clients can access counselling for up to a year, a huge and much needed benefit, people need time to cope with their issues, they can’t be resolved in 6 weeks. The group work is really beneficial and adds another dimension of support. Without the One to One Project there would be a gap in provision for families in West Norfolk as the statutory services cannot cope with the demand and offer very little in comparison

I am not sure what the NHS does to help people I haven’t had the best experience with in the NHS it is the 121 that helped me

I feel that the mental health work carried out by the One to One Project nicely complements the work that our service does with people with physical health difficulties. There is often overlap between physical and mental health, and my experience is that patients find it easy to work in parallel with our service and yours

It works well as they are the only reliable counselling service in the area

There are limitations in the services provided by mental health and wellbeing (IAPT) in this area and One-to-One provides and invaluable contribution

I don’t know of another service that offers a free, non-time limited counselling service which is most valuable to many of my clients for whom the Wellbeing Service’s CBT preference, as well as being time limited service is not the appropriate pathway

It complements it well and can prevent situations arising where further services in Health and Social Care may be called upon

It is very much needed as so many services are being cut

There isn’t any other scheme out there which offers this service
<table>
<thead>
<tr>
<th>Have you any other comments about the One to One Project?</th>
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<tbody>
<tr>
<td>Very grateful for their excellent work and hope they continue</td>
</tr>
<tr>
<td>I hope the project will continue</td>
</tr>
<tr>
<td>I have the utmost respect for its ethos and practice. I cannot express strongly enough how much we need this service to help with a growing patient base</td>
</tr>
<tr>
<td>It would be a shame to lose something that has been so supporting of the community</td>
</tr>
<tr>
<td>Long may the One to One Project continue. The people working there are an inspiration to me, as they are so enthusiastic and dedicated to make this service work for the people it supports</td>
</tr>
<tr>
<td>This is a really good group of lovely caring people who have restored my faith in human nature. Everyone that I have been in contact with the 121 are brilliant. We are very lucky we have such a system in our area and it will be criminal if this is let to go under. I am not sure if there is such a group of people like this in any other part of the country</td>
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<tr>
<td>Please carry on the great work!</td>
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<tr>
<td>West Norfolk has a shortage of services. One to One Project works well and its work is improving client’s lives, so I hope it continues</td>
</tr>
<tr>
<td>I hope it continues!</td>
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<tr>
<td>Wonderful, helpful, approachable, flexible, professional service</td>
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<tr>
<td>I welcome visitors to our Children’s Centre and book our rooms for various agencies to use including The One to One Project. There is good communication between us and the Project regarding booking rooms and ensuring we settle with best time for us, the Project volunteer and most importantly the attendee to visit. The project always let me know the situation the room bookings and they always keep me informed of any changes. They are such a friendly team also. They have made a difference to families with their choice in volunteers who are such lovely and professional people. It is a pleasure to be working such a good team</td>
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<tr>
<td>Open, Friendly and caring staff</td>
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<tr>
<td>Excellent work!</td>
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### In your opinion, what have been the successes of the project?

<table>
<thead>
<tr>
<th>Success</th>
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<tbody>
<tr>
<td>Enabling counsellors to qualify and gain experience</td>
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<tr>
<td>Determination to keep the service available to local people</td>
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<table>
<thead>
<tr>
<th>Success</th>
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<tbody>
<tr>
<td>The project delivers free long term mental health services to the community, which if often over looked, I have seen with my own clients the value it brings to people's lives</td>
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<tr>
<th>Success</th>
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<td>As a newly trained mentor, I would say one of the major successes of the project is the excellent training and support provided to the project's volunteers. The training provided really is exemplary, and the ongoing support and supervision ensures that all the volunteers have the confidence to deliver a really excellent service. It is also clear that the project has enabled many people to turn their lives around, and to achieve their goals</td>
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<table>
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<tr>
<th>Success</th>
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<tr>
<td>The Project is able to offer long term free counselling (donation) to vulnerable people in the local community. If this service were not available then local people would not necessarily be able to access counselling. The Project offers an enormous level of support to its volunteer counsellors and mentors. The Manager makes herself available if there is a need to discuss client issues. There is a strong emphasis on supervision. Quality ongoing training is offered on some Saturdays. Group work is tailored to the individual needs of the participants. Group numbers are kept small (usually up to 12) enabling trust to become established quite quickly. Group members support one another</td>
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<tr>
<th>Success</th>
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<tr>
<td>The project offers up to a year of counselling for adults experiencing mental health difficulties, something that is so desperately needed and yet extremely difficult to source. One to One provides a safe environment for clients to come each week, knowing that their counsellor will be there for them. We have many clients who are on very low, or no income and therefore cannot afford to pay for their counselling, many of them will give what little they can. There have been many clients who have managed to turn their lives around during their counselling; clients who have struggled so badly with OCD that they can barely leave the house, becoming able to live their lives without the constant interruption of their unwanted behaviours. Clients struggling with a mental health label coming to terms with the label and embracing their lives again. The project is invaluable to so many</td>
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<tr>
<th>Success</th>
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<tr>
<td>It's availability</td>
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<tr>
<th>Success</th>
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<tbody>
<tr>
<td>Professional, consistent, long and short term support for adults affected by mental health issues. The project is highly regarded and well known as offering excellent service. It also offers excellent support and clear guidelines and boundaries to its volunteers</td>
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<tr>
<th>Success</th>
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<tbody>
<tr>
<td>Providing an excellent community service - very few agencies are able to offer such a long time period of counselling, and this is very necessary for many clients. Responding well to training needs and requests</td>
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<tr>
<th>Success</th>
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<tr>
<td>Increasing the number and variety of group work offered</td>
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<tr>
<td>I am fairly new to the project, working as a counsellor. I continue to work for other charities which are time limited offering up to 12 sessions working with a client. One to One are able to offer longer term counselling for up to one year, if needed by the client. This allows for more in depth work and to work with those clients experiencing mental health issues and distress. Clients are offered a rare opportunity at the One to One project where they can work with a counsellor for an extended period (comparatively) enabling the possibility of lasting change. One to One also enable a client base which may be unsuitable for short term work due to complex issues. The majority of counselling services are offering short term work only and One to One are able to provide a service to those individuals with greater need. I believe the project is quite unique in delivering these vital services to the community</td>
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<tr>
<td>I am currently undertaking my full time Degree in Humanistic Counselling Practice at The University of Nottingham - I am extremely pleased to shortly begin my Placement with One2One. I have been particularly impressed with the professionalism shown me and the inclusivity demonstrated by inviting me to participate on various CPD Workshops and to attend an important function at The Town Hall. I sense a conducive, transparent and friendly environment at One2One which is key for any business</td>
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</table>
Being able to provide counselling for up to one year, this is rare in the current climate and essential for a lot of people experiencing difficulties. 6 -12 sessions is rarely enough which unfortunately is a frequent offering these days. Provision of excellent continuing professional development at a reasonable cost

Enabling people to live better lives. Clients have an opportunity for longer term counselling, and excellent group work, this is beneficial to them, their families and the wider community. The project makes every piece of resource deliver results for clients, from making every piece of room work hard (for example they now use the rooms in the evenings for counselling also), to making the pennies go further, by good strategic planning and well managed services. For me personally it was part of my journey to my degree in counselling, the placement was supportive and enabling. Without such a robust placement I don’t think I would be the counsellor I am today. The mentoring and outreach work is a shining example of best practice. Service user involvement is provocatively promoted. I was a former mental health service user and the project took me on as a counsellor during my training. Not only that support was always available

To enable people to gain experiences and opportunities through the patience and encouragement of the mentors and their supervisors. Encourages those who find life hard through mental health problems to give knowledge and support to better themselves and live a more fulfilled life. The project embraces confidence and self-motivation for the clients which enables the project to progress and evolve

In your opinion, what have been the challenges of the project?

- Funding, funding and funding
  - Becoming known to potential clients, referrers and funders, as a very small and local charity

- Trying to meet the needs of so many people who are referred or self - refer to the project

- Challenges have come about because of the fact that therapeutic care is significantly under-funded, and there are such long waiting lists for help. This has meant that some potential clients have been put off by long waiting times. The fact that mental health problems are still stigmatised to some extent means that the service may not be as widely supported/recognised as we would like

- The building we are in is not ideal. There is noise from industrial units around us. Ongoing funding issues. Ensuring that we can access additional funding for things like rent which is not covered by the Lottery funding. Ensuring that we have sufficient volunteers for the number of people waiting for our services. Ensuring we have sufficient trustees

- The local need is at times very difficult to accept clients are referred by mental health workers, GP’s and other organisations including Ingeus. At times we have so many referrals that the waiting list can become too long, we try as hard as we can to offer something if it is useful to clients; mentoring or taking part in an appropriate group workshop can benefit many clients

- Funding - with sufficient funding this project could offer more of their first class service to more people- there is always a waiting list as so much more of this service is needed in the community

Expanding the services

- As I am fairly new to the project, I don’t feel I can answer this effectively. However, funding for One to One project and its work with the community and client base is essential to enable the project to deliver these much needed services

- As with all charities, I am aware that funding is key and raising awareness for the cause

- Obtaining the funding to continue providing an excellent service Introducing some client payments

- The location presents some challenges. Funding always seems to be something that occupies much of the attention of the management. I think sometimes some of the bigger politically favoured mental health organisations can overshadow the project, I’m not sure that is good for clients, it can give the illusion that maybe the project is lower on the list, and in some respects when it comes to attention, possibly funding and resources, it is, when it comes to the quality of services clients receive it certainty is not. If I had a family member needing support I know the One To one project is where i would want them to go
The project is a valuable resource and it has a high success rate in helping people move on with their lives and gain confidence. But lack of funding means there are so many people that need the project for support and will not be able to access such a service that is high demand

In your opinion, are there elements of the existing service(s) that could be improved?

I think more varied and greater availability (in number as well as area covered) of both group work and counselling would be very beneficial. More local support in smaller community centres

If possible, to reduce waiting times for clients by recruiting more volunteers and to have a streamlined referral system. Also, further outreach when possible

More effective publicity for the services we offer particularly group work

I feel that at times our workshops are used as a “dumping ground” for Ingeous or Chatterton House when they don’t know what to offer someone. This can result in a client that is not engaged and either doesn’t materialise or doesn’t complete the workshop sessions. This is not really something that we have control over

Extend the out of office hours offering for services

The building facilities could be improved. The heating and ventilation is poor, and the outside noise can be disturbing to clients

I have found the counselling service to be well run and developed. The service is client centred and a focused and welcoming environment for both the client and myself, as a counsellor. I have been impressed with the well thought out policies and procedures and excellent CPD training offered for counsellors. I have not identified any elements that I feel require improvement

It’s been a while since was there, but to be honest it has always been run in a way that maximizes its benefits to the local community it serves

More funding would mean more trained mentors and so the waiting list for the project would be reduced

From your experience of working on the project, have you identified opportunities to develop new services offered by the One to One project?

Developing a service for businesses, that could bring in income to the project. Renting out rooms to other groups or organisations, again to generate an income stream. Collaborating with other local charities, to pool resources and knowledge, and also reach more people - for example specific group work topics, or specific client groups

Many of the opportunities are already being developed, such as an evening service

No specific suggestions yet, as I have not started working with a client. I do feel, however, that it would be great to have another branch of One to One in South Norfolk, (Attleborough/Diss/Long Stratton area) where I live, however! It is a service that I am sure would be extremely valuable in this area. I think there is definitely potential to expand the model of exemplary service that One to One provides elsewhere

An idea has evolved recently for an ongoing support group for those people on the waiting list which I feel is a good one. I wonder too if it would be possible to offer counselling or mentoring to those local people where English is a second language and work with Klars in terms of referrals

We do have some vulnerable counselling clients who, when their counselling has come to an end, would benefit from a safe place to meet with others each week. A drop in, but limited to a specific group for maybe a period of 12 weeks at a time. This could also be run out for those with learning disabilities

Not personally but that is down to personal commitments

No, I think they cover all the essential services needed: counselling, group work, mentoring, training, and supervision
I believe that with the right level of funding for the project, it will be able to assess the needs of the community and its clients and be able to meet those needs. I personally haven’t identified these needs at this point, due to being new to the project itself.

Not really. Just making the availability of low cost long term counselling more widely available to people generally is an important focus.

It’s been a while since I was at the project, they have always been good at reflective practice, developing services to meet the needs of their clients. One possibility is to rent rooms to Private Practice Therapists.

The project has excellent training and there are new services opening up all the time to support the clients. The supervisors give the mentors every opportunity to offer any new services to the clients, which in turn is a learning opportunity for the mentors themselves.

In your experience of working on the project, do you think there are still some areas where people experiencing long term mental ill health could be better supported? This could be something else that the One to One Project could do or it could be an identified gap in provision from existing statutory health and social care systems.

It can be extremely difficult to manage waiting times, both for the Project and for clients. Opportunities to be supported while waiting, i.e. a ‘holding’ group of facilitated peer support, to help clients cope with the difficulties of waiting for the service.

Yes I think there is a massive gap from existing systems of which one to one fills that gap, however as that gap is getting bigger it is vital that projects like one to one are available. I think personally that therapy should be available at every GP surgery and every school even short term, which may help elevate many of the pressures on existing services.

Once again, as I am not yet delivering the service this is difficult to answer, however I am well aware that mental health is a really big, and growing issue. I am certain that the One to One model could work in other areas, and I feel that further education...perhaps by delivering more outreach in schools, colleges and workplaces, would be a great way to engage people in the possibilities of the One to One project and to garner support and more volunteers. Outreach would also be a way to highlight the issues of discrimination and stigma faced by mental health sufferers.

I wonder if there is a way of working with existing statutory organisations to better support those people with long term mental health problems, a kind of co-ordinated working whilst still retaining our own identity as an organisation.

The long waiting list is testament to the overall underfunding in this area of health. All things are possible if the resource is forthcoming.

There is a need for better support in all areas - One to One is a small boat in an overwhelming ocean.

If there is any way to reduce waiting times. Most agencies offering these services have a long waiting list, and clients can find this discouraging and frustrating.

As previously stated, the One to One project is able to support clients with long term and complex mental health issues which is not common in many community services including the NHS/CAMHS/IAPT. This leaves vulnerable people in the community without support needed. One to One are offering a service to clients to bridge the gap in provision for longer term working.

I think that the project has found a gap in services and would do well to continue meeting the many needs and demands in this area as it does already.

I think Norfolk, Like many other areas lacks services for clients struggling with Personality Disorders. Whilst challenging, this group of people can benefit so much from services tailored for them. It would, I guess, be a big piece of work.

People suffering mental health have individualised issues and we as mentors are the first stage to helping people gain confidence and improve their lives. As the weeks pass there may be ‘issues’ that we as mentors are not qualified to deal with so the supervisors discuss with the mentor any other service that can be provided or another direction that would benefit the client.
The One to One Project is fortunate to have the support of volunteers like yourself. Please tell us the main reasons which influenced your decision to volunteer at the One to One Project

Local to me  Adult clients and variety of clientele  Screening process for volunteers, means reassuringly high standards  Good support and involvement from staff towards volunteers  Group supervision provided

I started by having the great privilege of being granted a placement for my studies, and have continued even after finishing as the project is so vital and I see with my own eyes what is gives people and what a difference you can make to people’s lives, which is the main motivation to volunteer

I needed a placement to gain my counselling qualifications  Since qualifying I realise how supportive the project has been especially in those early days as I took my first tentative steps as a trainee counsellor

Quality of the service it provides to its clients. The Project starts with its clients and everything else is informed by that. That is not always the case at other organisations. The project offers long term counselling, something that I truly believe in (it also has a robust evidence base), and this was important to me. The opportunities for CPD, development and quality supervision

I am about to start an MA in Counselling at UEA, and am very interested in pursuing a career as a counsellor, and I already volunteer for the Samaritans, so mentoring at One to One is a good way for me to gain experience building those therapeutic relationships. I feel that the project is extremely well-run and successful, and has a very good reputation, so gaining experience here will be extremely beneficial to me. I also feel strongly that helping people in their community is an excellent way to aid recovery with support, and I would love to see more projects like this set up across the county

The One to One Project had a really welcoming feel to it. I felt at ease very quickly. I have worked in many organisations in different roles and the level of support at 1 to 1 is outstanding. They were so encouraging when I first started. I wanted to do long term counselling which is why I went for an interview. I had just qualified as a counsellor at the time. I have learnt so much too from the group supervision offered by 1 to 1

Originally I was looking for a placement during my diploma year of counselling degree, however I have stayed for 4 years! One to One offers therapy for up to a year, which I believe is invaluable to some clients, it also isn’t directed at a specific group, it is for all over 18 years

It is a brilliant project that offers a badly needed service  It is committed to its beliefs and ethics  It provides a truly caring environment for all

That it works with mental health  Its professional and clear codes of practice  Excellent support  Long term counselling

It is a highly professional organization with excellent support and training for volunteers and a very caring attitude toward its users. I feel well supported and respected by admin staff as well as with trainings and supervision offered by the project. Prospective uses are thoroughly and professionally assessed prior to being allocated to volunteer counsellors. There is a good and prompt communication system by the project, supporting both counsellor and service users. As a volunteer counsellor, good professional boundaries between myself and my clients are supported by the project

The One to One Project’s ethos. Volunteers are offered regular clinical and management supervision. The excellent training programme

My first point of contact with the project was Hannah. I was impressed with the careful recruitment procedure and how the project was run and maintained. I was attracted to working with clients over a longer term to develop my practice and experience. However, the environment of One to One is supportive and inclusive and I feel valued as an individual in my work for the project. I am committed to the project as it is a positive experience and environment to work in, and it is likely I will continue to work for many years to support the project

Many years ago, I was once a client of One2One. As the years have passed, I retired from previous employment after 25 years and returned to learning to begin a new career. I am delighted to be joining One to One, a local charity in my hometown who do fantastic work!

I needed a placement to gain my counselling qualifications  Since qualifying I realise how supportive the project has been especially in those early days as I took my first tentative steps as a trainee counsellor
Quality of the service it provides to its clients. The Project starts with its clients and everything else is informed by that. That is not always the case at other organisations. The project offers long term counselling, something that I truly believe in (it also has a robust evidence base), and this was important to me. The opportunities for CPD, development and quality supervision

I volunteered because I wanted to make a difference to someone as I had suffered mental ill health myself many years ago. I worked as carer for many years and I have a lot of patience and also I can empathise with someone who is going through ‘this time’ in their life. I am a good listener and I feel I have a lot to offer. The project is a worthwhile service helping countless people turn their lives around and I am proud to be part of such a team

**Is there anything more that could be done to improve your experience as a volunteer? Please give details**

For student counsellors to have their supervision financed… although I realise money is short

The only thing would be to have been able to start work sooner after finishing training, but I appreciate that because of the waiting lists that had built up, some people had decided not to continue waiting for the One to One project

I have always found it a very supportive team, so no not really

No; I volunteer at other service providers and one to one is without the best experience

One to One offers an excellent experience for its volunteers especially students

It was always good, and if I felt we had any issues the management would be willing to listen and support

No - I thoroughly enjoyed and valued my time working with the project

For me the project itself has already improved my life experiences, I have learned so much from the training and all the volunteers are really nice people

**Is there anything else you wish to feed back about your experience of working on the One to One Project?**

I have worked with four other charities offering mental health support, and only one (Samaritans) has anything approaching such solid and open support. I think this is something we may not realise without experiencing what it’s like to work as a counsellor with less support, and how essential it is to be able to provide good practice, keeping oneself and one’s clients safe

The training and ongoing support provided has just been amazing, and the experience of training with other enthusiastic and knowledgeable people has been so valuable

I feel proud to volunteer at the One to One Project, not only because I believe that the project does really good work and the team really care, but also because we are very well respected by many GP’s etc. Although friendly, One to One Project is also very professional

This project must remain as it is a life line for many within our community. We will be poorer without it and where will the existing service users then go?

The project is caring, professional, boundaries, friendly and we need one in every town

Excellent management and admin support. I think they have a really good balance in offering a first class service to the community and taking care of volunteers. I have worked in several other environments, and One to One stands out as the very best. (I am prepared to drive an hour each way.) This service is meeting a very real need in the area

I work as a counsellor for several other charities, but I have been particularly impressed by the work of the One to One project. It is a vital service for vulnerable adults experiencing emotional distress and mental health issues and bridges the gap in provision from services that are only able to offer short term interventions. The project is well managed with a friendly, focused atmosphere and I feel supported and valued. I really enjoy being a part of this project and thankful of the opportunity

Can’t wait to get started and support my local community and this amazing, little known charity