

# **FINAL PROJECT REPORT**

**For**

- a) East Herts Performance Reward Grant**
- b) East Herts Health Inequalities Fund**

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**Appendix 1: Client Data**

## 1) Introduction

This report outlines the final outcomes and analysis of three strands of funding to extend the provision of youth counselling in East Hertfordshire to meet the one of the targets of East Hertfordshire's District Children's Trust Partnership Children and Young People's Plan. This was project managed by Cross Herts Community Counselling (CHeCC) who provided the strategic overview to bring service levels up to those enjoyed elsewhere in the County and ensured delivery complied with quality assurance standards. CHeCC's local delivery partner was Young Concern Trust, who are the local provider of community-based youth counselling in Broxbourne and East Hertfordshire.

These funding streams built on a successful pilot in Bishops Stortford funded by the East Herts District Children's Trust Partnership's Innovation fund. The pilot identified that the availability of counselling stimulated huge demand for the service, demonstrating that young people have a need for locally-available youth counselling provision. In response to the identified need CHeCC put in place a range of delivery from three sources:

- a) Performance Reward Grant (PRG) funding to continue expansion of delivery in Bishops Stortford and extend the expansion programme to Sawbridgeworth/Hertford
- b) CHeCC used Child and Adolescent Mental Health Service (CAMHS) funding to match these levels of delivery
- c) Health Inequality Fund (HIF) to extend this provision to Buntingford and surrounding villages

As the HIF has produced such a small sample of data, it is often not meaningful. For most of this report, therefore, HIF data has been combined with PRG data with comments added when there is something specific that can be drawn from the HIF data.

## 2) Quality Assurance

The counselling was provided in accordance with CHeCC's quality assurance framework, including:

- Counsellor has three year post graduate diploma in counselling
- Counsellor has experience of working with young people and has been CRB checked to work for YCT
- Counsellor is or is working towards being a member of the British Association of Counsellors and Psychotherapists (BACP) and complies with the BACP code of ethics
- Counsellor receives clinical supervision above the minimum BACP recommended level and undertakes continuous professional development
- YCT has required levels of public, employers and professional liability insurance
- YCT has robust policies for equality and diversity, health and safety, data protection, safeguarding children and safeguarding vulnerable adults
- YCT has appropriate processes for monitoring clients and keeping appropriate records on them

### 3) Overview

The table below shows the level of planned and actual delivery in the three areas where the funding intended to increase youth counselling delivery. The Table is colour-coded thus:

- Performance Reward Grant
- EHDCTP Continuation Funding
- Health Inequalities Fund

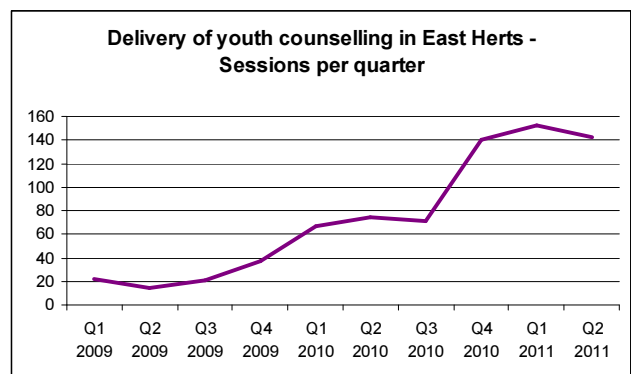
	Apr 2010 – Jun 2010		Jul 2010 – Sep 2010		Oct 2010 – Dec 2010		Jan 2011 – Mar 2011		Apr 2011 – Jun 2011		TOTAL	
	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual To date
Bishops Stortford			15	15	25	25	25	25	25	23	90	88
Ware & Sawbridgeworth	12	12	5	5	25	38	25	25	25	34	17	17
Buntingford			15	2	25	38	25	25	25	34	90	99
					20	0	20	37			40	37
<b>TOTAL</b>	12	12	35	22	70	63	70	87	50	57	237	241

The slight variations from plan of the delivery levels are because young people’s counselling has to respond to client need not to paper-based plans. The project was closed at the end of May, explaining the slight total over-performance. At that stage four clients were still receiving counselling and so that their counselling relationship continued, their provision has continued using CAMHS funding.

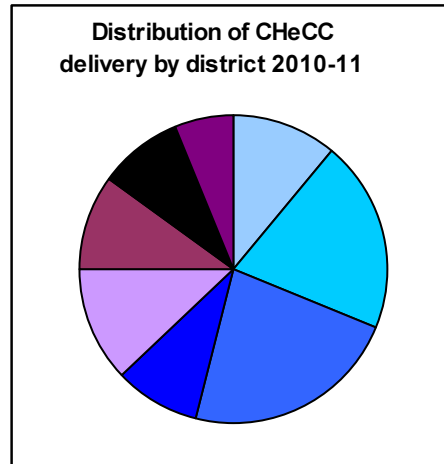
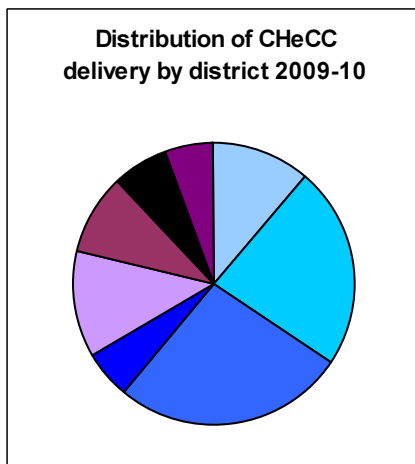
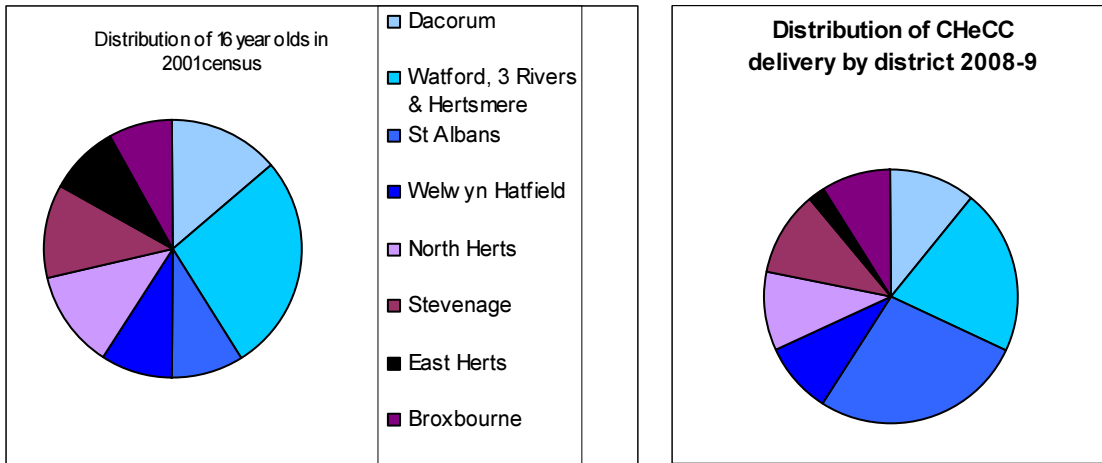
Through the 241 sessions delivered, 38 clients were seen, as follows:  
 Bishops Stortford – 15 clients  
 Sawbridgeworth/Hertford – 16 clients  
 Buntingford – 7 clients

### 4) Equity of Access

The intention of the project has been to improve equity of access to counselling for young people in East Hertfordshire. CHeCC’s data, as demonstrated by the graph alongside, shows that the level of delivery of counselling in East Herts has increased enormously as a result of the increased level of funding from East Herts sources.



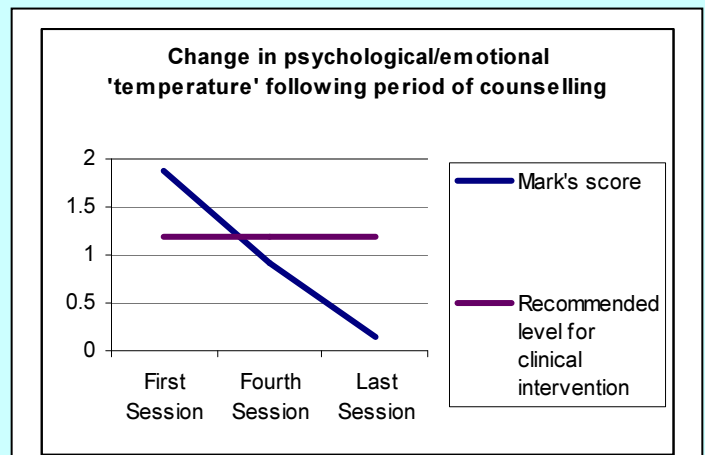
The graphs below show that this investment has brought counselling delivery in East Herts up to the level that one would expect considering the area’s population level compared to other parts of Hertfordshire.



**CASE STUDY 1: Mark from Buntingford, aged 17**

**Mark's story:** "I'd been harming myself quite a lot when mum and school noticed, they were angry, which made me hate myself more. The counsellor at Young Concern wasn't angry with me at all and helped me understand why I was doing this. She helped me talk about things I was unhappy about. I thought everything was my fault; mum and dad splitting up when I was 6 and my mum's boyfriend last year... having someone I could talk to helped me start to like myself a bit. It took quite a lot of weeks of talking, but at least now I'm not hurting myself..."

**Counsellor's summary:** "Although Mark presented with high risk behaviour, his key issue was quickly identified and we made very good progress in a short period. Over 6 sessions of counselling he identified what was making him unhappy and came to appreciate that he was punishing himself for things that weren't his fault. When he ended he had come to terms with his parents' break up and felt much more at ease with himself. The improvement in his CORE score dramatically shows the progress he made"

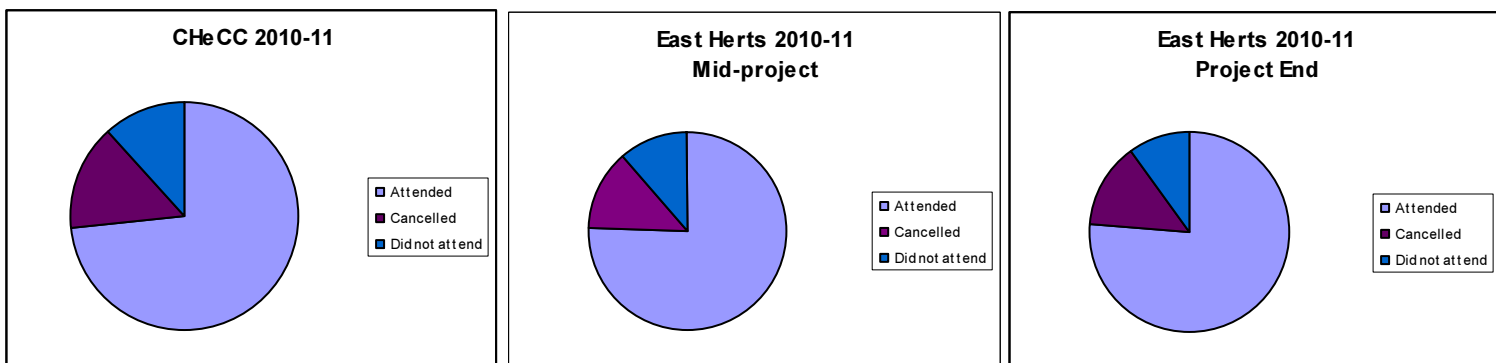


### 5) Level of engagement

Young people's level of engagement is always a complex mixture of regular attendance and chaotic interaction. Young people's level of engagement ranges from those who successfully engage (risen from 62% in the Bishops Stortford pilot to 79% this report) and those who through disorganisation or cold feet fail to engage effectively with the service. Levels of engagement on this project have been as follows:

- 26 young people engaged with counselling and received a sustained therapeutic relationship. The average number of sessions received by each client for this group has been 8 (higher than for the Bishops Stortford pilot) with an attendance rate of 76% (slightly below level of Bishops Stortford pilot).
- 4 young people have had mixed engagement. They attended more than one session, but having failed to attend have been returned to the waiting list
- 8 young people were offered appointments and failed to attend more than one session without a pattern of cancellation emerging

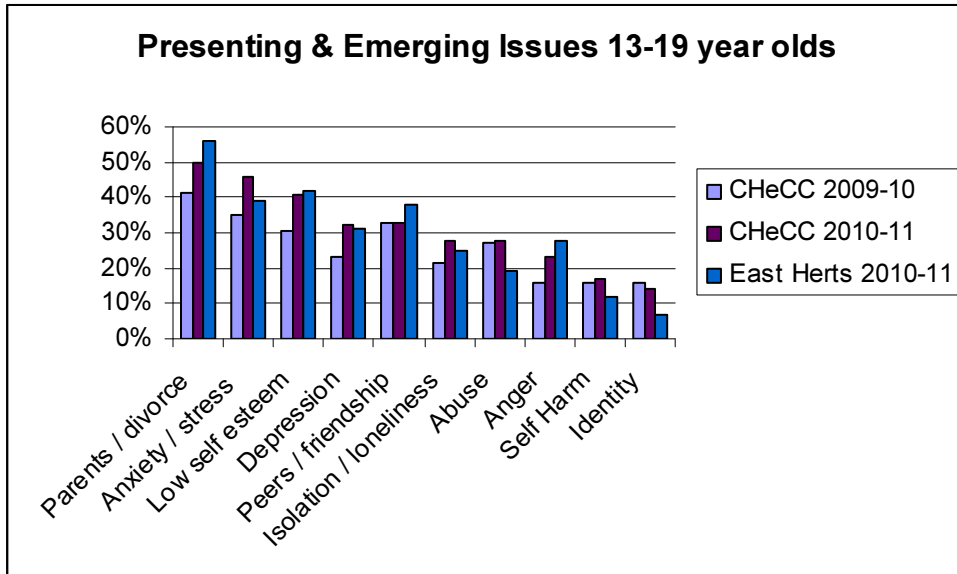
The graphs below show the levels of attendance and non-attendance for the project. Work with young people, especially young people who are troubled enough to seek counselling, always suffers from high levels of cancellation and non-attendance. The experience of this project is markedly better than that of CHeCC as a whole over the project period and the attendance rate improved as the project progressed.



All 7 HIF clients in Buntingford engaged with an attendance rate of 73%, somewhere nearer the CHeCC level reported above.

### 6) Presenting issues

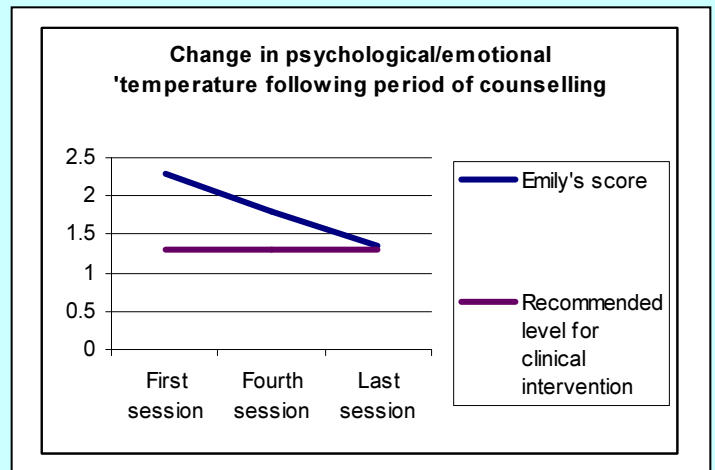
The chart below provides the ten most prevalent presenting issues identified by CHeCC data and compares the levels of these recorded by East Herts clients. The graph suggests that needs of this sample of young people in East Herts are lower on the more extreme issues (eg Abuse and Self Harm) and higher on the relationships issues (eg Parents and Friendship). The sample is too small for these variants to be considered significant.



### CASE STUDY 2: Emily from Sawbridgeworth, aged 18

**Emily's story:** "I'd asked to come for counselling as I'd been struggling at work with a horrible boss who treated me badly. I felt I was useless. Talking in counselling helped me to see how wasn't to blame all the time. I started to understand that even though I was criticised, it didn't make me wrong nor them right. I had been confident before and if I could start to feel like that again, then I could cope better. I started to feel good about myself again; that I was worth something."

**Counsellor's summary:** "Emily's confidence had been completely undermined by the negativity she faced at work. We worked together for 15 sessions in which time she learnt to focus on her behaviour and thoughts and stop taking too much account of others' behaviour. Towards the end of counselling Emily was developing stronger relationships and being more assertive. She became much more resilient and she was taking less time off work because of sickness and stress."



### 7) Signposting

The majority of young people either referred themselves (29%) or were signposted to the service by their families (48%). A few were signposted to the service by professionals: School or College (10%), GP (10%), Connexions (5%).

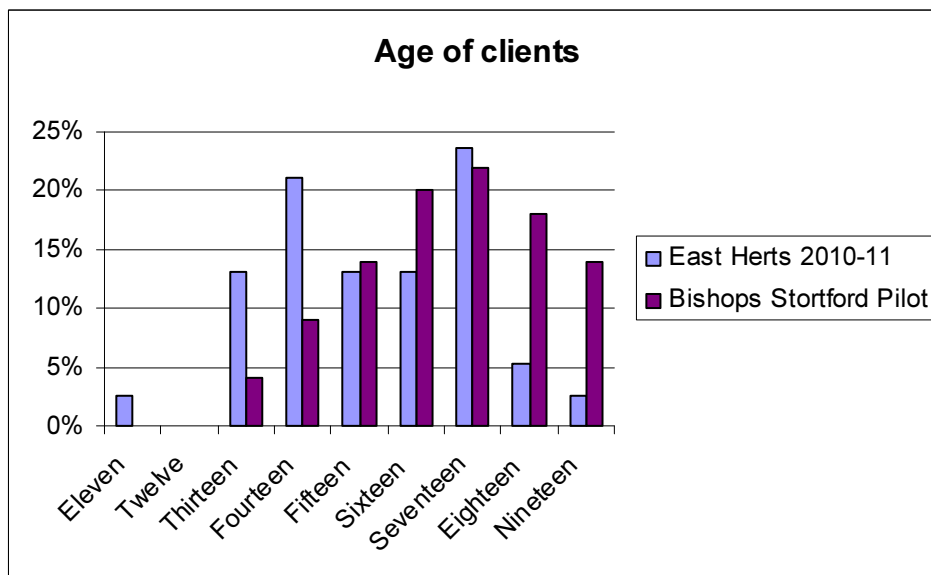
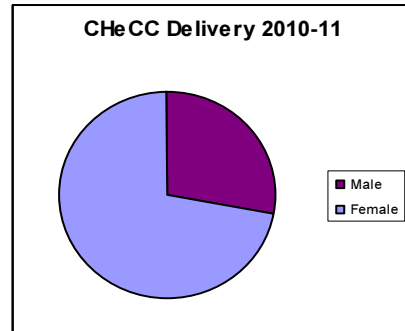
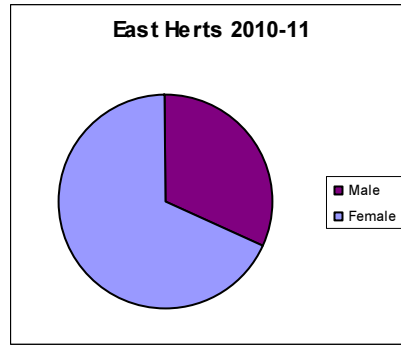
### 8) Gender & Age

Twelve out of the thirty eight young people who engaged with the project were male. Such a proportion is higher than experience elsewhere in Hertfordshire, as seen by the charts alongside. As well as the widely-believed view that boys open up less than girls, CHeCC's research suggests that girls tend to want greater levels of privacy and so are more likely than boys to seek counselling in a community rather than institutional setting, such as a school or doctor's surgery.

Over 85% of the non-engagers have been females. It is not readily apparent why this should be and would benefit from some further research.

The proportion of males attending through the Health Inequality Funding was even higher at 43%. With such a small sample, though, this is not necessarily significant.

The young people that have taken up the counselling tends to be from the lower end of the age range. This is in contrast to the pilot which tended to attract older clients, several of whom (17%) were not in Education, Employment or Training (NEET). All but two clients (5%) were in full-time education or employment.

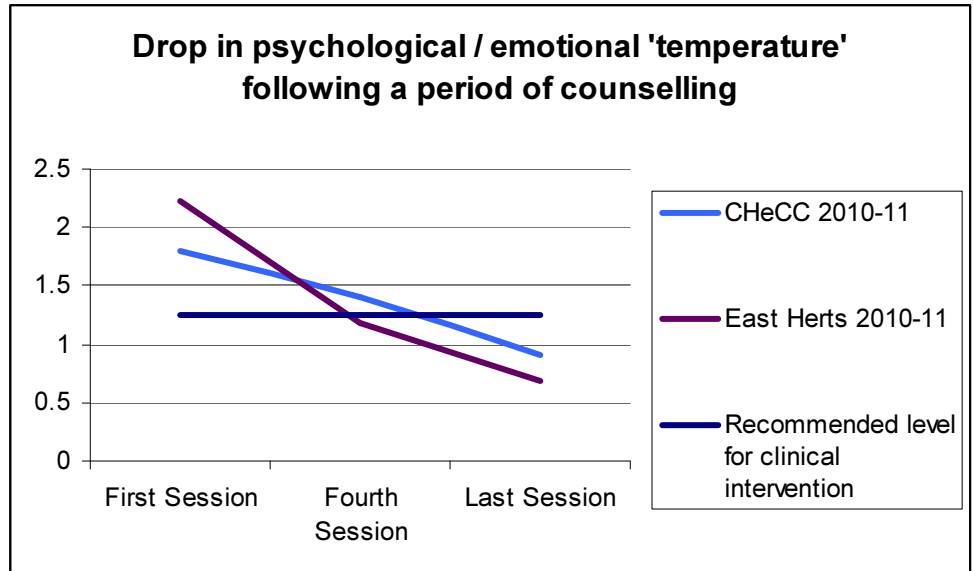


The age of young people in Buntingford was consistently higher with an age range of 14-25 and an average age of 17.5 compared to an average age of PRG clients of 15.5.

### 9) Impact

CHeCC's delivery is monitored using the nationally-recognised Clinical Outcomes through Routine Evaluation (CORE) tool. This involves the young person completing a questionnaire at the first, fourth and last counselling session. The score recorded at these evaluations provides a psychological / emotional

'temperature', which indicates the impact of the counselling on improving a young person's well-being. The chart below shows the improvement of an average young person at CHeCC and involved in this project and how their psychological / emotional temperature is brought below the level recommended for clinical intervention.

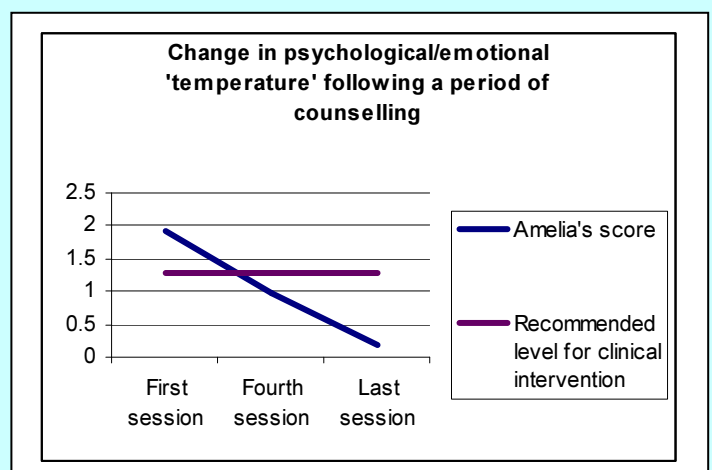


The improvement in CORE score for East Herts is better than that for the county as a whole. This, however, may be an aberration stemming from the smaller sample of young people analysed for East Herts.

### CASE STUDY 3: Amelia from Bishops Stortford, aged 15

Amelia's story: "I needed to talk to someone in private about my exams. For some time I had been feeling that I was different to everyone else, like I didn't fit in. This was playing on my mind a lot and I was finding it hard to concentrate at school and was falling behind in my coursework. My parents are really supportive but they didn't understand. The thing that helped me most in counselling was just being able to talk. My counsellor understood me and didn't try and reassure me like my parents. I've stopped worrying so much about what people think of me and life at school has got better, not just my coursework but with my friendships too. I still think I'm different, but in a good way."

Counsellor's summary: "Amelia was suffering from low self-esteem and a crisis of identity. Over the seven sessions we met, she developed a stronger sense of who she was and appreciated the need to balance the desire to conform with the importance of embracing her individuality. By the end of counselling she was reporting improved relationships with both her family and her friends. She was also feeling better able to cope with the pressures of her exam work."



The project recorded a number of individual impacts as a result of the counselling, including:

- 8 clients reported improved relationships at school and in the family
- 4 clients reported improved self-esteem
- 3 clients reported taking less time off work or school because of illness or depression
- 3 clients reported improved behaviour and performance at school
- 1 client reported achieving employment
- 1 client reported stopping taking anti-depressants

Many of these outcomes and the case studies provided above imply a reduced burden on the state in a number of respects:

- Reduced medication and GP visits
- Reduced call on emergency services and A&E because of self-harming
- Improved outcomes in education
- Achievement of employment and improved performance at work
- Reduced 'acting out' (anti-social behaviour or early criminal activity)

#### 10) Conclusion

Both projects have delivered to target and within deadlines. The reporting requirements of the projects are met by this document. The project can be considered a great success on two levels:

- a) The level of delivery of youth counselling in East Herts has been massively stimulated and has reached a level that is proportionate to the population of the district. This is a great achievement and has fulfilled one of the objectives of the EHDCTP.
- b) The level of performance has matched or exceeded that experienced across Hertfordshire as a whole. Attendance, gender balance and the improvement in CORE scores are all better than the average in Hertfordshire

As a result of this stimulus, the funding received by Young Concern Trust from CAMHS for the delivery of youth counselling in East Herts for 2011-12 is 10% of the County-wide CAMHS budget for community counselling. This is a dramatic improvement from the level of 2008-9, which was almost nil. Whilst this level of funding will far from meet the demand for community counselling from young people in the district, it does mean that a sustainable model of delivery has been established, which will be able to serve young people in East Herts for the foreseeable future.

YCT are extremely grateful to East Herts District Council and the East Herts HIF for their valuable support in achieving this dramatic progress and look forward to a long future of working in the district.

**William Allen**  
**August 2011**