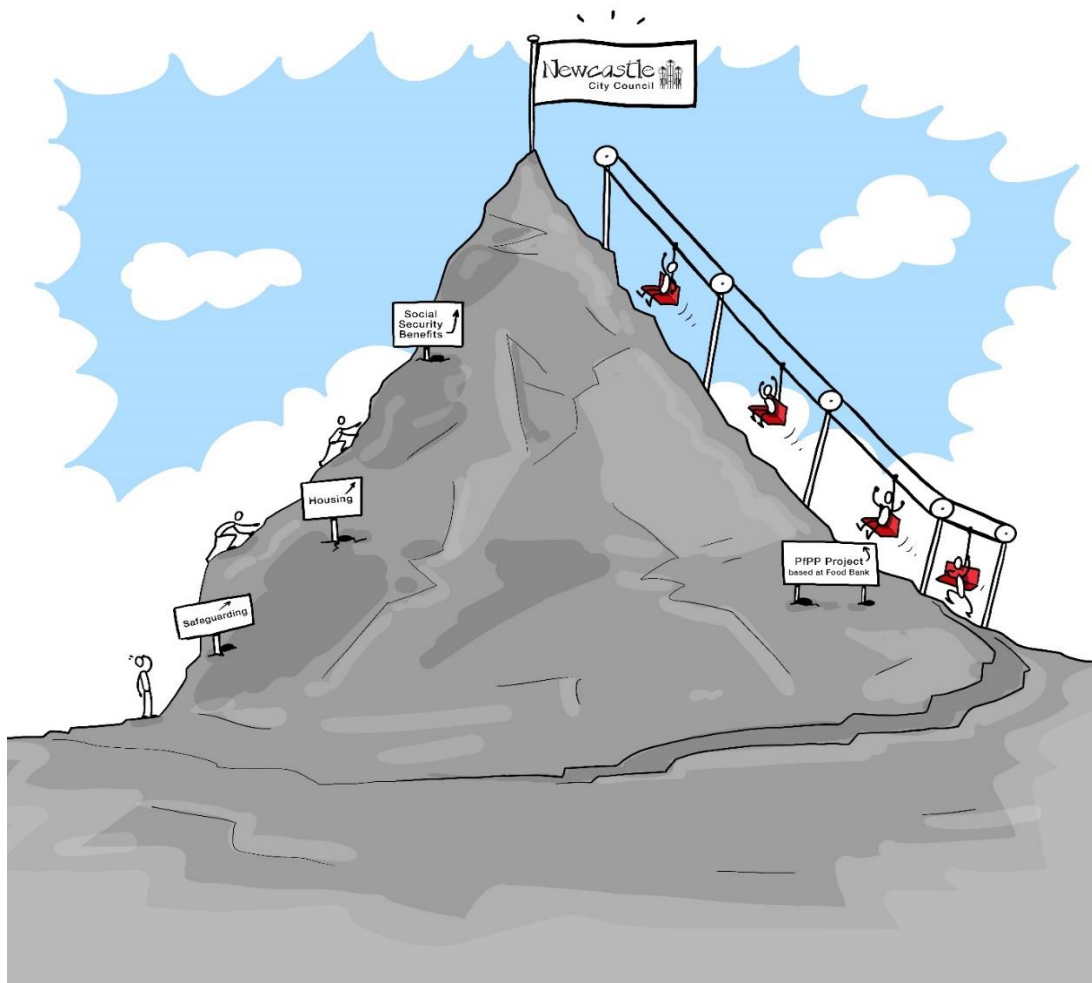


Evaluation of the 'Partnerships for People and Place' Project (May 2023)



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Executive Summary

Background

The Healthy Living Lab at Northumbria University was commissioned by Newcastle City Council to independently evaluate the Partnership for People and Places project (PfPP) a pilot scheme that aimed to:

- Improve awareness of safeguarding adult's procedures and financial inclusion and homelessness prevention responses amongst professionals, volunteers and communities
- Improve confidence amongst staff and volunteers on the processes and the types of interventions available
- To develop efficient systems, within the council and the food bank, to prevent risks escalating
- Improve professional relationships and communication between partners
- Gain a more meaningful understanding of the different circumstances that can lead to someone being in poverty
- Reduce the need for crisis interventions (e.g. food bank use)
- Explore an alternative model to deliver council services to individuals living in deprived communities
- Strengthen the alignment between the Westend Foodbank's 'Pathways' project and external the resilience building and safeguarding support

A household can broadly be defined as "experiencing household food insecurity if they cannot acquire an adequate quality of sufficient quantity of food in socially acceptable ways". The increase in the cost-of-living crisis has increased the number of households living in poverty. However, it is important to bear in mind that food insecurity is largely a symptom of low household income (Child Poverty Action Group, 2019), so the long-term solution must centre around increasing household finances, rather than providing crisis food aid.

The project is based within community organisations in the Elswick, Benwell and Scotswood wards in Newcastle's west end. The project was led by Newcastle City Council and the West End Food Bank and funded by the Department for Levelling Up Homes and Communities (DLUHC).

The brief

This independent research by the Healthy Living Lab, Northumbria University aimed to evaluate the efficacy of this project and to:

1. Understand how this newly co-designed system was operating
2. Assess whether the service was operating as intended and to purposively collect data on unintended outcomes
3. Collect case study data on individual service user's needs to identify potential early interventions, and collect case studies to assess individual outcomes in terms of engagement with PfPP
4. Analyse pre and post quantitative data across a number of individuals' outcomes
5. Triangulate findings to inform future service provision

What we did

Following consultation with staff from Newcastle City Council and the West End Food Bank, we agreed upon a mixed-methods programme design, with data to be collected over four stages of research. These stages included case studies of service users, secondary analyses of anonymous quantitative data, and use of Ripple Effects Mapping (REM) workshops to determine pathways to impact, impacts, to map both intended and unintended outcomes, and to inform decisions about what actions to keep doing and which actions to stop. The findings from all studies were fed back to the council and the food bank through the course of the project.

Main Findings

The key findings are that the PfPP project is a model for providing more effective support for people with complex needs. The person-centred focus of this project into the system, has resulted in an agile holistic service that has created the conditions to provide wrap around support to the individual; something that we call a 'cash first+' approach. Whilst the main driver of food insecurity is a lack of household income, this project provides, at the same time, a holistic approach to supporting service users across a range of issues (e.g. housing, mental health, money management etc). The physical presence of council staff and other organisations in the food bank helps break down barriers and the development of shared systems facilitates collaboration and partnership working across organisations and the council that ultimately benefit service users and prevents crises, which are more damaging and costly for the Council. Importantly, the findings show clear evidence that the project has resulted in a new system that enables the early identification of the causes of foodbank reliance and adult safeguarding concerns, significantly increases unclaimed benefits and thus maximises household income, improves service users' mental health, confidence and independence in terms of money management, and overall wellbeing, and thus supports some service users on a pathway to a more stable life and employment. Integral to this new system is effective partnerships built on trust, that are person-centred and have clear accountability, data monitoring, and governance structures. The REM workshops have provided stakeholders with a tool to map intended and unintended outcomes that can be utilised beyond the life of this evaluation.

Recommendations

Based on the positive findings of this project we highly recommend that funding for this project is continued, and that the council considers ways of extending this service blueprint to other organisations operating in areas of deprivation across the city.

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Introduction

A recent report by the Joseph Rowntree Foundation and the New Local, titled, 'Designing out the most severe forms of hardship in local areas' (2023), states that there is an urgent need for local action to support the increasing numbers of people affected by deepening poverty. The report further states that there is a need to 'design out' the most severe forms of hardship at the local level. Following consultation between Newcastle City Council and community organisations, the Council adopted a co-produced systems framework to address the most severe forms of hardship experienced by residents in the West End of Newcastle.

In 2020-21, Newcastle City Council saw a 42% increase in the number of safeguarding adults' concerns reported across the city. This was combined with a £5.6M increase in Your Homes Newcastle rent arrears, 51K food parcels provided to residents from the West End Food Bank, and a 47% increase in the number of people on Universal Credit. Research by the council's Safeguarding Adults and Active Inclusion Services found that residents in the poorest wards disproportionately experiencing inequalities in health and finance, compared to other areas of the city and that there is a strong correlation between areas of high deprivation and the number of safeguarding alerts raised. This led to a number of recommendations, including improving safeguarding procedures amongst a wider group of professionals, volunteers and communities; improving awareness of financial inclusion support eg Money Matters debt advice to a wider group, both within and external to the council; and improving links between teams both within council and community partners.

The Partnerships for People and Place (PfPP) project is a 12-month project that seeks to better understand and break the link between poverty and safeguarding through intentional co-design. The project ran from April 2022 to April 2023 and included a number of stakeholders, but the key partners are Newcastle City Council, the West End Food Bank, working alongside city partnerships and community organisations in Elswick, Benwell and Scotswood wards. The aim of the project was to explore new ways of working that will enable the team to identify safeguarding and poverty risks and to ensure efficient pathways are in place to provide the 'right' support at the earliest possible stage. It should be noted that the aforementioned wards are some of the most deprived wards in Newcastle upon Tyne, and a key focus for the Levelling Up agenda. Whilst these wards are areas of high level of multiple deprivation, they also have a number of assets, such as diverse and active communities supported by excellent community organisations.

By collaborating with the West End Food Bank, a trusted community organisation, Newcastle City Council aimed to improve its systems and ways of working, both internally and externally, to provide coherent and early intervention services, that support vulnerable groups. This project will, hopefully, provide an innovative co-designed service framework alongside developing new ways of partnership working. This project was innovative in terms of embedding council employees, and other agencies and organisation, to work in collaborative ways at the actual food bank. In other words, taking services to people in their local communities.

The project was funded by the Department for Levelling Up, Housing and Communities, and involved a number of different government departments including the DWP, Cabinet Office, OHIS, and NHSE in addition to trusted community organisations. The project was an exploratory project involving safeguarding adults professionals, Active Inclusion professionals, and the West End Food Bank to test new ways of working in a discreet part of Newcastle. The project had the following aims, to:

- improve awareness of safeguarding adult's procedures and financial inclusion and homelessness prevention responses amongst professionals, volunteers and communities-
- Improve confidence amongst staff and volunteers on the processes and the types of interventions available
- To develop efficient systems, within the council and the food bank, to prevent risks escalating-
- Improve professional relationships and communication between partners
- Gain a more meaningful understanding of the different circumstances that can lead to someone being in poverty-
- Reduce the need for crisis interventions (e.g. food bank use)
- Explore an alternative model to deliver council services to individuals living in deprived communities-
- strengthen the alignment between the Westend Foodbank's 'Pathways' project and external the resilience building and safeguarding support

This project was co-designed and co-developed by a number of partners, both within and external to Newcastle City Council. Figure 1 provides a visual representation of the agreed service framework and how the West End Foodbank acts as the 'front door' for many vulnerable residents. The Project Group is responsible for the governance of the project and meets weekly to check on progress against the project's action plan, resolve risks and issues, and to provide regular reports to Council's Health Scrutiny Committee, Portfolio Holder for Adult Social Care and Integrated Services' Directorate Leadership Team the Department for Levelling Up, Housing and Communities and the Project's Reference Group.

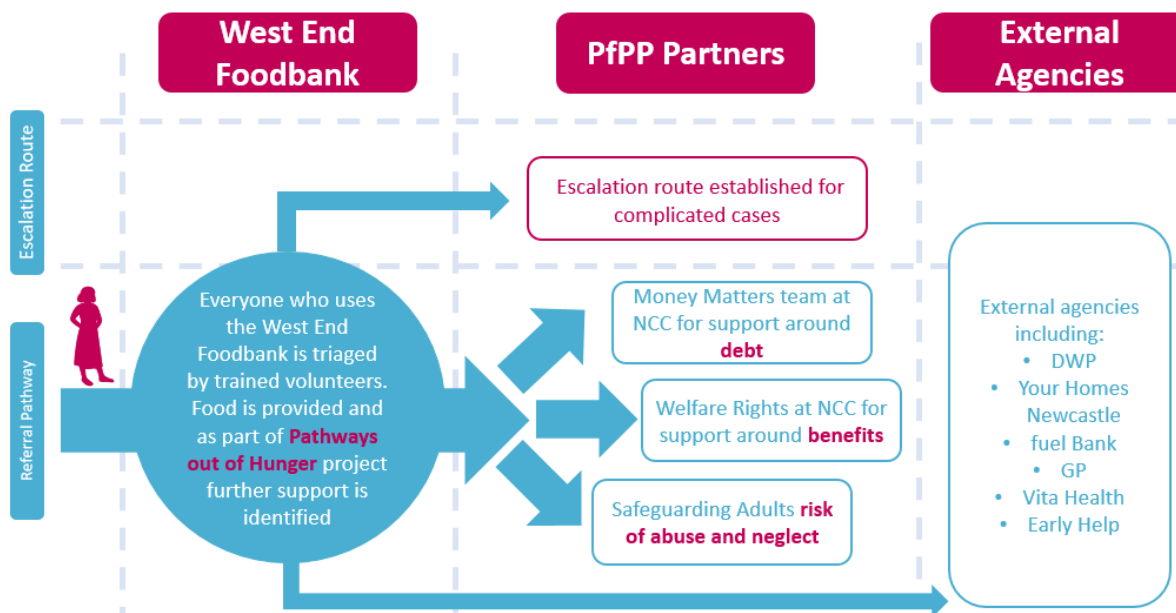


Figure 1: Referral Pathways for the PfPP Project

Project Evaluation

Newcastle City Council commissioned the Healthy Living Lab to undertake the evaluation of the PfPP project. The Healthy Living Lab, at Northumbria University, is led by Professor Greta Defeyter and the lab has an international reputation for researching food insecurity, poverty, and using co-design and innovative research methods.

Aims and Objectives

This evaluation employed a mixed methods sequential design utilising quantitative and qualitative approaches to data collection and analysis. This approach allows for a deeper understanding of how an intervention operates and is experienced by a variety of stakeholders (Spencer et al., 2003). The overall aims of this evaluation were to a) explore the factors that led to people visiting the West End Food Bank, b) to collect qualitative and quantitative data on the impact of the Partnerships for People and Place (PfPP) project, c) to conduct Ripple Effects Mapping with the project's implementation team to illustrate the impact pathways, impact and to identify key themes, d) and to capture the views of the service users regarding PfPP. Given the breadth of these aims this evaluation will be broken down into the following research stages. Stage 1 will present case studies of food bank users to demonstrate a) need and context, and b) to highlight areas for potential early intervention. We used a case study approach to encourage participants to share their experiences in an in-depth manner (Merriam & Tisell, 2015; Yin, 1994), and because following conversations with the food bank manager, it was clear that many service users have highly complex and unique issues. Stage 2 will present the Ripple Effects Mapping workshops and project participants views about the project in terms of expected and unexpected outcomes alongside impact pathways. Stage 3 will

present analysis of quantitative data collected by Newcastle City Council and the West End Food Bank. Finally, Stage 4 will present a sample of service user case studies. The full design, methods, results, and discussion sections will be presented for each individual study, followed by a general discussion at the end of this report which will draw together the evidence from across all studies regarding the efficacy of the project. All studies were approved by the Faculty of Life Sciences Ethics Committee at Northumbria University (Ref: 52716).

Stage 1

The aim of Study 1 is to investigate the circumstances that have led to the need for a person to visit a foodbank, including for example, their financial situation, relationship issues, employment status, health status, social security claim issues and other potential safeguarding issues. The study will also seek to determine what interactions participants have had, if any, with Newcastle City Council and other services including the voluntary sector and government departments, prior to the introduction of the PfPP project. In addition, the study will seek participants views of those interactions, and what factors, including changes to the way services are delivered, could help people address and resolve issues to reduce the need for people to visit a food bank. These findings will be shared with Newcastle City Council and the West End Food Bank to inform service improvement.

Method

The first part of this evaluation adopts a qualitative approach to gain a rich understanding of some of the reasons why people use a food bank. Understanding the contextual factors affecting this programme at multiple phases, including design, implementation, sustainability and scaling up is critical (Vanderekruik & McPherson, 2017).

Recruitment

Non-probability purposive sampling was used to recruit 13 participants who lived in the Elswick, Benwell, and Scotswood wards of Newcastle and had received advice, guidance, or support in the form of food aid from food banks in the west end of the city. Demographic data on participants are presented in Table 1 overleaf.

Table 1. Demographic data of participants

Demographic	Response options	Number and (%) participants
Gender	Male	3 (25%)
	Female	9 (75%)
Age (Mean)		51
Age range		35-83
Ethnicity	White British/Irish/ Scottish/Welsh	9 (75%)
	Black/Black African	3 (25%)

Materials

Letters of invitation, research information sheets and consent forms pertaining to the research were developed and a semi-structured schedule of questions was prepared to guide interviews. The schedule comprised a series of open-ended questions that enabled participants to talk freely about their experiences relating food aid provision and seeking advice, support, and guidance. Given the highly complex nature of individual lives, the schedule was used as a guide and participants were allowed to focus on the topics that they thought were most important.

Procedure

Following the receipt of ethical approval from the Faculty of Life Sciences Ethics Committee at Northumbria University (Ref: 52716), copies of a letter of invitation, an information leaflet, a consent form and a demographic questionnaire were sent to the food bank manager who distributed them to people who use the food bank. A date and time for data collection was agreed. Each interview was conducted in a way that best suited the individual. All interviews took place in person from July 2022 to October 2022. On the day of data collection, food bank users who had already consented to participate in the study were approached and asked if they would like to take part. At the start of each interview, participants were advised that all information would be anonymised and that they could withdraw their consent at any point up to one month after data collection. At the conclusion of each interview, the researcher debriefed participants and gave them a debrief information letter including the researcher's contact details in the event that participants might want to withdraw from the study.

Data analysis

Each interview was listened to in entirety before being orthographically transcribed. Transcripts were read several times in order to gain a thorough overview of the data and to develop anonymised case studies.

Data storage

All information gathered throughout the study was stored in accordance with the Data Protection Act 2018 and the General Data Protection Regulation (GDPR) and Northumbria University's Code of Practice.

Findings and Discussion

A summary of the main themes is presented below followed by a series of case studies.

Summary of main issues faced by food bank users.

The over-riding issues faced by participants related to persistent low income due to the amount of income received via social security benefits, rather than an unexpected loss of income. In one instance, the participant's circumstances had changed, which resulted in a change of status in that the individual was now claiming social security with another person, as a couple. The participants thought they may not be receiving benefits for a couple, but also because they had transferred to Universal Credit which did not pay the same amount of benefit in respect to ongoing health conditions. Some participants' benefits had been stopped or reduced for three main reasons: a) one participant suggested regular changes to advisors meant their benefits were frequently stopped: b) lack of access to a computer to keep online journals up to date and c) deductions from benefits for loans and debts prior to receiving benefits. Participants generally found out about the foodbank by word of mouth from friends, although some found out about the foodbank from parents who also used the foodbank, suggesting normalisation and /or inter-generational transmission of foodbank use as a means of accessing food. One participant was referred to the food bank by Citizens Advice Newcastle and another by the Jobcentre. Generally, participants were not aware of where they could go to get help and advice and when help and advice was received, it was via the staff/advisors who are based at the food bank. Some participants reported that they had debt issues, particularly relating to over-payment of housing benefit and council tax, with two participants indicating that they were not aware of potential reductions in council tax eligibility as single persons. Both indicated that warnings of court action relating to non-payment of council tax had caused them concern. Poor housing conditions had been experienced by one participant but intervention by a food bank advisor along with support from Shelter and the city council had led to a move of home, accompanied by improved housing conditions.

Overall, there is clear evidence that changes to the welfare state have resulted in many individuals who are in receipt of Universal Credit or equivalents not having enough household income to live

(JRF, 2023), and a number of organisations, including the Trussell Trust and the Independent Food Aid Network (IFAN) support a 'cash first' approach to poverty, suggesting that the UK Government should introduce the Essentials Guarantee. This guarantee would embed within our social security system the principle that, at a minimum, Universal Credit should protect people from going without essentials. However, the Essentials Guarantee has not been enshrined in legislation and the following case studies, presented in this report, clearly show that whilst the Essentials Guarantee is needed, the current context under which local authorities and community organisations work means that often a cash approach must be accompanied by other support processes and services; an approach we refer to as a 'cash first+'. We use the term 'Cash First+' as we consider that different forms of support need be provided, often in parallel, according to the specific needs of the service user; whilst at the same time noting that the majority of food bank users have insufficient household income to afford the essentials required to live. The council and the West End Food Bank considered this constitutes a pragmatic approach to the Partnership for People and Places (PfPP) project delivering its objectives and aims at the local level. The evidence of a lack of financial income plus associated trauma is clearly demonstrated in the following case studies. Note that these case studies were collected prior to the individuals participating in PfPP project.

Case study 1.1

Reason for visiting the food bank: Persistent low income caused by changing benefits from single person ESA to claiming as a couple and potentially not receiving correct amount of benefit. Receiving £272 a month in benefit.

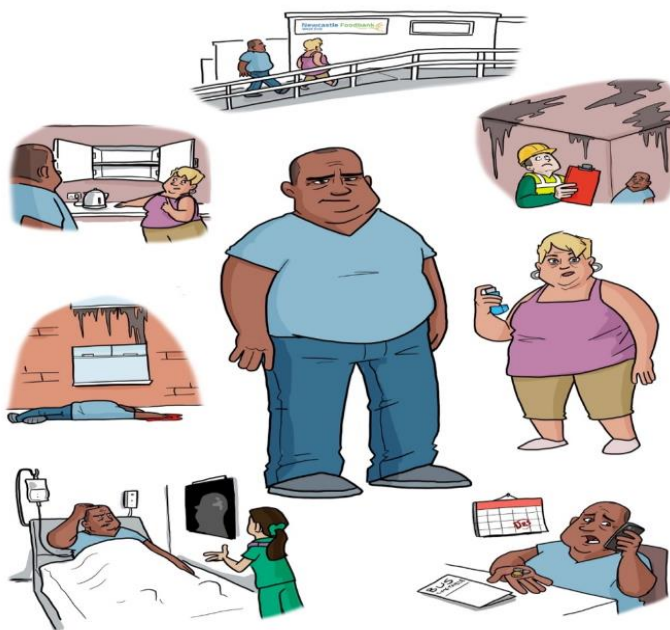


Figure 2: Case study 1.1.

Simon is a 59-year-old male who has recently moved in to a flat with his partner, and as a result of a change to his circumstances, his benefits have changed. Simon was in receipt of ESA due to his long-term health problems, which include suffering a heart attack a few years ago, diabetes and arthritis. The move to Universal Credit means he and Caroline are receiving £272 a month to live off. They are experiencing difficulties in making their

budget cover household essentials, hence their visit to the West End Food Bank. Caroline told Simon

about the food bank as she had previously used the food bank a number of times in the past because her benefits had been stopped/sanctioned.

Simon and his partner Caroline, who has chronic asthma, had decided to move in together some time ago, but it had not been possible because the flat he used to live in was too damp following more than 19 floods from the flat above which caused a significant amount of damage to ceilings and walls and furniture including beds, sofas, wardrobes, bedding, and clothing. Despite repeated requests to a private landlord, the necessary repairs were never undertaken. The whole situation caused Simon to get quite down and depressed, and he spoke to his mental health nurse about it. It was only when he visited the food bank that he received help from an advice worker. The advice worker put Simon in touch with Shelter and Newcastle Council's housing and environmental health departments. When environmental health officers from the city council visited the flat, they advised Simon to leave the property as soon as possible because the damage, particularly to the electrical wiring posed a significant health and safety risk. Simon was attempting to clean the outside of the windows of his flat which were dirty due to the floods when it is thought he may have suffered a diabetic hypoglycaemic incident and he fell and blacked out. He was found lying in a pool of blood, having lost a tooth. He has no recollection of the incident. Simon was admitted to hospital where he was diagnosed as having suffered a stroke, which the fall and bang to his head may have contributed too. Simon was hospitalised for some time, during which, a member of staff from Shelter helped him and Caroline bid on a flat, which they won. Following discharge from hospital, Simon and Caroline moved into their 'new' home. This move was supported by the stroke team who visited him at home to provide adaptations such as bath seats and supported Simon in carrying out daily living tasks, which he is struggling with as he has no feeling in his left side. Despite the property having no carpets, the couple love the flat, even though they cannot afford to put the heating on due to their low level of income, much of which, up to £30 a week or more, is spent on travelling to hospital for Simon's multiple hospital visits each week. The cost of bus fares is taking up so much of their income that Simon has had to cancel several hospital appointments.

Case study 1.2

Reason for visiting the food bank: Persistent low income.



Figure 3: Case study 1.2

Olive is a 73-year-old widow who was told about the foodbank by a friend from the church she attends. Olive visits the food bank because she does not have enough income for food by the time she pays for her gas and electricity and other bills. Olive has never worked rather, as was common in the North East of England, Olive concentrated on raising her children. Olive's husband was the main wage earner and looked after all the paperwork relating to the house and

bills etc. so when her husband died three years ago, Olive had to learn financial management and she managed to apply for and receive a £2,000 grant to help with her late husband's funeral costs. However, after recently fracturing her hip, which affected her mobility, the friend who told her about the food bank thought she may be entitled to some additional social security benefits. Because Olive's husband had looked after all the necessary paperwork in the past, Olive did not know who to turn to for help. In April she received a letter from the DWP saying she was entitled to an additional payment of £20 a week, but she wasn't sure whether she was receiving the money or not. An advice worker at the food bank was helping to find out whether she had received the extra money or not. However, when enquiries were made about this payment, she was told that she owed the DWP £400 as her husband had been overpaid by this amount four years ago. If Olive receives the uplift to Universal Credit of £20 a week, she is planning on using it to repay the £400 owed to the DWP.

Case study 1.3

Reason for visiting the food bank: Persistent low income, waiting 18 months for a PIP benefit claim for son (who has stage 4 liver cancer) to be processed.



Figure 4. Case study 1.3

Harold is an 83-year-old gentleman who lives with his wife and his 53-year-old son in a three-bedroom house in Newcastle. His son moved in 18 months ago when his house was repossessed because he could not keep up the mortgage payments after losing his job. His wife had died of cancer, and he became depressed, couldn't work and consequently lost his job and is currently receiving Universal Credit. The family was struggling to cope financially, and Harold went to Citizen's Advice to seek help. Citizens Advice gave him a food voucher and referred him to the food bank. This was more than 18 months ago, and Harold has been visiting the food

bank most weeks, only missing a visit to the food bank when he has been in hospital himself. Since moving into the family home, Harold's son has been diagnosed with stage 4 liver cancer. He also has diabetes. He was given help and support to claim additional benefit by an advice worker at the food bank. Despite this, the family do not have enough money to live on and have been waiting for 18 months for the son's claim for PIP to be processed.

Case study 1.4

Reason for visiting the food bank: Persistent low income (living off £262 a month after DWP took £70 a



month for debts owed to Northumbrian Water and DWP loan repayments).

Brian has recently started work, but the DWP took £234 from his last payment to cover two months loan/debt repayments).

Figure 5. Case study 1.4

Brian is a 58-year-old male who lives alone in a privately rented flat in Newcastle and is in receipt of housing benefit (his landlord gave him the housing benefits form to complete).

Brian began his working life as miner, starting at the age of 16 until the mines in the region closed. He then worked in security for a number of years until he had to stop working due to ill health. He suffered two heart attacks, has had his gall bladder removed, and has hepatitis and type 2 diabetes and requires regular, annual check-ups via his doctor's surgery and hospital.

Brian was unemployed for a number of years. He had accrued some debts, including repayments of DWP loan advances of £29 a month, but also with Northumbrian Water debt of £36 a month, leaving him with £262 to live off. As a result, he was struggling and visited the food bank. He started work on 10th September and received his last payment from DWP on 4th October when he received £28 because deductions had been made for his final two loan/benefit advance payments and the money owed to Northumbria Water.

Case study 1.5

Reason for visiting the food bank: Persistent low income caused by frequent benefit sanctions and not able to manage monthly payments of benefits.



Figure 6. Case study 1.5

Malcolm is a 49-year-old single male who lives with his elderly mum in a Your Homes Newcastle property. He has been unemployed for two and a half years after having lost his job when he suffered a severe asthma attack and was asked to leave the business premises without receiving any medical help or support. He is keen to work but said that most work opportunities are via agencies who, when they call about a job are told that it is a long-term contract with full time hours, only to be told when he arrives on site that work is only available for a few hours and on an ad hoc basis. The difficulties with coming off Universal Credit to work for a few hours to then re-start the claim have caused problems in the past. His jobcentre plus advisor changes on a frequent basis and he feels that he has to start the whole process of explaining his situation time and time again. His benefits have been sanctioned, and although they have recently been reinstated, he fears they may be stopped again soon when he gets a new advisor. He would like some advice and guidance on whether he is claiming the right benefits for him and his mother and more focussed support in getting a job, but he doesn't know who to turn to. He has a number of health problems including asthma, bronchitis and eczema and visits the doctors quite often. His prescription medicine for eczema is not working and he is spending money on trying to find an alternative. He is also worried about debt, but when he approached Step Change was told that the amount of debt, he had was not high enough to enable him to get help.

Case study 1.6

Reason for visiting food bank: Persistent low income.



Figure 7. Case study 1.6

Joanne is a 38-year-old single parent with grown up children, living in a privately rented property. She is struggling to manage on Universal Credit and when she mentioned this to her Jobcentre Advisor, they told her about the food bank.

Joanne had been in full time employment with a well-known high-street store until the pandemic when she was made redundant. She then experienced a number of health issues which prevented her from working. However, rather than returning to retail she decided to change her career

and has just completed a course at a nearby college. She is currently receiving Universal Credit, and a proportion of her rent is covered. She did not receive any help or advice from student finance or the college she attended and does not know where to go for help and advice. She has been to the food bank about five times and has received help and guidance from an advisor at the food bank where she now also volunteers. When she was working in retail, at the end of some shifts, she used to sort any left-over food to donate to the food bank and never imagined in a million years that she would be in a situation where she would need to visit a food bank for help herself. She is also struggling to meet the higher costs of gas and electricity and some credit card debt.

Case study 1.7

Reason for visiting the food bank: Low income, irregular working hours and on a zero hours contract.



Figure 8. Case study 1.7

Paula is a single, 39 years old woman and is on a zero hours contract and she is struggling financially due to irregular working hours. Her hours can vary quite considerably. Over the last three or four months she had been working 20 - 25 hours a week, especially when her line manager was on holiday. However, lately her hours have been reduced. She is worried about debt, particularly council tax debt as she was paying more than £20 a week. She had been in touch with Newcastle City Council about this and was not told that she could be entitled to single person's discount. She is concerned because recent letters from the council seem to be threatening court action and she experienced difficulties in reaching someone to talk to via the helpline. It was only when she went online herself and found out that she may be entitled to at least single person discount. She made an appointment to speak to an advisor at the food bank but was so concerned she tried to find out more information herself but was unsure who or where to go to for help, other than the food bank. Paula's mother, who is herself, a regular user of the food bank told her about the support available at the food bank. Paula is also worried about energy prices but is aware she might be able to get an energy voucher from the food bank. If she does, she said she will treat herself and put the heating on for an hour. Early days but Paula hopes that the people at the food bank will be able to help.

Case Study 1.8

Reason for visiting the food bank: Persistent low income.



Figure 9. Case study 1.8

Marriane is 55 years old and lives with her husband and three adult children. She has a number of health problems and is receiving ESA. She was told about the help and support available from the food bank by a friend. The family are struggling financially and are also now worried because they have received notification that more than £4,000 of housing benefit has been over paid because one of the children was working, and the family did not notify the council of the change in their household circumstances. The child is no longer working but the family need to provide

evidence of when the family member started working and when they left the job. She is hoping that the food bank advisor's will be able to help.

Case study 1.9

Reason for visiting the foodbank: Persistent low income.



Figure 10. Case study 1.9

Pearl is 33 years old and lives with her husband in house provided by a social landlord with their three young children. Her husband works part time in a low paid job. They do not get any other benefits other than child tax credits, but the family is struggling to make ends. Pearl is really worried about money and what the future holds.

Case study 1.10

Reason for visiting the foodbank: Persistent low income, working hours reduced.



Figure 11. Case study 1.10

Phillipa is 48 years old and a single mother.

She has been using the food bank regularly since 2019. She had been working part time, 16 hours a week but recently lost her job and is now receiving Universal Credit.

Although she found the staff at the job centre helpful, her benefits have been stopped in the past because she struggled to complete her online job search as she did not have access to a computer. She was informed by text message that her benefits would be stopped. She is also particularly worried because her council tax bill is £74 a month and she is struggling to pay this amount. She is hoping for some guidance

and advice from the food bank, as providing food is only one of her problems.

Case study 1.11

Reason for visiting food bank: Persistent low income resulting from a change in benefit awarded from higher level of PIP to job seeker Universal Credit.

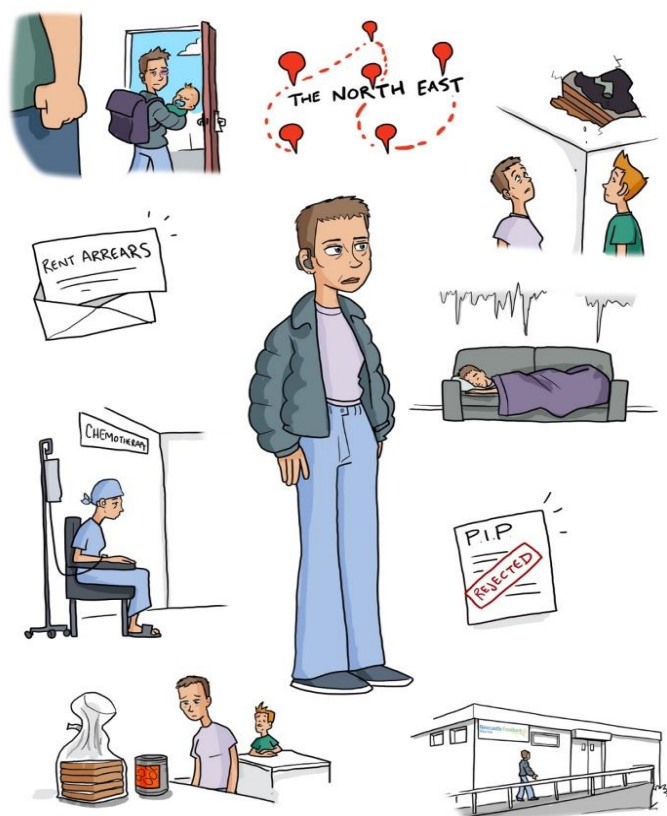


Figure 12. Case study 1.11

Ella is a 35-year-old single mother with a 16-year-old child. Ella has several health problems, including diabetes, asthma, reduced mobility, deafness, and kidney problems. A short while ago, she had surgery, followed by chemotherapy and radiotherapy, to remove a tumour in her salivary glands. She was a victim of domestic abuse when her child was very young, which meant that she has moved around a lot and lived in different parts of the North East. When she was with her former partner, rent arrears were accrued in her name in Newcastle area because he did not pay the rent. Once she had moved

to another part of the North East, although she was working, she accrued more rent arrears and was eventually evicted. She is currently living in a private rented flat that is in need of repair. There is a hole in the kitchen ceiling from a leak from the flat above, the front door does not lock securely, and there are no smoke or carbon monoxide alarms. She can't use the shower as the walls are not tiled and the floor tiles in the kitchen are so badly damaged that the floor can't be walked on without wearing shoes. The flooring in the passage is so worn that she has tripped on the flooring many times and recently experienced a severe fall that left her badly bruised. Her bedroom is too damp to sleep in, with mould growing on the ceiling and walls, resulting in Ella sleeping on the sofa in the living room. Her mobility problems are so severe that she can't make it to the bathroom in the middle of the night and as a result, occasionally suffers episodes of incontinence meaning that new bedding needs to be purchased, which she can't afford. She has been in touch with the council about being rehoused but because of the rent arrears, she has been told that they can't go on to the housing list. She is thinking of getting in touch with the environmental health team at the council to get them to inspect the flat and then intervene on her behalf to get the landlord to carry out the repairs.

She also suffers from severe anxiety, as does her child. She had been in receipt of the higher level of PIP and had a mobility car which meant that she and her son could travel to see her parents who are now both very poorly and unable to support her emotionally or financially. Two years ago, following an assessment at home, her claim for PIP was rejected and she is now in receipt of the jobseeker element of Universal Credit. Although she is not required to look for work, she is concerned that she may have to attend designated training courses. When her PIP claim was rejected, she tried to appeal against it but was told her letter of appeal was never received and was told she had to wait six months to reapply. The six-month time frame is now up, and she wants to reapply for PIP but is unsure about how to go about it and does not know how to navigate the benefits system or where to go for help.

She heard about the food bank from a friend. At the time of speaking to the researcher, she said she had half a loaf of bread and few tins of food from the foodbank in the house and nothing in the freezer at all. She said she has gone hungry on a number of occasions to make sure her child could eat.

Case study 1.12

Reason for visiting the food bank: Persistent low income.



Figure 13. Case study 1.12

Sarah is 37 years of age. She is currently unemployed after losing two jobs. She had been working as a cleaner on an 18 hour a week contract but had worked extra hours and shifts to help her employer out, often traveling long distances and working up to 145 hours a month. She had made a claim for Universal Credit, however her claim had been stopped because she made a mistake and forgot to sign the commitment to seek work section in her journal. This hadn't been an issue at the time because she was working extra hours. She had been living in another part of the city in a social housing property but despite working, had to

leave because she couldn't afford the rent. She moved back in with her mother who lives in a one-bedroom flat. Her mother had previously not been paying rent, but when her daughter moved back in, her daughter became liable for a proportion of the rent and council tax. However, Sarah's employer recruited additional staff, and as a result Sarah's hours of work were cut down to 10 hours a week. When Sarah asked for more hours, her employer's response was "you're putting your notice in" and she lost her job. She then got another job but has since lost this job as well. Sarah has been claiming Universal Credit for the last three months. She found out about the food bank from her mother who has been using it for a number of years.

The above case studies highlight that poverty (i.e. a lack of household income) is the main driver for residents needing to use the services of the West End Food Bank. It is also clear that each individual has a unique story and many individuals using the food bank services are facing multiple issues from lack of household income to housing issues, health issues, transport etc. Individuals have complex needs and those living in poverty often have low economic and social capital to navigate complex systems. Thus, we recommend a 'cash first+' approach under which households are firstly supported to maximise household income, followed by other forms of support and services, if needed (e.g. Housing services, adult safeguarding). It is important to note that some actions fall outside of the local authority's remit. For example, an effective way to improve household income would be to increase welfare support payments, but this decision lies with the national government, not the local authority. However, local authorities and community organisations are dealing with the stark realities of the effects of poverty, often as a result of national government policies, alongside the current cost of living crisis, and financial cuts to local authority budgets, and improved ways of working may help to alleviate poverty and ensure that residents have knowledge of and are in receipt of all eligible benefits and available support services.

Study 2

The themes and issues identified in Study 1 were fed back to Newcastle Council and the West End Food Bank Project Steering Group, in real time, to inform the development of the PfPP Project. As demonstrated in Study 1 the needs of services users are highly individual, often complex and situated within a complex system in which a myriad of intrinsic and extrinsic factors interact with one another. As the PfPP project adopted a 'test and learn' approach that brought together multi-sectoral stakeholders to develop a collective understanding of service users' and service provider's needs, and to co-develop a collective understanding of this system approach, including positive and negative consequences and how the system could be improved, it was not suitable to use pre-determined outcomes to measure impact, as we expected a number of unexpected outcomes would emerge from the project.

Furthermore, in order to co-develop a system approach, the input and expertise from stakeholders from across various sectors and the community was required in order to be able to develop a shared understanding about the complexity of the issue and to co-produce solutions. This shared understanding is the basis for being able to change how systems functions, within the council, the West End Food Bank and wider systems in society. However, these approaches are rarely linear in nature, and it is, therefore, difficult to determine cause and effect. Indeed, often unintended positive and negative consequences arise, and stakeholders often have to be agile and flexible in their ways of working, adapting their approach to accommodate unintended consequences. In terms of research methods, the MRC and the SPHR have produced guidance documentation on how to evaluate complex interventions (Campbell et al., 2000; Egan et al., 2019; respectively). However, these papers also call for innovative approaches to capture the implementation and impact of complex evaluations. One such method is Ripple Effects Mapping (REM). REM can be used to capture the wider impacts of an intervention (Nobles et al., 2022), including unexpected outcomes. Whilst REM is a participatory qualitative impact assessment approach that involves stakeholders who are engaged with, or affected by, the intervention, it is often accompanied by other forms of data collection; so, in addition we decided to collect qualitative case studies (Stage 1 and Stage 4) and analyse quantitative outcome measures (Study 3).

REM is underpinned by four key principles (Chazdon et al., 2017):

- 1) It draws on the concept of appreciative inquiry (Cooperrider & Srivastva, 1987)
- 2) It adopts a participatory approach.
- 3) It uses interactive group interviewing and reflection.
- 4) It uses mind mapping to visualise the impacts.

In terms of the current project, a core aim of the PfPP project was to inform Newcastle City Council and the West End Food Bank in how best to mobilise assets in the West End of Newcastle and the Council to re-design an improved system that would enable early detection of safeguarding, financial inclusion and homelessness issues and improve outcomes of people who use the West End Food Bank and service providers. Capturing changes to the system that lead to improved ways of working and improved outcomes for residents, or not, will inform the council and the West End Food Bank about the impacts of the system change. As the project was still in its infancy and, at the time of starting the intervention only a few service users had engaged with the PfPP, we decided to focus on the project's implementation team (i.e. any person, from within the council or the food bank, directly involved in the implementation of the project).

Method

The lead researcher has a long-term relationship with both Newcastle City Council and the West End Food Bank, and a clear understanding of the complexity of interrelated systems within the council

and the food bank. After discussion with the project reference group, REM was agreed as a further method to add to a) the case studies presented in Study 1 and Study 4, and b) the quantitative data collected by Newcastle City Council and the West End Food Bank (Stage 3).

Ripple Effects Mapping

In order to prepare for the stakeholder workshops, a number of steps had to be undertaken. These included, planning the content of the workshops, making decisions about the preferred format and venue, planning for additional data collection, employing a visual artist, and preparing workshop materials and activities. As the PfPP project had adopted a 'test and learn' approach, it was decided to hold three separate REM workshops, collecting the impacts associated with the project, at each time point. This provided a clear timeline to participants in terms of mapping the project's impacts and meant that participants did not have to try and remember exactly when an impact occurred. It also enabled the Project Group to make changes to policies, actions, and activities, if required, throughout the life course of the project. In order to achieve continuity and consistency across workshops, actions and activities that were 'in the mind's eye' were not recorded until they had actually occurred. Although a number of researchers (e.g., Chazdon et al., 2017) recommend that REM is used to evaluate a project once its implementation is complete, we favoured Nobles et al's (2022) recommendation of holding multiple workshops in order to capture system change, in real time, throughout the implementation of the project. We further argue that this approach increases participants memory of events, activities, and outputs, and hence increases the quality of the data. We followed the underlying principles to REM: appreciative inquiry, participatory approach, group interviewing and reflection, and mind mapping. We did not employ a pre-determined framework, rather we adopted a largely inductive approach to explore the patterns within the REM data (Nobles et al., 2022).

Recruitment

Given the size of Newcastle City Council, and the timeline of the project, it was decided to run the workshops for the core implementation team only. This group consisted of council employees (n= 10) and staff and volunteers (n= 7) from the West End Food Bank.

Ripple Effects Mapping Workshops

The initial workshop was delivered in November 2022 at Newcastle City Council and lasted approximately four hours. Following the collection of participant consent forms, the lead researcher provided an overview of REM, the rationale for adopting this method and some examples of REM outputs from other projects (15 minutes). Although the lead researcher had already introduced REM to participants via an online project reference group meeting, it was considered important to remind participants about REM at the first face-to-face workshop. Following this, the researcher presented an overview of the process and activities for all the REM workshops (15 minutes).

REM activity (2 1/4 hours): Participants were divided into two mixed organisational groups. Each group consisted of 7-10 people, comprising staff from Newcastle Council and staff and volunteers from the West End Food Bank. All participants were actively involved in the implementation of the PfPP project. The first stage (30 minutes) involved group discussions built on the principles of appreciative inquiry. The aim of these discussions was for participants to share what they considered to be the successes of the PfPP project. The mixed groups supported participants in thinking about a) successes relating to their own area, b) the project overall, and c) relationships between the various stakeholder in the system. Having identified successes, participants were then asked to reflect upon how these impacts were achieved and whether these impacts were expected or not. Although these data were not formally recorded, at each table participants kept a list of outputs to act as a guide for the following activity.

Following the introductory activity, in the second stage, each group was provided with a large sheet of paper and asked to reflect upon their work to date. One participant, at each table, acted as a scribe to visualise the REM output. Participants were asked to work collaboratively and to record key activities and actions that had occurred within the project, and then to think about the impact that occurred following on from these actions or activities. The scribe drew arrows between the activities and the impacts.

The third stage was delivered concurrently to stage two and involved participants considering the following: Who had been impacted; how many people have been impacted; financial implications; and what other schemes/actions may have contributed to specific outcomes. The facilitator moved between the two groups providing assistance when required and asking probing questions. For example, “What exactly do we mean when you use terms, such as food insecurity and food poverty, interchangeably? Are they the same”?

In the fourth stage (30 minutes), participants identified the most and least significant changes in their REM outputs. Whilst it was relatively straightforward for participants to agree which activities had led to negligible impacts, it was considerably harder to agree on what ‘significant’ impact meant within the context of the project. Was it scale or reach or a particular impact that made it significant (e.g., an action benefitted 100 people) or was its depth important (e.g. an action prevention 10 people becoming homeless or subject to abuse). In order to reach a group consensus, each impact was discussed against different forms of capital (human, social, financial, etc.) within the context of the organisation(s) and the PfPP project, for service providers and service users.

In the fifth stage of the initial workshop (45 minutes), both groups came together to share their data and to reflect upon similarities and omissions from each REM output. A group discussion helped both groups to reach a consensus regarding actions/activities and impacts and to reach an agreement on what were the most and least significant changes in the REM outputs (see Figure x).

Following the initial workshop, the visual artist illustrated these data in a visual format. The visual REM illustration was shared with each group to allow participants the opportunity to comment further on the REM illustration and to check for accuracy.

Follow on workshops

Two further REM workshops took place in January 2023 and March 2023, with each workshop lasting approximately 3 hours. All participants had attended workshop 1, apart from two participants who volunteered as translators at the West End Food Bank. These participants were invited as it was identified, at the end of the first workshop that this group of stakeholders had not been invited to participate in the evaluation. The workshops followed a similar format to the first workshop, starting with the REM activity, apart from workshop 4, during which a sample of participants were interviewed about their thoughts and reflections about the project. During all workshops, the researcher took photos of all outputs to create a digital record.

Between each workshop, the researcher and the visual artist updated the REM output, shared the REM output with the participants and sought further clarification, where needed.

Analysis of REM outputs

We used an inductive content analysis approach to explore the REM data for patterns. Following Nobles et al. (2022) we used two sequential processes: The identification of impact pathways and a content analysis of these pathways. Analysis was undertaken after the final iteration of the REM outputs in workshop 3. The data were analysed by the lead researcher. Once the finalised impact pathways had been completed, a PDF of the REM output with the finalised impact pathways was imported into NVivo 12. We used content analysis to systematically code the data within the impact pathways. Where similar data were found across the REM outputs from the two groups, we applied a previous code, enabling us to build up a descriptive overview of the data in terms of actions/activities and impact. The final REM output was then shared with both groups to check for accuracy.

Results and Discussion

The REM output from workshop 1 is presented in Figure 14. The REM output from workshop 2 (Groups 1 and 2) are presented in Figure 15 and Figure 16, and the final REM output (end of workshop 3) for the PfPP project is presented in Figure 17.

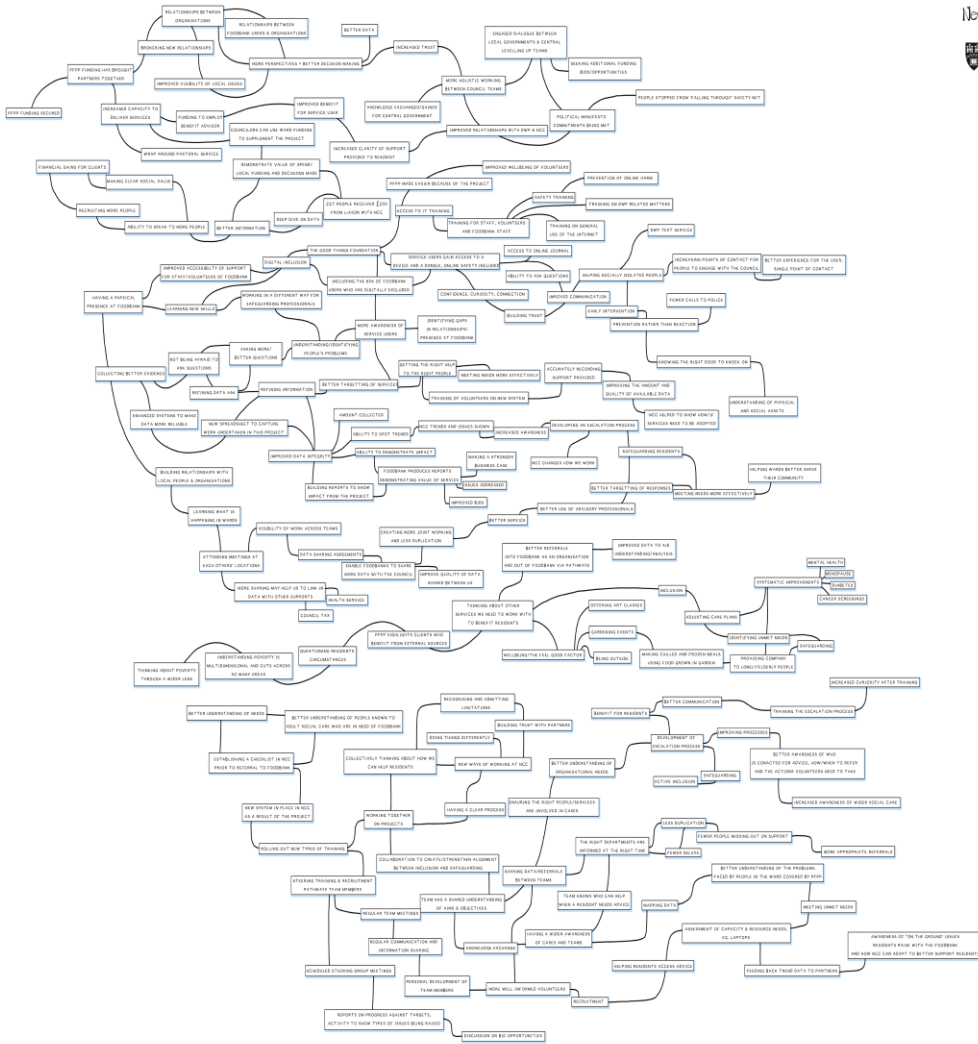


Figure 14: REM output from workshop 1 (November 2022)

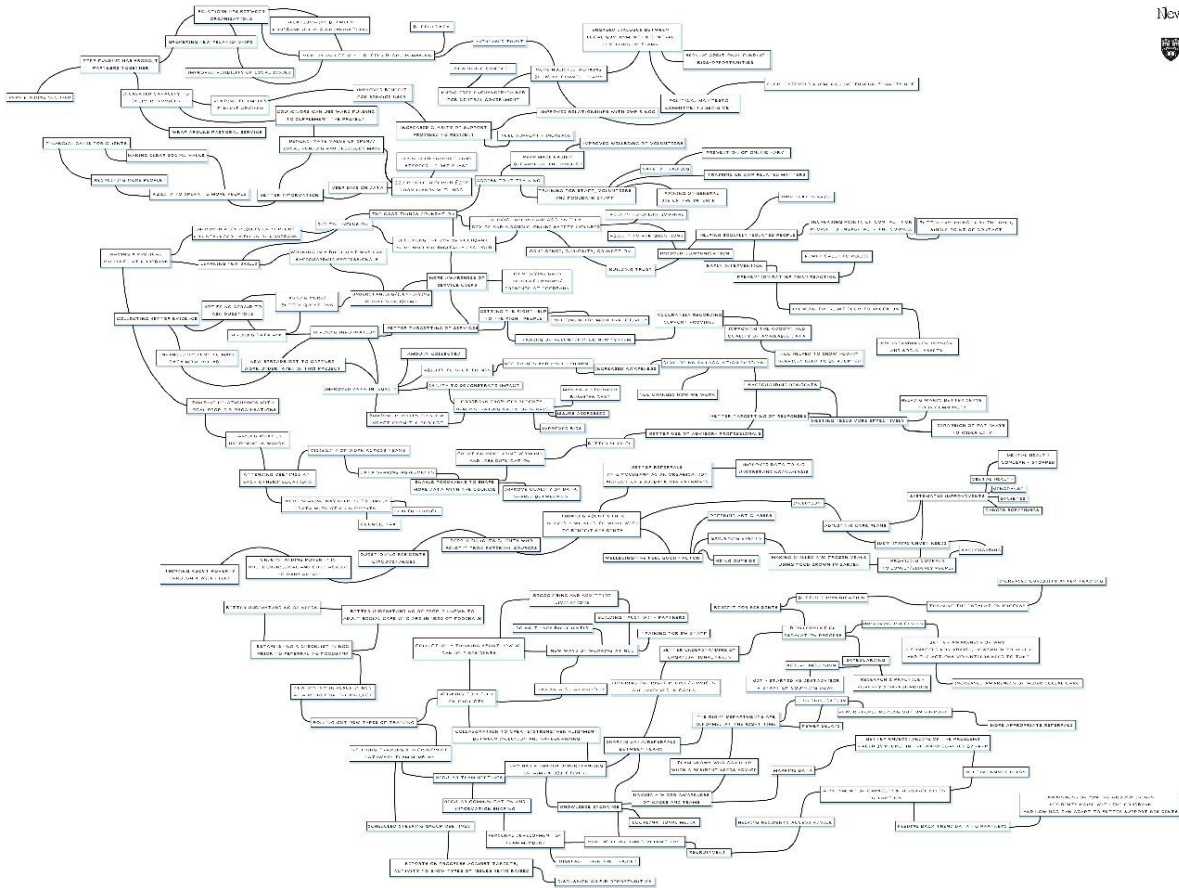
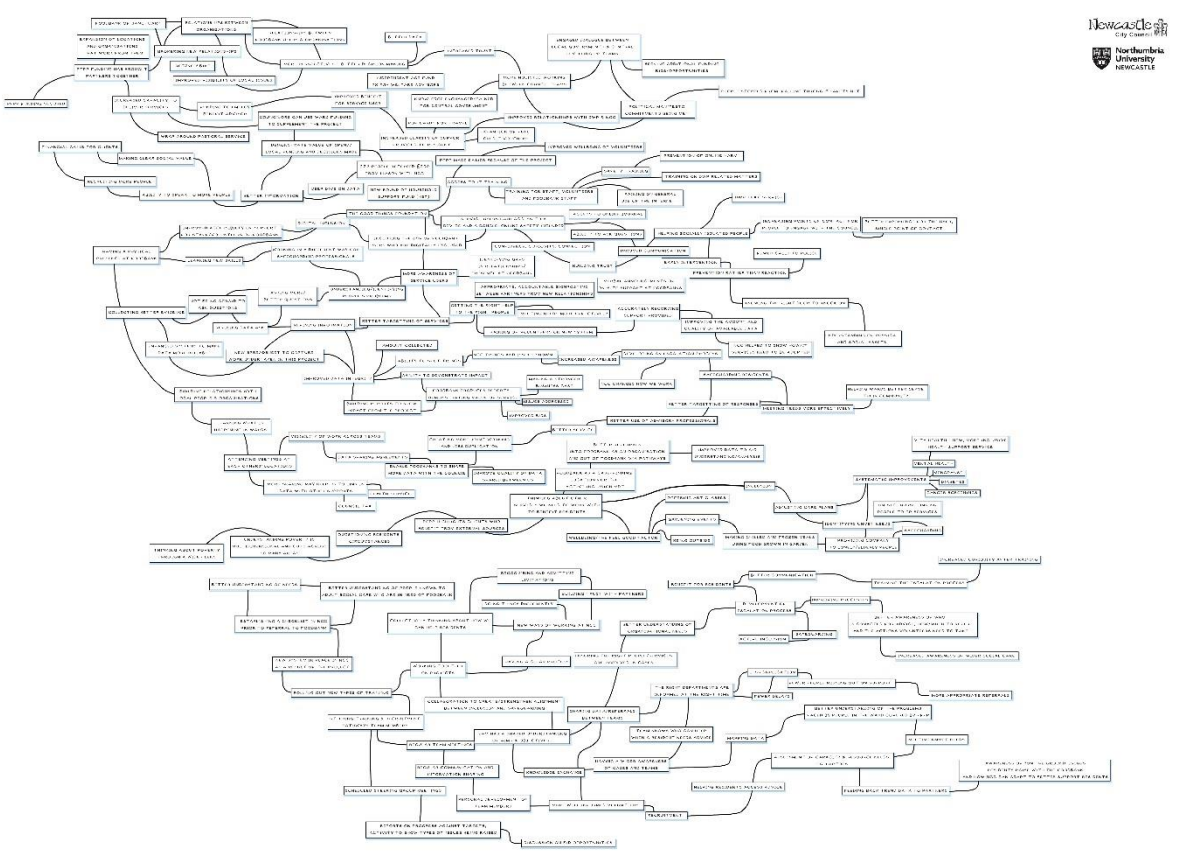


Figure 15: REM output Workshop 2, Group 1 (January 2023)



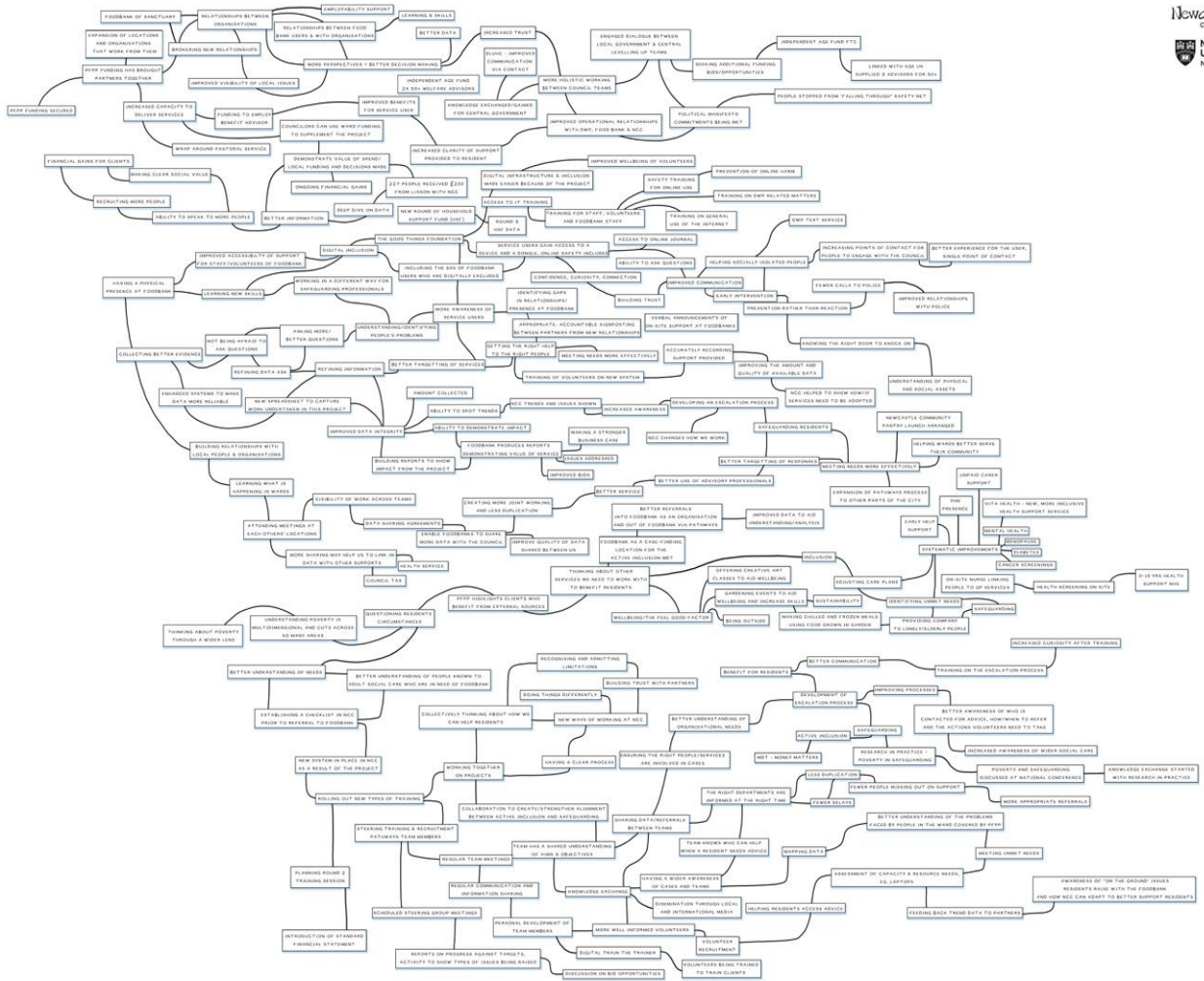
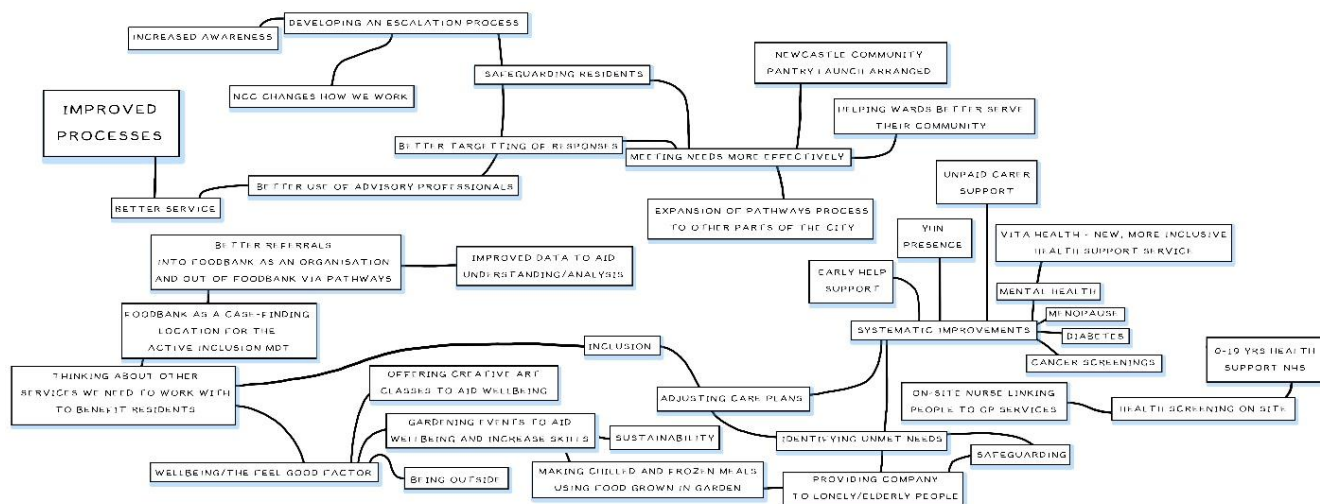


Figure 17: Final REM Output from workshop 3 (March 2023).

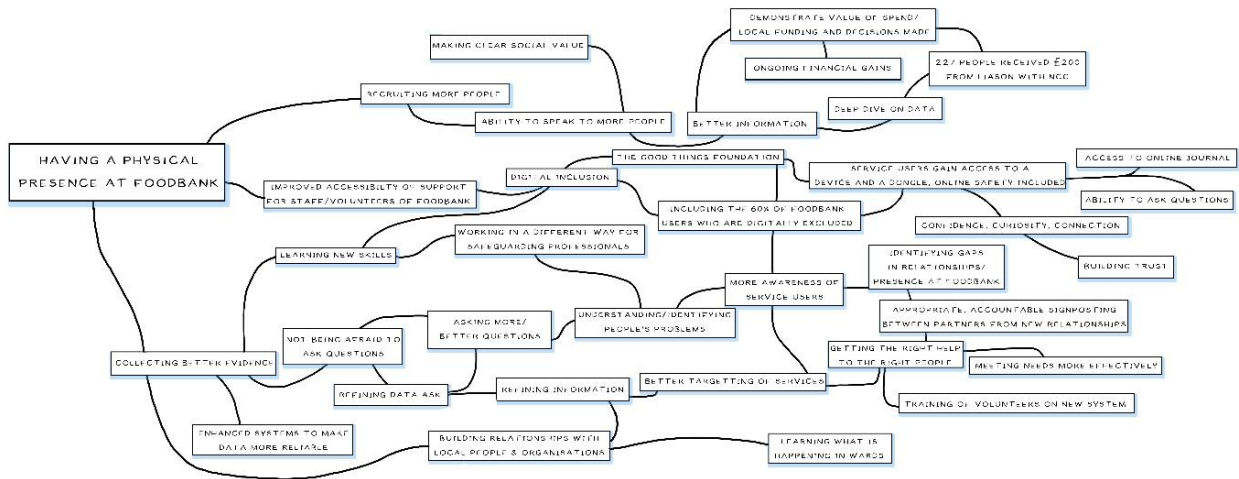
The final output was developed over three iterations from the work generated during all three workshops. Activities and impacts were mapped from November 2022 (workshop 1) to January 2023 (workshop 2) to March 2023 (workshop 3); although the project has continued to develop post evaluation. Four impact pathways were identified within the REM output, with a number of pathways overlapping (Figures 14-17). The REM impact pathways clearly demonstrates the complexity of the system and highlights that different impacts occur at different stages of the project's implementation. Systematic appraisal of the impact pathways allowed us to trace how the project and associated system developed and adapted over time. Content analysis enabled us to systematically merge the outputs from the two groups (end of workshop 3) into one final REM output. Furthermore, content analysis of the REM outputs enabled us to identify five key themes (and sub-themes).

Key themes:

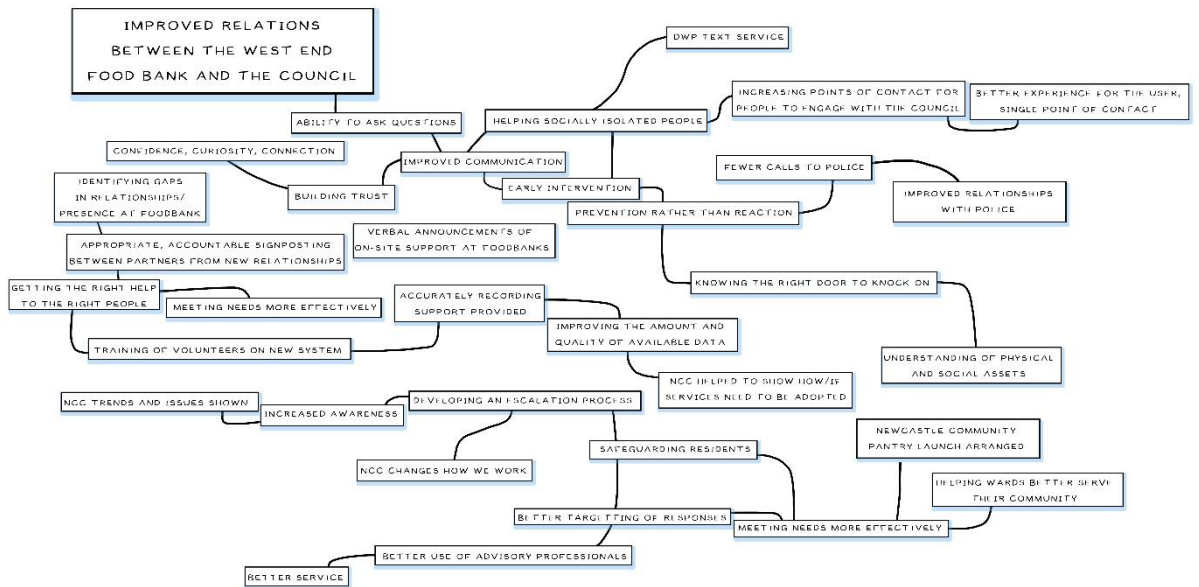
- Improved processes
 - Financial gains for service users and reduction in duplication for service providers
 - Adult safeguarding-early identification and targeted support



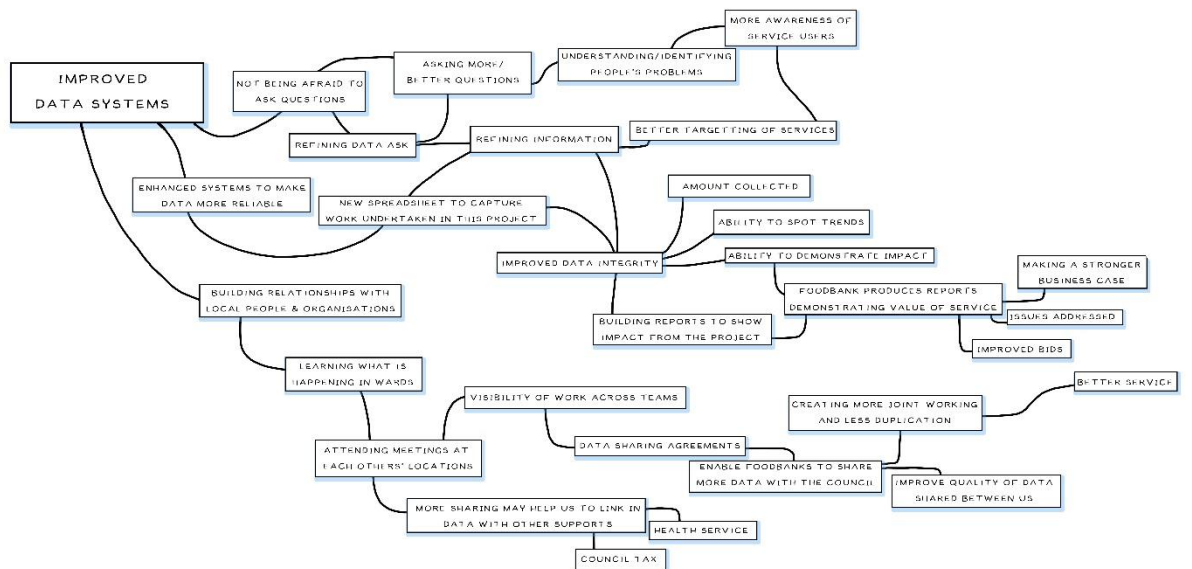
- Council's physical presence at the food bank
 - Human centred approach to individual's needs



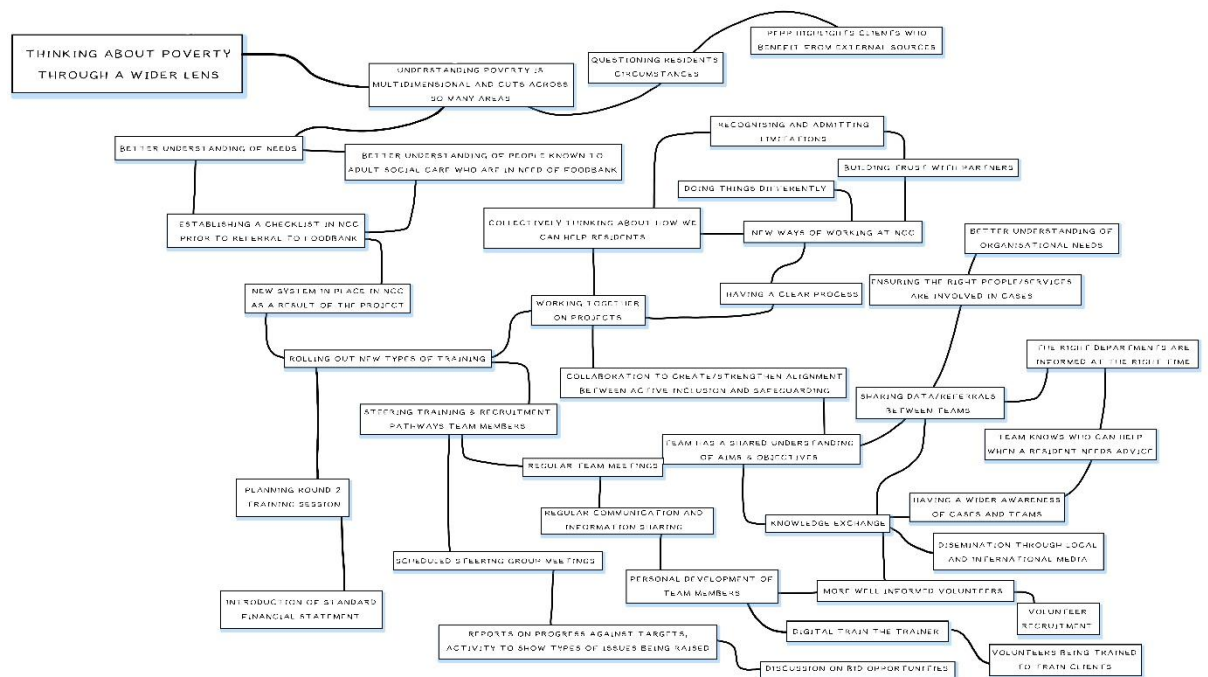
- Improved relations between the West End Food Bank and the Council
 - Efficient communication between organisations



- Improved data systems
 - Improved monitoring of case data
 - Improved understanding of case complexity
 - Robust data collection

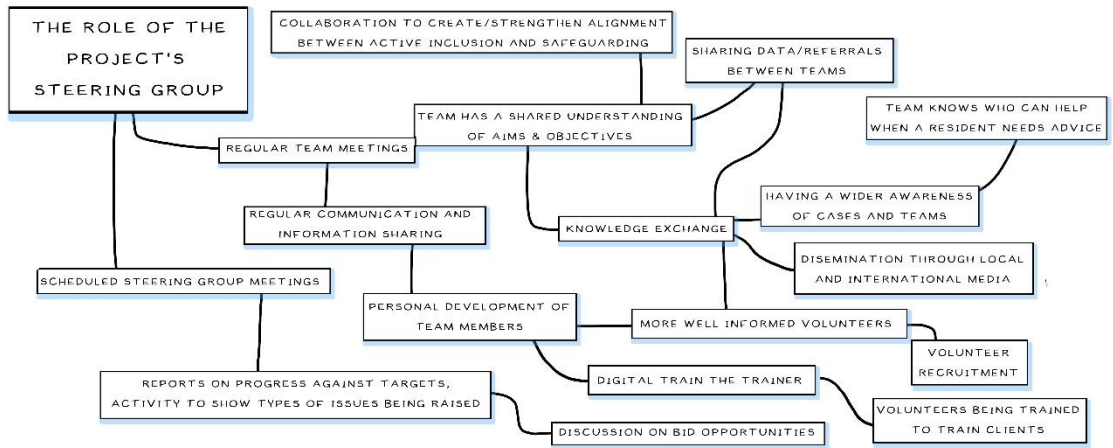


- Thinking about poverty through a different lens
 - Adopting a Gestalt approach to mitigating the effects of poverty through more efficient and coherent systems

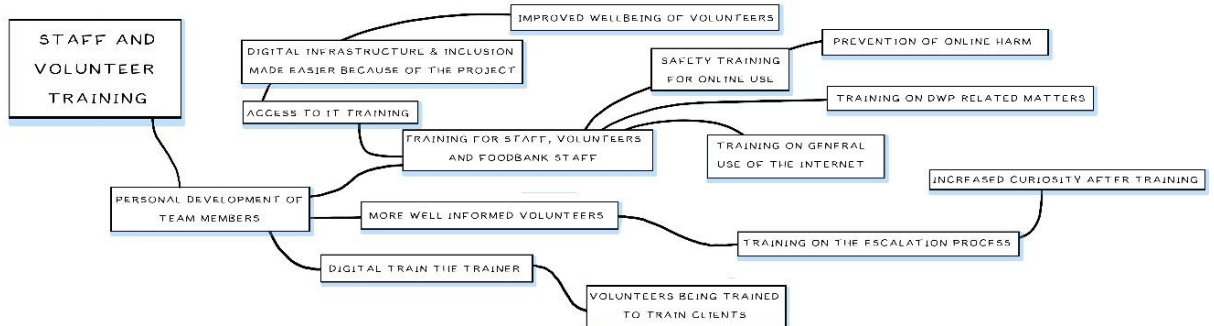


Mechanisms leading to the impacts were grouped into four themes:

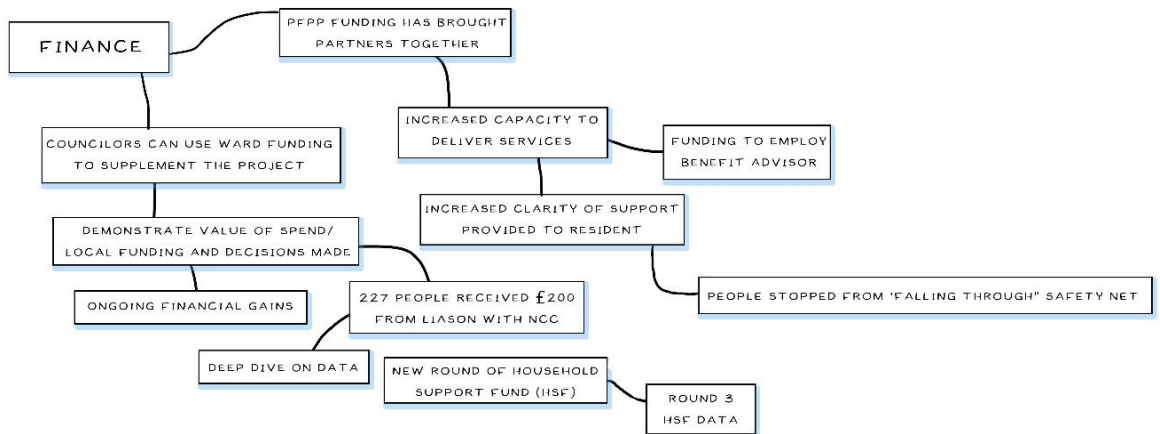
- The role of the project's steering group
 - Governance
 - Reporting
 - Sharing perspectives and knowledge



- Staff and volunteer Training
 - Increased digital inclusion
 - Housing and homelessness
 - Welfare
 - Adult Safeguarding
 - Data Sharing and Monitoring

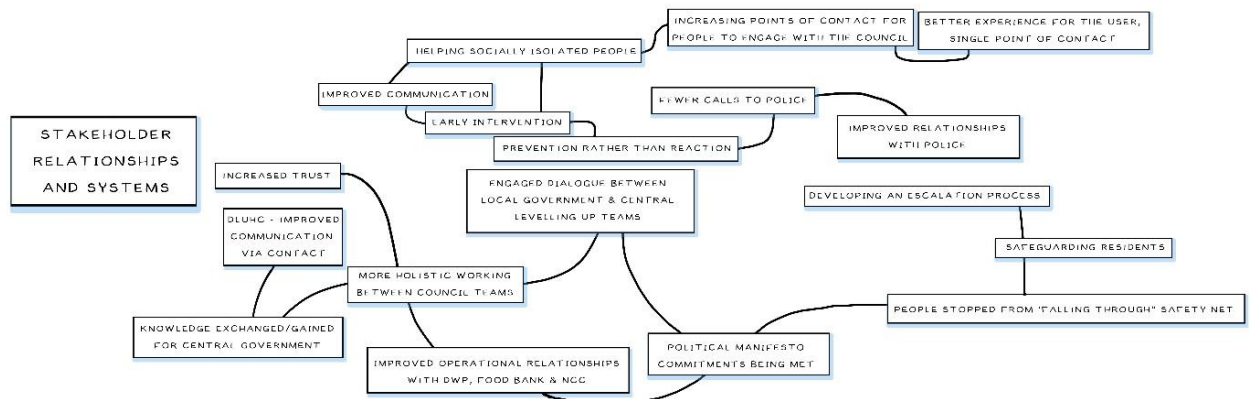


- Finance
 - Organisational gains
 - Individual service user gains



- Stakeholder relationships and systems

- Improved relationships between the council and community organisations
- Earlier identification of cases
- Systems introduced at 'point of contact' enabling faster, targeted support for individuals



Many of the pathways to impact overlap and there were numerous ripples associated with key actions and activities. For example, the funding for the PFPF project brought partners together that supported the brokering of new relationships, that in turn brought new perspectives to the discussion, resulting in improved decision making and increased trust between stakeholders, which in turn increased the quantity and quality of knowledge exchange etc.

The outputs clearly demonstrates that the relationship between actions/activities and ripples are not always linear but involves a complex, dynamic, interaction between factors. Such complex systems require considerable thought and during the workshops there was a great deal of discussion over terminology, and whether the same terms meant different things in different contexts. The workshops also required participants to really think about the impact of actions and activities and the workshops helped participants to make decisions about what activities to continue doing, what

actions required further work and refinement, what activities/actions to increase and what actions should be stopped, and how actions should be recorded and monitored. Importantly the REM output, alongside the quantitative evidence and case studies presented in Stage 1, have provided support to enable the project steering group, and partner organisations, in making evidence based informed decisions.

Finally, we conducted short interviews with a sample of participants from the project implementation group. The aim of these short interviews was to gauge participants thoughts about the project, whether it should continue, and to identify any specific issues not discussed during the REM workshops. Given the number of participants interviewed and the range of the roles they undertook within the PfPP project, the data from each individual are presented as quotes in order to capture the key point(s). All participants consented to being identified, and for their views to be presented, within this report. However, it must be noted that any other outputs reported within this report cannot be directly attributed to any of the individual participants named below.



Figure 18: Neil: Active Inclusion Service Manager and Sponsor of this project, Newcastle City Council

Neil considers that, *“this new way of partnership working between the Council, the food bank, and service users provided a significant improvement to systems and provided a coherent, local response to mitigate the challenges of poverty. It provided the opportunity for engagement with over 1000 people per week, provide an efficient system to identify welfare safety and reduce homelessness through a system that supports early identification and intervention. Improved data systems have helped to collect much needed evidence about what works, and what doesn’t work; helping the council to make evidence-based decisions and responses”*. Neil is of the firm opinion that the project should continue, as the project aims to support over 50,000 people each year.



Figure 19: Laura: Chair of the project, Newcastle City Council

Laura's role involves advising on adult social care policy and active inclusion.

She provides a number of positive project outcomes in terms of what the project has achieved with a small amount of funding. These include solidified relationships between the council and the food bank; bringing different council teams together to work in a more coherent manner on matters; supporting food bank staff and volunteers in how to navigate users processes for them; offering debt advice; DWP benefit advice; and supported digital inclusion.

Laura reports that, *"One of the key benefits of this project is that service users only need to make one point of contact, decreasing the individual's stress and*

saving the Council time and money". Based on the information and data shared, Laura fully supports the continuation of the project through shared partnership working, to deliver better outcomes for everyone.



Figure 20: Carole: Manager of the West End Food Bank

Carole highlighted how many service users visited the food bank for more than food, *"Many service users seek financial, social and emotional support from the food bank staff and volunteers. The training provided by the council has been pivotal in determining how volunteers may help service users"*. Carole pointed out that addressing financial concerns provides people with a degree of choice and dignity but many service users have additional problems and concerns. Carole reported that, *"in addition to financial gains for service users, the current project had increased the speed of how systems operate, and trusting relationships and new ways of working ensured that cases can be referred and where needed, rapidly escalated"*. Carole thought that it is essential that this work continues and thought that the training provided by the council, combined with the presence of a council

employee at the food bank was an effective model and prevented cases from escalating.



Figure 21: Sam: Service Manager for Safeguarding Adults, Newcastle City Council

Sam considered this project to be a key factor in linking poverty and safeguarding. She says, *“It is well known that poverty increases the risk of danger through a number of interrelated factors. Introducing a new system that can detect residents who are struggling is a key factor in preventing harm”*. Sam reported that, *“this project has significantly increased our understanding of each other’s roles both within the council and with the West End Food Bank. Addressing poverty is a priority for the council and we want to adopt a people-centred approach, whether in terms of volunteer wellbeing to supporting citizens, through co-designing new systems and ways of working together”*. Sam is thoroughly supportive of the project

continuing and is interested in extending the learnings from this project to other organisations and work packages.



Figure 22: John: Volunteer for West End Food Bank

John said. *“This project has supported the food bank to move away from food parcels to offering a more systematic approach to welfare provision. This has been built on all staff and volunteers gaining a greater understanding of welfare support through the training provided by Newcastle City Council. As a result of this project the range and breadth of support services has increased to include debt management, creative arts therapy etc”*. The food bank and the council now have data sharing agreements and improved IT and data management systems. John feels that the work needs to be continued and the model needs to be shared with other to provide a more effective system for service users.



Figure 23: Sanam: Volunteer at food bank

Sanam reported how the service has improved for service users, including more effective use of fuel vouchers, the Household support fund etc. Sanam regularly works with service users at the food bank and highlighted *“the positive impact of the digital inclusion course provided by the council”*. She thinks that *“the project has helped the council to gain insight into the real problems that service users face”*. Furthermore, the training that she has undertaken within this project has helped her to provide improved support to service users. Sanam is fully supportive of the continuation and expansion of this project and feels that local government should do all that it can to ameliorate the effects of poverty on individuals.



Figure 24: Jack: Advocacy and wellbeing support worker and administrator at the West End Food Bank

Jack highlights the benefits of the new system in terms of across council service departments referrals. He states, *“this saves individuals having to repeat the same information and supports clients who have the need for more than one service. The improvement of data collection reduces the chances of people slipping through a further safety net and early intervention supports better outcomes”*. Having a council presence on site makes people feel that the council cares about its all its residents and the new system enables individuals to be supported more quickly. In terms of the project, Jack thinks that given the current cost of living support, it is work that can’t just stop.



Figure 25: Courtney: Advice and crisis engagement worker, West End Food Bank

Courtney’s role within this project is to support food bank staff, volunteers and clients in welfare benefits, crisis support and debt advice and any other worries. Courtney is the first point of contact for clients and leads on the escalations processes. She is of the view that, *“the project has significantly supported the work of the council by a) co-developing best ways to engage with clients and collect data and b) reducing levels of uncertainty. It has also increased awareness of what services the council offers. The streamlining of services has meant that clients get a much quicker response and support, and this is especially important for those in crisis”*. In terms of the continuation of the project, Courtney points out

that it has increased our capacity for support to the point where we couldn’t go backwards without encountering issues with safeguarding.



Figure 26: Clare: Senior Active Inclusion Officer, Newcastle City Council

Clare leads in coordinating Newcastle’s response to financial inclusion and is currently supporting the development of food pantries across the city. She points out that, *“one of the main benefits of the project has been access to people (multi-directional between organisation and service users) to people they wouldn’t normally contact. The project has enabled both organisations to develop a shared vision on how to respond to poverty across the city, with service users directed to the right level of support much sooner”*. Clare stated that the project has transformed people’s lives and should continue.



Figure 27: Ash: Safeguarding Officer, Newcastle City Council

Ash highlighted how the council has adopted new ways of working, providing accessible support across several areas to food bank users. *“The project has benefitted the foodbank by offering on-site representation for safeguarding support. It has also made a significant contribution to building pathways to different parts of the council, and to break down silo working. Service users have gained a quick and accessible access to council services”*. Ash fully supports the continuation of this project and thinks that the model could extend to other organisations.

Study 3

To further evaluate the impact of the project on service users, anonymised data collected by Newcastle City Council and the West End Food Bank were shared with the research team at Northumbria University. All data were anonymised and any data that would enable the identification of an individual were removed from the data set prior to sharing with the research team. Data for each individual who had participated in the PfPP project were collected at two time points. First, when individuals first participated in the PfPP project and secondly, when an individual’s case was closed. At the time of analysis, a number of cases remained open, hence these cases were not included in the following analysis. Data were cleaned and checked by the lead researcher. The sample sizes vary slightly against each outcome measures as some participants choose not to answer some questions. All outcome measures were recorded on a scale of Likert Scale of 1-5. The research

team conducted statistical analyses on the following outcome measures: General health and wellbeing, financial security, confidence in money management, money worries, knowledge about where to get help and advice on money worries. Analysis of the quantitative data showed a significant improvement in general wellbeing as a factor of time ($t(198)=26.14, p < 0.001$). The mean score at Time 1 = 2.07 (.63), and the mean score at Time 2 = 3.71 (0.56), (std. deviation in parentheses).

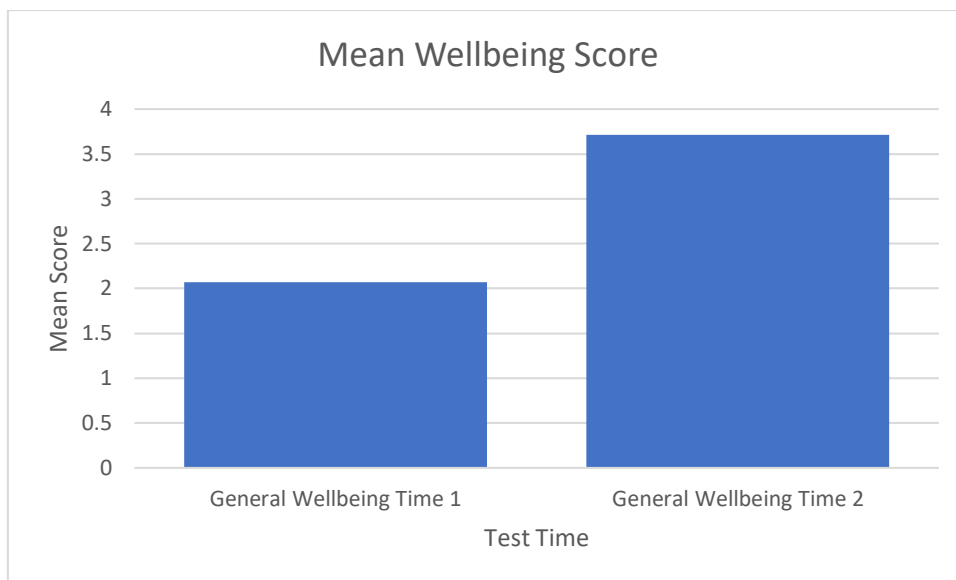


Figure 28. Mean wellbeing score according to test time.

In terms of financial security, individuals felt more secure after having participated in the PfPP project, ($t(192)= 24.40, p < 0.001$). The mean score for financial security at Time 1 = 2.21 (.57), and the mean score at Time 2 = 3.47 (.64).



Figure 29. Mean financial security score according to test time.

There was also a significant improvement, from test time 1 (mean = 2.13 (.65) to test time 2 (mean = 3.66 (.64)) in people's ability to manage money ($t(192)=28.40, p < 0.001$); alongside a reduction in

worrying about money from test time 1 (mean =3.86 (.78) to test time 2 (mean=2.38 (.69), (t(193)=20.90, p <0.001). Finally, people’s knowledge in where to seek help and advice significantly improved (t(193)=40.57, p <0.001) from test time 1 (mean =1.84 (.88) to (mean =4.72 (.57)).



Figure 30 & 31: Mean scores for money management and money worries; respectively, according to Time.

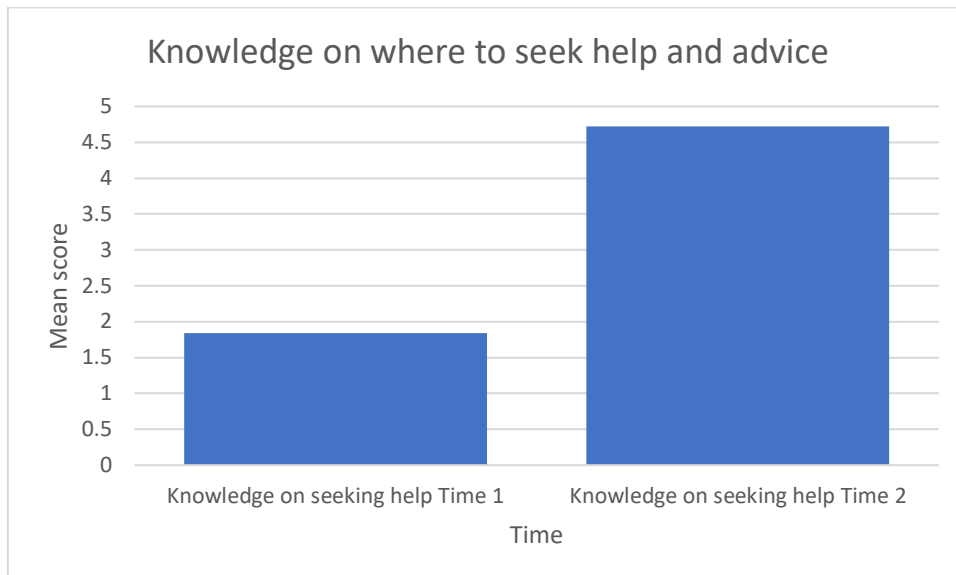


Figure 32. Mean scores for knowledge on seeking help and advice according to time.

Although this study did not include a control group, the findings clearly show that service users reported an improvement in general wellbeing, improved financial security, increased confidence in how to manage their money, increased knowledge on where to seek help, and a reduction in levels of stress. Given the current cost of living crisis, and rising inflation, these findings are extremely encouraging.

Study 4

The aim of Study 4 was to investigate service user's perceptions and views about the PfPP project. Specifically, to explore their views on whether their financial situation, employment status, health status, housing situation, social issues, etc. has improved after engaging with the PfPP project. This study will also seek to capture what interactions participants have had, if any, with Newcastle City Council, other services including the voluntary sector and government departments and the length of time taken to a) start to deal with service user enquiries and b) reach a resolution. In addition, the study will seek participants views of any interactions, and what factors, if any, have helped. Given the complexity of the findings of Study 1, that highlighted that service users' cases tended to be unique and highly complex, alongside the fact that the focus of the project is on contemporary phenomena within a real-life context, the research team adopted a case study approach, similar to the approach adopted in Study 1.

Method

Recruitment

Non-probability purposive sampling was used to recruit four participants who lived in the Elswick, Benwell, and Scotswood wards of Newcastle. All participants had received advice, guidance, or support under the PfPP project in the west end of the city. Demographic data on participants are presented in Table 2 below.

Table 2. Demographic data of participants

Demographic	Response options	Number and (%) participants
Gender	Male	(0%)
	Female	4 (100%)
Age (Mean)		41
Age range		33-51
Ethnicity	White British/Irish/ Scottish/Welsh	4 (100%)

Materials

Letters of invitation, research information sheets and consent forms pertaining to the research were developed and a semi-structured schedule of questions was prepared to guide interviews.

Participants were informed that their interview would be based upon an abbreviated version of their case history held by Newcastle Food Bank. Prior to each interview, each individual was provided with a written copy of their individual abbreviated case report to read, and consent was sought from each individual participant for their abbreviated case study to be shared with the researcher. All participants provided their consent. Furthermore, all interviews took place with the staff member of the West End Foodbank, that had worked with participants and had knowledge of each individual case. This staff member was present throughout the entire interview. The schedule comprised a series of open-ended questions that enabled participants to talk freely about their individual case report and to add any further information or comments that they thought were important. The researcher asked questions to check the accuracy of each case report and to probe the service user's experiences, specifically those experiences that related to the PfPP project.

Procedure

A letter of invitation, an information leaflet, a consent form and a demographic questionnaire were sent to the food bank manager who distributed them to people who had participated in the PfPP project, and whose case had been closed. A date and time for data collection was agreed. Prior to the day of data collection, PfPP users who had already verbally consented to participate in the study were provided with an interview time slot. At the start of each interview, participants were reminded about what the study was about and advised that all information would be anonymised and that they could withdraw their consent at any point up to one month after data collection. Formal written consent was provided by all participants at this stage, as the research team thought it important to provide the participant with the opportunity of meeting the researcher prior to providing written consent. Interviews took place in a quiet room and a member of the West End

Food Bank staff read aloud the participant's individual case study, pausing at the end of each paragraph to allow the participant the opportunity to agree, disagree or add further information. Participants were given the opportunity of choosing their own name for their case study. At the conclusion of each interview, the researcher debriefed participants and gave them a debrief information letter including the researcher's contact details in the event that they might want to withdraw from the study.

Data analysis

Any additional information or amendments to case studies were added during the interview and following any amendments or additions, the paragraph was read out aloud, again, to the participant. Only once the participant was totally happy with the content, did the reader move onto the next paragraph. An illustrator worked alongside the lead researcher to illustrate each case study but to protect the service users' identities, the illustrator was not present during data collection. Each case study is presented as an individual participants history of engagement before, and then during PfPP. This provides a full picture of the participants' issues and how engagement with PfPP significantly supported participants across a range of issues.

Case Study 4.1: Catherine



Figure 33. Case Study 4.1. Catherine

Catherine first started engaging with the West End Food Bank in April 2022 when she reported a large leak coming in through her bathroom ceiling which had affected her electrical wiring and was causing a burning smell in her bathroom when she used her lights or other appliances. Catherine had reported this to environmental health, and they had visited her property around 5 weeks earlier resulting in some repairs being carried out. However, since then she had heard nothing else. She advised staff at the food bank that she had experienced numerous issues with her accommodation, and the landlord, in the past and was keen to move to another, more suitable property. Staff on the PfPP project based at the food bank supported Catherine to open a new account with Your Homes Newcastle and registered her as needing support. Environmental Health were reluctant to help in the beginning with Catherine as they believed many of the issues in her house were caused by Catherine as this is the information, they had received from the landlord. After looking into this matter in more depth, PfPP staff were able to prove that this was not the case.

As the next couple of months passed by Catherine dropped in to the PfPP sessions randomly, mainly when she needed support. Due to her poor mental health, Catherine could not cope with routine appointments or busy sessions so would often not attend. After speaking with Catherine, staff at the food bank found out that Catherine had no support in place regarding her poor mental health. PfPP staff at the food bank referred Catherine to safeguarding and Mental Health Concern who started to work with her on getting the correct support in place, as Catherine was unable to ask for and unable to access this support independently.

As PfPP staff at the foodbank continued to update the information on her housing account Catherine's landlord became very demanding and was encouraging her to move out of the property. Although, the landlord had not completed any repairs to the bathroom, resulting in part of the bathroom ceiling collapsing, with clear sight through the ceiling into the above property. Under such circumstances, Catherine could no longer use her bathroom as her upstairs neighbour could see her directly in the bath below and naturally, she was uncomfortable with this. Staff continued to update her Tyne and Wear Homes account however, she was not a priority as she had somewhere to stay.

Catherine approached staff at the food bank in July and she stated that she had not received her letter from council tax inviting her to claim her Energy Support Payment of £150, despite claims having been sent out months earlier. Staff tried to claim this payment online with the details from Catherine's council tax bill however, the claim kept generating an error code. Staff called the Council Tax Department to enquire about this issue and were advised that Catherine's landlord had reported she had moved out of the property in April, and he had since claimed this money himself. Staff collated all the necessary information and evidence to prove Catherine was still living in the property and after this was looked into, she was awarded a payment of £150.

A couple of months after this Catherine received an eviction notice from her landlord due to rent arrears which she stated she did not know she had. Catherine was receiving her rent within her Universal Credit and had always paid this in cash to her landlord. However, unbeknown to Catherine, her landlord had sold the property and so Catherine was paying her rent to her previous landlord who no longer owned the property. Catherine became very annoyed about this as she had still not had any repairs completed on her home and felt she was being targeted by her landlord. The cost of living was rising, and she was struggling to make ends meet. In addition, her 'new' landlord was trying to recover rent arrears. Staff worked with Catherine to speak with her landlord who advised us he was actually a family member of her previous landlord and would be able to organise transfer of rent. Despite this, Catherine's new landlord left the eviction notice in place as he wanted the property back.

As the weeks passed, Catherine's landlord got back in touch and stated that Catherine had not been making any further payments towards her rent and now she truly was in arrears. When staff spoke to Catherine, she informed staff that she was not paying her rent due to the state of the property and no repairs having been completed. Staff advised her she could not do this and needed to be paying her rent regardless of the state of the property, whilst staff tried to organise the repairs to be undertaken or to find Catherine a new property. After many discussions, Catherine confided in us that she was involved with a loan shark after borrowing a small amount from a 'friend' and being charged 'double bubble' she had been using her housing costs to pay this as she had been threatened and was more fearful of this than the arrears. 'Double bubble' is a term used to signify

that any unpaid loan, increases by a factor of two. For example, if a person is meant to pay a loan shark £20 a week and does not pay the money back to the loan shark, then the next week the person will need to pay the loan shark £40 and so forth].

Due to Catherine now having issues with housing, arrears and a loan shark staff at the food bank referred her into the Active Inclusion Multidisciplinary team at Newcastle Council for hands on support in all areas. Within 1 month of this referral, she has had intense support when needed and has been prioritised due to her housing issues. She has been offered a brand-new flat in supported accommodation and has recently moved into the property. The PfPP project has supported with Catherine in how to deal with her loan shark issues and is working with the Illegal Money Lending Team to give them all the relevant information. This is possible as she is now living in a much safer environment. Catherine's mental health has improved significantly since she has been offered a new property and the change in her has been drastic. The PfPP project will continue to support her in her new property.

Case study 4.2 Aaron and Kate



Figure 34. Case Study 4.2. Aaron and Kate

Aaron and Kate are a middle-aged couple, both claiming disability benefits due to severe mental health conditions. They are partners but live separately. However, Kate often has to stay at Aaron's home due to how extreme his mental health conditions can become. Over the past 2 years Aaron's mental health conditions have worsened drastically due to the state of his property. At the start of

the Covid-19 Pandemic Aaron experienced water leaks into his property, with water coming in through his ceiling from the flat above him. Due to the pandemic, he was unable to get anyone from his letting agents to come out and assess this problem. This caused damp and mould throughout two bedrooms and the living room which has continued to worsen. Aaron also experienced a leak in his bathroom, due to a faulty flat roof, which has resulted in issues with the flooring in the bathroom. The windows in his bedroom are broken at the hinges and are also letting water into the property. Aaron has tried to tape his windows shut to help keep his home warm, however he has been unable to make the seals watertight and draught proof. Aaron's back door also broke in half across the middle of the door meaning it opens in two parts, like a barn door. This is the only problem within Aaron's house which has been dealt with by the landlord, but rather than replace the door, the landlord fitted another lock so that each part of the door could be locked. However, the door is in such a poor state that it is not watertight and lets water into the property. The worst problem Aaron has had in his property, however, is a broken handrail located on an external wall. Due to rotten wood, this handrail came off the wall whilst Aaron was using it. Aaron was found in a pool of blood in his back yard by his partner, and subsequently hospitalised. He suffered a black eye, split open head wound and lost his front teeth. Aaron had tried multiple times to report these repair issues, however, during the pandemic his letting agent stopped taking requests over the telephone only allowed tenants to report housing repairs through an online form on their website. Aaron was unable to do this as he cannot read or write due to dyslexia, so he was unable to submit repair requests in writing. Even after explaining this to his landlords, they continued to refuse to take any requests over the phone and stated he would have to approach another organisation for help with this. This caused Aaron to become very upset, and he began to withhold his rental top up of £55 per month until the work was completed. Unfortunately, this did not convince the landlord to complete the repairs and instead they filed to evict Aaron.

Due to this Aaron presented to Newcastle Foodbank for the first time as he had received a letter from Newcastle Courts advising he is being evicted and he should seek legal advice due to this, however, due to his distress he had forgotten to bring the letter with him. Aaron and Catherine, we're both visibly distraught and were at breaking point about this as they did not know where to turn to or what to do. They were both very unwell due to the cold and leaks in Aaron's property and we're unable to put on anymore gas and electric as they had put on a huge amount over the past few weeks and were not able to afford anymore until they were paid their benefits again. I referred Aaron over to Newcastle Council for emergency gas and electric vouchers and Environmental Health for help surrounding the state of his property. They advised they had previously worked with this client and viewed the property due to the state of repairs needed, he had reported these to the landlord and was assured they would be completed, however, was very frustrated to hear nothing had been followed up with this and they had been allowed to continue to deteriorate. I reported all

the repairs needed to Aaron's property online with his letting agent and I also called them regarding the eviction, however, after discussing it with them they advised they are not evicting the client and it is the owner of the property who is proceeding with the eviction. Later that evening Aaron received £98 from Newcastle Council to help him over with his gas and electric, which allowed him to heat his property again.

A couple of days later Aaron dropped into another Foodbank session with his paperwork from the courts which stated his landlord is going for an accelerated eviction and possession notice to remove the client from the property, this letter was dated 2/2/2022 and advised client must complete his defence form within 14 days and return this to the courts otherwise they can go for the possession notice without a hearing. The day he attended the foodbank session was the 14th day, so I went through this with him and then sent him to the courts straight away in a taxi which was provided by Newcastle Foodbank. I also spoke to Environmental Health, and they advised they will attend the property the next week to look at the issues and Carole, Pathways Manager, agreed that she would attend this to support them. I then also referred Aaron to Shelter Newcastle who agreed to take on his case for specialist legal advice surrounding his impending eviction.

The meeting with Environmental Health was very successful for Aaron, they took lengthy notes on all of the issues with the property (including ones which were reported by themselves to the landlord years previous and were still outstanding) and stated they must be carried out urgently as the property was in such bad condition, they would not usually allow this to be rented to anyone as he believes this goes against their basic human rights. A further meeting was scheduled for a week later to allow the Head of Maintenance to attend the property and to go through the work which needed to be completed, however, in the meantime Aaron had another flood due to a leak from the upstairs property which caused him to have a fall and tear a ligament in his calf. Due to these injuries, he had to use a moon boot and two crutches to get around for over a month after the accident.

Work quickly commenced on Aaron's property; however, this did not come without its setbacks also as due to a string of further leaks from upstairs Aaron's bedroom ceiling had caved in and was half down leaving this room unoccupiable. Further dates were set following another meeting with Environmental Health and the Letting Agent for this to also be fixed. However, at this meeting Aaron was served with a further Notice of Seeking Possession (NOSP) however, had a cover letter stating if he could pay £616 before 2nd June, they would allow him to stay in the property. This was very confusing to both us and the legal team at Shelter who were dealing with his first eviction notice however, they advised they would follow this up. A couple of days later, Alongside Aaron we called the court and organised for a copy of the original court paperwork to be sent out as this would allow this to be scrutinised by Shelter's legal team to try and find something which may invalidate the eviction and explain why a second NOSP has been served.

After a couple of weeks, this was received and Shelter advised the reason the first NOSP was invalid and had been withdrawn was due to them claiming Aaron had never paid a deposit or bond however, as we disagreed with this on the possession notice completed months earlier and provided proof of receipts for this the full eviction was now invalid. Due to this secondary NOSP being served to Aaron and his being unable to pay £616 in such a short space of time he was feeling very overwhelmed and did not want to stay in this home regardless of the repairs being slowly completed as he felt he was being forced out by the landlord one way or the other.

We helped Aaron and Catherine engage with the council's housing teams as well as YHN and informed them of his impending eviction and the state of the repairs and due to this, he was seen as having a priority housing need. Within one month of this Aaron and Catherine were offered a new home together with YHN which was in a lovely area and did not need any work doing to it. They were overjoyed and managed to move out of their old properties before any further eviction proceedings even happened.

They are now living happily in their new home and are working on decorating this and getting it to be a place they want to spend their time in and live in together, rather than somewhere they always want to be away from due to other issues.

Case study 4.3. Debbie



Figure 35. Case study 4.3. Debbie

Debbie first approached the Foodbank in April 2022 after driving by the church and spotting a sign for their 'Something Wonderful', art classes. She was struggling a number of issues and was experiencing severe anxiety and depression, and hence, was not engaging with any services.

However, she felt compelled to enter the church. As soon as she entered the church, she was completely overwhelmed by the support she instantly felt around her.

After a few weeks of trying to build a relationship with Debbie she began opening up to food bank staff about her past and how she had come to suffer with her mental health conditions. She explained to staff how she had been a victim of a violent attack, and this left her with severe anxiety causing her to lose her job. Since the attack, Debbie had tried to get some small part time jobs but she had not been able to keep these as her employers could not be flexible with her working hours based on her conditions.

PfPP staff then began speaking to Debbie about her low household income and how she was struggling to manage on this. After going through a benefit check, PfPP staff discovered that Debbie had not put the information about her health conditions on her Universal Credit account and was only on the standard allowance of Universal Credit. Staff declared a change of circumstances for this and started the process for her to receive a UC50 form. Staff also suggested to Debbie that she should put in an application for PIP, as due to her conditions, she would also be eligible for this benefit.

A few weeks later, staff received Debbie's UC50 form and they worked with Debbie to complete the necessary paperwork. Due to Debbie's health conditions, staff predicted the Debbie would be awarded Limited Capability of Work- and Work-Related Activity of Universal Credit which would increase her income by £4,251.36 annually. In the following couple of weeks, staff also completed Debbie's PIP forms and predicted again that she should also be awarded this. Again, we hoped this would boost her income by an additional £4,487.60 annually.

A couple of weeks after completing these forms, Debbie came to another session and advised staff that she had been given notification of when her medical assessments would be for her two benefit claims, and she was very stressed and needed support with these. PfPP staff went through both medicals with Debbie and each time she had a very empathetic assessor who seemed to fully understand her conditions and how these were affecting her daily, however, we warned Debbie that even though a medical can seem positive it doesn't always guarantee a successful outcome.

However, within a few weeks of her Universal Credit assessment, Debbie dropped into the foodbank with an outcome letter on her journal that she didn't quite understand. This letter confirmed she has been awarded the Limited Capability for Work and Work-Related Activity and meant she would be entitled to an extra premium each month, and this should also result in a partial backdate payment. By the end of the week, Debbie received her backdated amount of £1,062 paid directly into her bank account and had her Universal Credit increased by £4,231.56 annually. Debbie was overjoyed with

this and couldn't believe she had missed out on this money previously because she did not know how to claim it or that she was even entitled to this money.

Just 2 weeks later, Debbie dropped into a further session to advise staff that she had also been successful with her PIP claim and had been awarded the Enhanced Rate of Daily Living and Standard Rate of Mobility. She has already received her backdated award into her bank account of £2,821.09 and will receive an extra £6,076.60 annually.

Debbie had been affected severely due to the increase in cost of living and these additional benefit claims have now given her sufficient income so that she is not just making ends meet, but also being able get back on her feet and move ahead with her life confidently. Debbie is now volunteering as part of the Pathways team within the Foodbank and works very closely with clients, issuing them vouchers for food parcels as well as triaging these clients and ensuring they receive any further support needed.

Case study 4.4. Louise



Figure 36. Case study 4.4. Louise

Louise has attended the Foodbank for many months and has previously dipped in and out of Pathways for support when needed. However, previously she has never had any long-term period of support. Unfortunately, Louise's health has declined rapidly over the past few months due to worsening physical and mental health conditions which she was struggling to cope with. Louise is currently claiming Employment and Support Allowance, however, she was previously rejected for PIP

and wanted support putting in another claim as she felt she should be eligible for this benefit. After discussing her health conditions and how she manages these, PfPP staff agreed to support Louise to submit a claim for PIP and went ahead to order her forms.

These forms arrived within a couple of weeks, and PfPP staff booked a further appointment to go through these forms with Louise. After going through this application with Louise, it became very apparent that her conditions, particularly her mental health, were a lot more severe than staff had initially thought. Due to this, staff discussed the mental health services offered within the city and the support she could receive to try and help with her health. However, staff discovered that Louise had already adopted this route and was on a waiting list, which could take months before she was able to start therapy. Louise was very upset about this waiting time and finding it hard to cope without mental health support. To support Louise during this time, staff encouraged Louise to speak to a mental health support worker who was working out of the church. This gave Louise some sense of relief and hope.

A couple of weeks later, Louise attended the church with multiple stroke symptoms and was very tearful and emotional as she did not know what to do. Staff helped her call 111 and were advised due to the severity of this an ambulance would be needed. An ambulance arrived within 45 minutes and a thorough assessment was undertaken by paramedics. Despite being encouraged to go to A & E, Louise rejected this offer. Unfortunately, the following week Louise returned to the foodbank and advised staff that she had experienced a further stroke over the weekend and had been admitted to hospital due. After discussing this matter with Louise, PfPP staff decided to put in a safeguarding referral as Louise was struggling with her mental health and needed further support managing her health conditions. Louise was happy with this and regularly engages with the safeguarding team when she feels she needs this support.

Around three weeks later, Louise attended the foodbank seeking further support as she had received an appointment for her PIP medical assessment. Staff went through the process with Louise over the phone. Louise struggled with many areas of this medical due to the previous traumas she had to discuss. However, she went through the process in the hope that she would be able to provide the assessor the full picture of her health conditions. Due to the understanding nature of the assessor and how the medical progressed, staff are very hopeful that Louise will receive a positive outcome and staff predict that she should receive both the Enhanced Rate of Daily Living and Standard Rate of Mobility. This would increase her income by £6,076.20 per annum, in turn, helping her cope with the rising cost of living and extra costs she must try and cope with as a result of her health conditions.

General Discussion

Overall, our independent research with **service providers** and importantly **service users** suggests that the PfPP project has introduced an effective and impactful system to support people with complex issues and needs. This evaluation of the implementation and impact pathways of the PfPP project, involving both qualitative and quantitative methods, demonstrates a number of significant findings, both at the individual and organisational level. The key findings will now be discussed in detail.

There are a number of key findings from this project but, perhaps, one of the most important findings is that co-designing a new system of working between Newcastle City Council and the West End Food Bank has improved service provision to meet clients' needs from across a range of services in terms of efficiency, early identification and faster resolution of individual cases. Furthermore, embedding a council employee within the food bank, to work collaboratively with food bank staff and volunteers, has increased knowledge set, trust between partners and as a result improved the efficiency of services, reduced duplication within processes, and improved triage. This in turn has fostered further trust amongst food bank staff, volunteers, and service users, and reduced a 'us' and 'them' mentality. Moreover, enabling and supporting council employees to work alongside food bank staff and volunteers in co-designing a person-centred system that is shared across the council and the West End Food Bank has also resulted in improved early identification of adult and child safeguarding issues, and enabled the co-production of an effective shared data management system that supports early identification and intervention, monitoring of individual cases, and prevents people from 'slipping through the net' and reducing the number of people in crisis. This new person-centred system enables the food bank to work collaboratively with the council, the DWP, and other organisations to reduce the need for service users to repeat their, often harrowing, stories multiple times.

Furthermore, this innovative system has been particularly effective in identifying the root cause of an individual visiting the food bank in the first place, which is often a lack of household finances, debt etc., whilst also providing, in parallel other forms of support (e.g. addressing housing needs, health needs, mental health support etc.). Importantly, the PfPP project's co-designed system has resulted in increased trust between service providers (Newcastle City Council and the West End Food Bank), service users, and has enabled service providers to quickly identify and act on concerns that involve serious adult safeguarding issues. These concerns can now be quickly escalated directly to the appropriate council services, without having to engage with an intermediary referral organisation. As the system embeds, we predict that this scaffolded support, accompanied by early intervention, will result in a decrease in the number of serious safeguarding cases over time.

In terms of the training provided by Newcastle City Council, this has made a significant difference to the skill set of food bank staff and volunteers. For example, food bank staff and volunteers now know what questions to ask clients, what are the most appropriate referral routes etc. Likewise, food bank staff and volunteers have provided informal training to council staff, specifically to ensure that the new system remains person-centred at all levels of the system, enabling council employees to see poverty 'through an alternative lens'. However, it is important to note that many food bank users hear harrowing stories and in addition to supporting clients, wellbeing support has now been introduced for staff and volunteers. Likewise, training and scaffolded support has been provided to service users (e.g. digital skill training), alongside access to digital devices and wifi to enable clients to update social security journals etc., increasing service users autonomy and feelings of self-worth.

The case studies in Stage 1 and in Stage 4, clearly highlight the need for this innovative project and the impact of an effective person-centred approach, whilst, at the same time, highlighting that food insecurity is only one of the negative outcomes of living in poverty. Residents may initially seek help from the food bank in terms of food insecurity, but many are seeking support to address a host of problems, ranging from environmental, physical, social, educational, health and psychological problems. Research has repeatedly shown that the majority of people experience food insecurity due to insufficient household income, and household income is one of the strongest predictors of food insecurity (Food Foundation, 2023). However, it is apparent that in order to effectively support the range of residents using the West End Food Bank, support services need to adopt a coherent, strategic, and gestalt approach to address individuals needs through adopting a 'Cash first+' approach. In this paper, we use the term 'Cash first+ approach' to reflect that supporting residents to maximise their household income is important but needs to be accompanied by a range of other support systems. Whilst NGOs and charities campaign for the living wage, and a minimum household income that covers all the essentials through changes to the UK Government's policy, the current reality at the local level is that cuts to the social security system has resulted in many individuals, who are in receipt of all their eligible benefits, are still living in poverty; and cash-strapped local authorities are having to fill 'the gap'.

The quantitative findings, reported in Stage 3, show positive outcomes, across time for all outcome measures and whilst we cannot demonstrate causality in the study design, when these data are considered in relation of the other studies within this report, we are confident in stating that the overall outcomes for individuals who have been supported by the PfPP project are extremely positive.

The Ripple Effects Mapping (REM) produced a number of impact pathways and significant impacts. These pathways are discussed and illustrated in Stage 2 but will be summarised here. REM was effective at detecting both expected and unexpected outcomes. It also supported people from

different organisations in a) developing a shared language, b) considering whether they had evidence to support their claims, and c) considering which actions should be continued, amended or stopped within the PfPP project. In particular, the REM workshop highlighted that the PfPP project had resulted in financial gains for service users, supported early identification of adult safeguarding, drove efficiencies and removed duplication within systems, improved data capture and monitoring, and brought organisations to ensure a person-centred, efficient and coherent system. The mechanisms leading to these impacts were broadly clustered around four key themes. Namely, the role of the steering group, ensuring excellent staff and volunteer training, improved stakeholder relationships and systems, and maximising service users household income.

Recommendations

The first recommendation, based on the findings of this evaluation, is that funding for this vital project should continue. Across all the studies within this report there is clear evidence of need, and clear evidence of the PfPP project's effectiveness. Second, REM should be used by the council to further develop the project and roll out the system across other community organisations to promote the establishment of an equitable system across the city. Some further work is required to refine data collection systems to collect more robust data on individual outcomes. Fourth, the system should be regularly reviewed through continual monitoring and adapted when required. There is a clear need for more joined up thinking and linking to the NHS. Upon visiting the foodbank, it was clear that service users were experiencing a number of health-related issues (e.g. poor dental hygiene). This report recommends that the council should work more closely with the NHS to explore co-location of services and preventative health education. For example, an observation made by the lead researcher was that a mobile pharmacy parks in a store car park directly across from the church. This mobile unit can carry out some basic health care checks but appears underutilised by member of the local community. Finally, the council needs to conduct a needs assessment, mapped to local assets and council funded projects/services across all wards to identify how this approach could be implemented in other areas of the city.

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