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**Local Area Coordination (IOW)  
Evaluation Report**

**“What is it about Local Area Coordination that makes it work for end users, under what circumstances, how and why?”**

James Mason  
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### **Table of abbreviations**

LAC	Local Area Coordination
CMO	Context Mechanism Outcome
CMMO	Context Mechanism (resource) Mechanism (reasoning) Outcome
IOW	Isle of Wight
ABM	Agent Based Modelling / Model

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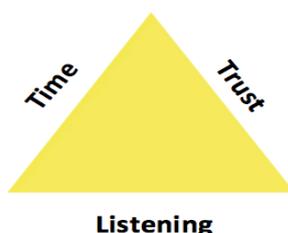
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## Executive summary

The increasing adoption of Local Area Coordination (LAC) nationally as an innovative, strengths-based approach, to reducing inequalities in health has catalysed calls for further evidence to generate understanding around the ways in which LAC causes the change in outcomes claimed. Specifically, there is a clear rationale for further evidence surrounding hidden mechanisms of how and why LAC works (or not), for different people in different contexts through addressing inequalities, and the effects this has on the system and commissioner organisations such as Public Health.

Pawson and Tilley's (1997) Realist Evaluation methodology holds significant promise in exploring how and why programmes work to produce certain outcomes, and is distinct from conventional evaluations that only provide insight into programme outcomes and impacts. This evaluation report draws upon the findings of a realist evaluation of the LAC on the Isle of Wight (IOW) to establish how and why the programme worked for people and communities across three demographical areas. As a sample this focused on the first three Local Area Coordinators to mobilise LAC representative of Ryde, Shanklin and Freshwater. The methods selected for this study were made up of Q-method (Watts and Stenner, 2012) and realist interviews. Q-method focuses on subjective viewpoints of its participants asking them to decide what is meaningful and what does (and what does not) have value and significance from their perspective (Watts and Stenner 2005). Q-Method involves developing a set of statements representing a set of viewpoints of certain individuals about an issue or programme. In this case a set of statements about LAC on the IOW were produced and ranked in line with most important to most un-important by end users. These rankings were then analysed to produce holistic narratives illustrating shared viewpoints around how and why LAC worked. This was also supported by realist interviews which sought to further investigate the key mechanisms at play within LAC on the IOW.

The findings of the evaluation established that **listening, trust and time** (shown below as a 'Golden Triangle') were consistent across the three Local Area Coordinators sampled in the evaluation. The coordinator also needs to continue to build on relationships with the differing referral groups due to the variety of methods used to make individuals aware of Local Area Coordination which is brought up in the 2016 *"Formative Evaluation: Understanding the praxis and impact of the Local Area Coordination approach on the Isle of Wight"*. However, it was also quite clear that LAC worked for different end users in different ways with the Q study creating three different subgroups of end users experiencing LAC. There were key contextual factors, which influenced the degree to which broader LAC outcomes were achieved. The findings from each of these subgroups are illustrated below and are followed by a series of key recommendations and reflections for future implementation.



There is scope for a focussed evaluation on exploring how and why LAC is perceived by services and key stakeholders to further understand how an approach of integrated leadership across services can lead to increased outcomes. A monitoring approach (which tracks the usage of services by those who access LAC) will support evidencing the impact of LAC on whether the participants are changing their usage of services as a result of being involved in LAC.

**Snapshot of findings: Subgroup One - “I know you are there and that means a lot, but I’m building my own social networks”**

<b>Key themes from this subgroup:</b>	<b>Key distinguishing themes compared to other subgroups:</b>
<p>Four participants from Freshwater area and three from Shanklin</p> <p>Six males and one female</p> <p>Like every other subgroup trust, listening and time appear to be key mechanisms.</p> <p>Like subgroup 2, knowledge and understanding of the Coordinator to provide support and guidance is key</p> <p>Like subgroup 2, individuals feel less isolated and disconnected from the community since being involved with LAC</p> <p>Like every other subgroup (apart from subgroup 3), accessibility in terms of transport or geographical location is not a barrier</p> <p>Like every other subgroup, employability skills are not very important to this subgroup (even though younger individuals are in this subgroup)</p> <p>Like every other subgroup, involvement with LAC has had little effect on usage of services and has not had a great impact on re-building trust in the services</p>	<p>Multitude of introductory methods (diversity of LAC)</p> <p>Least dependent subgroup (on service and LAC).</p> <p>Accessibility of Coordinator is important</p> <p>Despite this they do not need to see them more than they currently see them (more resilient)</p> <p>Interacted and met people that have brought enjoyment to their life (building social capital bonding and bridging)</p> <p>Unlike every other subgroup, some impact on integration with people from different backgrounds (social capital bridging)</p> <p>Furthest down the LAC journey</p>

**Snapshot of findings: Subgroup Two- “Thank you for your support, I’ve come a long way”**

Key themes from this subgroup:	Key distinguishing themes compared to other subgroups:
<p>Four participants from Freshwater area</p> <p>Four females and two males</p> <p>Like every other subgroup trust, listening and time appear to be key mechanisms.</p> <p>Like subgroup 1, knowledge and understanding of the Coordinator to provide support and guidance is key</p> <p>Like subgroup 1, individuals feel less isolated and disconnected from the community</p> <p>However, like subgroup 3, limited impact on integration with people from different backgrounds (social capital bridging)</p> <p>Like every subgroup (apart from subgroup 3), accessibility in terms of transport and geographical location is not a barrier</p> <p>Like every other subgroup, employability skills are not very important to this subgroup (could show LAC more frequently used by older population on the IoW)</p> <p>Like every other subgroup, involvement with the LAC has had little effect on usage of services and has not re-built trust in the services</p>	<p>Generally found out about LAC through the services</p> <p>Started to demonstrate confidence in building relationships with others and are doing more within the community (social capital bonding)</p> <p>Considerably more confident than any other subgroup in accessing, negotiating and connecting with the services</p> <p>Feel confident in terms of what a good life looks like to them and how they can achieve this</p> <p>Interacting and meeting people</p> <p>Increased sense of belonging and community</p> <p>Not important to see the Coordinator more often</p>

**Snapshot of findings: Subgroup Three- “I’m moving down the path, but I still need your personalised support”**

<b>Key themes from this subgroup:</b>	<b>Key distinguishing themes compared to other subgroups:</b>
<p>Four participants from Ryde area.</p> <p>Three males and two females</p> <p>Like every other subgroup trust, listening and time appear to be key mechanisms</p> <p>Like subgroup 2, limited impact on integration with people from different backgrounds (social capital bridging)</p> <p>Like every other subgroup, developing employability skills are not important, but this subgroup are aware of employment opportunities.</p> <p>Like every other subgroup, involvement with LAC has had little effect on usage of services and has not re-built trust in the services</p>	<p>Predominantly approached by the LAC</p> <p>This subgroup is not socially isolated</p> <p>This subgroup is the most dependent on the services</p> <p>They get on very well with the LAC and are happy to share goals, see them as a first point of contact, but feel like they need to see them more than they currently see them (dependency)</p> <p>Participants do however feel like they can do more for themselves</p> <p>Accessibility in terms of transport and geographical location is more of a barrier</p> <p>Feel confident in terms of what a good life looks like to them and how they can achieve this (with support from LAC)</p> <p>Interacting and meeting new people through LAC with similar interests is not important (social capital bonding)</p>

## Reflections and refinements to the programme theory

The findings above have demonstrated quite clearly that LAC works for different people in different ways. Within the spirit of the realist approach to the evaluation (Pawson and Tilley, 1997) the subgroup holistic narratives have provided an insight into what works for whom in what circumstances and why. The additional statements of explanation following each narrative offer new refinements to the programme theory put forward for testing at the commencement of the evaluation. However, in some cases they also show consistency with the initial programme theory.

Key refinements and recommendations for LAC moving forward are summarised in this section.

1. Consistent across all subgroups, is the importance of the personal traits of the Coordinator. The ability to ensure marginalised voices are heard through listening and understanding the needs of every individual they work with, is vital, and provides the basis for a wider birth of outcomes to be achieved. Alongside this is the knowledge and understanding the Coordinator has of the services and indeed the assets and resources available within the community such as community clubs. However, undoubtedly, the infinite time the Coordinator can spend with every individual (within reason) is the most important mechanism. Moving forward these factors should continue to be considered through the recruitment and managerial process.
2. The importance of LAC being an open service (highly accessible), but at the same time being person centred, is vital. In the 18 (Sample size) used, introductions to LAC came from a variety of methods, specifically; self-introductions, being approached by the Coordinator, conversations with people in the doctor's surgery waiting room, with family members, with health advisors, with people at the food bank and through the services (not specified). It is important the Coordinator's continue to build relationships and communicate with the services to ensure more people are aware of LAC.
3. The lack of younger people accessing LAC is also something which should be explored. Specifically, within this (sample) there were only a few individuals accessing LAC under the age of 25. With this said, individuals representing all ages have engaged with LAC. Interestingly, age does not seem to be a significant factor shaping shared viewpoints.
4. Considering the unimportance of individuals using LAC to access opportunities to develop employability skills. If this is to be a key outcome of LAC - moving forward, more support will have to be put in place and Coordinator's may have to provide further support and guidance and build more connections will voluntary and paid opportunities.
5. Poor accessibility in terms of geographical location and transport is an issue within the Ryde area and could reflect an older population which live in this area using LAC.

This was gleaned during a meeting with the local area coordinator of Ryde and was confirmed through the Q sort.

6. The lack of ethnic diversity on the Isle of Wight limits social capital (bridging) from occurring. The lack of integration between those from different class backgrounds is also a concern to wider level social integration on the Isle of Wight.
7. The terminology nebulous around the 'LAC' term needs to be addressed. A definitive and consistent acronym should be alluded to the avoid confusion with the services moving forward.
8. There is scope for a more focussed evaluation on younger people who access the programme to understand more about how and why this group access the LAC.
9. There is scope for a more focussed evaluation on those participants accessing LAC on the IoW who do not identify as White/Caucasian - How and why do they engage with LAC in line with findings regarding a lack of social capital (bridging).
10. There is scope for a more focussed evaluation exploring how and why the system's services and other key stakeholders perceive LAC working and contributing to the system
11. We recommend the implementation of a monitoring approach, which captures how the usage of services has stabilised or decreased in relation to LAC on the IOW.
12. As supported by the ABM exercise, it is advised that clearer timelines are put in place to capture an individual's journey through LAC. The issue of complexity and context is entirely recognised here, however monitoring procedures should be established to make sense of who, where and when individuals benefitting from LAC achieve certain outcomes. When they achieve such outcomes are they still part of LAC or are they released to no longer rely on the LAC?
13. Finally, regarding transformational aspects of the programme, the initial programme theory conjectured prior to testing placed significant focus on the personal traits of the Coordinator and specifically the 'golden triangle' of time, listening and trust. These were confirmed as the most important mechanisms to every subgroup. However, the holistic narratives of each subgroup also demonstrated that key outcomes centred on individual and community resilience, social capital and mitigating systemic barriers were being achieved. Though the time it takes different individuals to become confident to work independently towards their vision of a 'good life' will vary. It was clear that all three subgroups were on their way to achieving this and were supported in different capacities. While some used the LAC casually, others were more dependent on them. While some entered LAC feeling disconnected from the community, others used LAC for personal one to one discussions about specific forms given to them by the services. Ultimately, the complexity of individuals accessing LAC means LAC will continue to be an asset for the services, particularly in supporting those hard to reach individuals.

*\*The final ABM for this evaluation is not included in this specific evaluation report and acts as a separate appendix. However, its methodology within this evaluation is explained within this report.*

## Introduction and context for the evaluation

Local Area Coordination is a long term, integrated approach to supporting people as valued citizens in their communities ([www.lacnetwork.org](http://www.lacnetwork.org)), and has been in existence in the UK for a number of years having originated from Australia in 1988. Local Area Coordination (LAC) on the Isle of Wight (IOW) came into existence in 2015 and now mobilises a network of 9 Local Area Coordinators. The key focus of the LAC is to focus on working with those in need of support around the various issues in their lives. These may focus on health, physical activity, connecting with local services, and the local communities around them. LAC attempts to build the capacity of individuals to take control over their own lives. This involves the deployment of a Local Area Coordinator (referred to as the Coordinator throughout), across a specific area or context that works with these individuals to build relationships and support them. An intended benefit of this is that LAC takes the strain away from the system and the key services that often are relied upon by those accessing them.

However, whilst there has been some evaluation within the UK around LAC (e.g. Swansea and Derby) the IOW context is in its infancy with its evaluation. On the IOW there has been a recent independent evaluation by Wessex Academic Health Science Network which carried out a range of interviews and surveys with staff and end users; which articulated a series of positive outcomes that LAC produced. However, key questions emerged around the most appropriate ways to understand the complexities of how and why the end users access LAC, and measuring its long term impact. This evaluation from Solent University attempts to build on this work and existing practice on the IOW to examine the outcomes of LAC on the IOW and how and why these outcomes manifested themselves. In addition, it also seeks to examine the costs and benefits of LAC and to what extent any strain could be taken away from the system.

On this basis, a 'Realist Evaluation' embedding 'Agent Based Modelling' (ABM) attempted to explore these key questions. The evaluation sampled three out of the nine areas on the IOW, which were Ryde, Shanklin and Freshwater. These sites were chosen because they were the first three out of the nine to mobilise LAC.

This evaluation report illustrates and presents the findings of the evaluation which took place between May 2017 and April 2018. The report begins with a clear overview of the evaluation design and methodology. What then follows is a clear exposition of the findings of the evaluation. As highlighted above an illustration and results of the ABM will follow.

### Introducing Realist Evaluation

The evaluation drew upon the implementation of Realist Evaluation (Pawson and Tilley, 1997). Realist evaluation holds significant promise in exploring **how** and **why** programmes work to produce certain outcomes. This is distinct from conventional outcome focused evaluations that only provide insight into programme outcome and impact. Realist evaluation holds potential as it takes into consideration the importance of '**context**' (as in the social, environmental and personal circumstances that may lead and influence people to make certain decisions). This is crucial within any social change programme, which will involve the interaction of human volition with programme resources (**mechanisms** of change) which explain resulting **outcomes**. In realist terms these are known as *Context* –

*Mechanism – Outcome* explanations. Essentially, realist evaluation gets to the bottom of how participants reason towards the resources provided in a programme actualising ‘what works for whom, in what circumstances and why’.

The realist evaluator understands causality in terms of underlying causal mechanisms generating regularities which may often be hidden (Pawson and Tilley, 1997) and moves beyond attributing programme success or failure to one sole cause. In essence, realist evaluation epitomises equifinality in that there are many causes to an outcome. It is not possible to simply observe and make observations around what works and attribute causality to one thing as this is reductionist (Byrne and O’Callaghan, 2014).

A realist approach to evidence involves understanding what works for whom in what circumstances and why (Pawson and Tilley, 1997). It is not social programmes per se that make people change, but the very people themselves based on their reasoning and interactions within the context of the programme (Dalkin et al, 2015). These are all crucial aspects relevant to LAC. The first step in any programme evaluation is to establish a programme theory for testing made up of ‘candidate’ (CMO) Context – Mechanism - Outcome configurations (Pawson and Tilley, 1997).

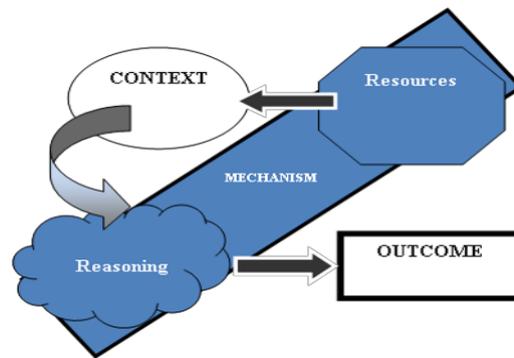
-C= what conditions are in place for a measure to trigger mechanisms to produce outcome patterns?

-M= what is it about a measure that may lead it to have a particular outcome pattern in a given context (for example how do resources intersect with participants beliefs, reasoning, attitudes, ideas and opportunities?)

-O= what are the practical effects produced by causal mechanisms being triggered in a given context?

Having established a programme theory realist evaluation then involves mobilising mixed methods (qualitative and quantitative) to test it establishing what worked for whom in what circumstances and why leading to a refinement of a new programme theory. The scope and potential for realist evaluation’s use in social change is significant given that inputs and resources contribute to programmes outcomes and outputs. However, how these outcomes emerge is often unclear and referred to as the ‘black box’ (Astbury and Leeuw, 2010). Realist evaluation attempts to demystify the darkness by identifying the mechanisms activating (Dalkin et al, 2015) inside programmes. Very recently Dalkin et al, (2015) have gone even further to help disaggregate the programme mechanism into resource and reasoning. Quite simply, they state that within any social change intervention, resources are released into contexts, and these are reacted to and reasoned against by programme stakeholders to create outcomes. This creates another ‘M’ in the CMO configuration giving us context, mechanism resource, mechanism reasoning and outcome (CMMO).

Figure 1: Dalkin et al, 2015



The argument for realist programme development and evaluation for programmes like LAC is compelling because these programmes are context dependent social programmes that involve human volition and change mechanisms. Whole systems programme like LAC may work for some in certain circumstances often combined with other interventions and resources.

### **Introducing Agent Based Modelling (ABM)**

Agent based models (ABMs) are computer simulations that can help us to understand the emergent behaviour and properties of complex systems. They do this by modelling the simpler component entities that make up the system (the 'agents', as referred to in ABM terms) and defining how the agents interact with each other. It is therefore not necessary to model the behaviour of the system as a whole; this behaviour emerges naturally because of the interactions between the agents. It is also not necessary to assume the system is in equilibrium because agent behaviour can be dynamic and adaptive.

ABMs have been used in many fields including economics, industry, biology, ecology and social science. They can be used for ex-ante policy appraisal and to support ex-post policy evaluation.

### **ABM for the IOW**

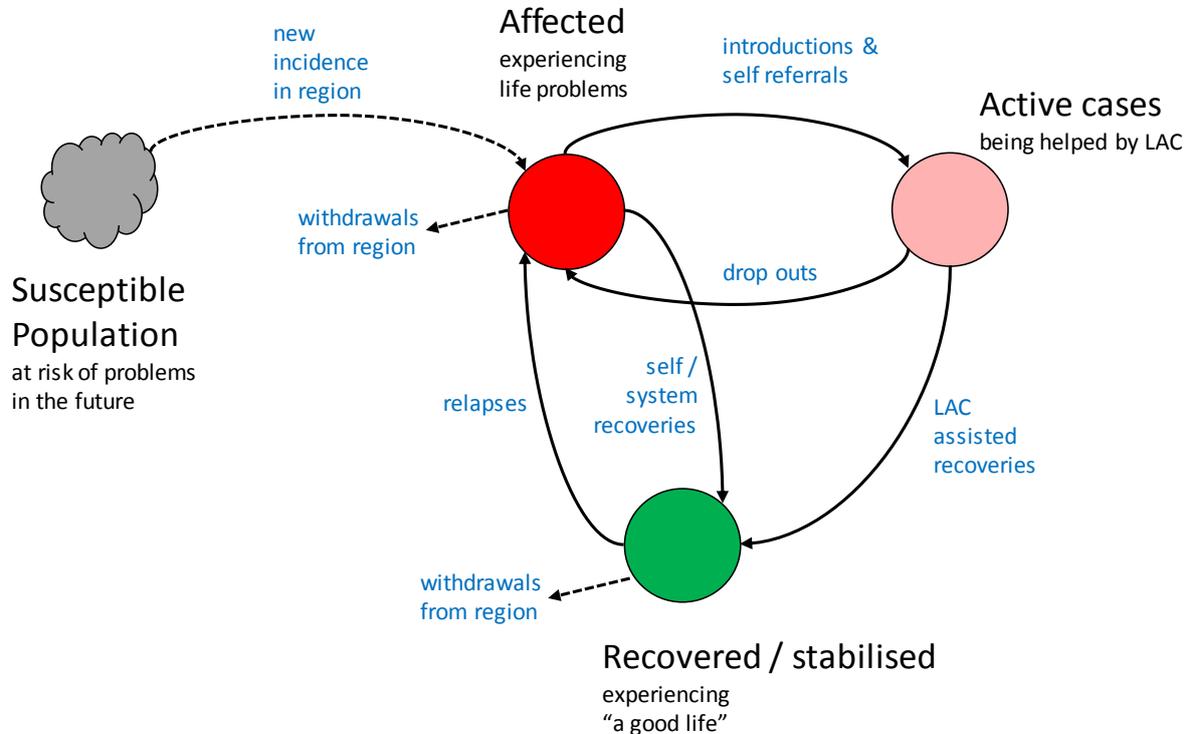
The aim of the model is to address the evaluation question:

- What impact have local area coordinators had on their target populations, and can we estimate the expected net avoided costs over the duration of the LAC programme?

The Theory of Change for the programme suggests interventions facilitated by the Coordinators can help individuals with problems become less reliant on reactive public services and achieve better life outcomes for themselves, whilst simultaneously reducing costs for the local authority.

The ABM models a population of individuals (the ‘agents’) that are within the catchment area of a single LAC<sup>1</sup>. Over a time period of one, two or five years the agents can experience a number of transitions, as illustrated in the diagram below.

Figure 2: Transition of ‘Agents’



*\*The final ABM for this evaluation is not included in this specific evaluation report and acts as a separate appendix. However, its methodology within this evaluation is explained within this report.*

### Evaluation Model – ‘Programme Theory Development, Testing and Refinement’

The evaluation model intended to gain an in depth understanding into the inner workings of LAC. Specifically, Realist evaluations intend to explore ‘what is it about an intervention that produces outcomes for people?’ In relation to LAC the evaluation sought to answer the following evaluation questions:

- 1) What outcomes does the Local Area Coordination create for community development aspects such as social capital? How does it do this? Why does it do this?

<sup>1</sup> The model is set up to model the catchment area of one LAC at a time, making the assumption that there is relatively little crossover between one catchment and another. Estimates for the whole of the island could therefore be generated by running the model several times, once for each LAC and their associated catchment area, and adding up the total costs and impacts.

2) How and why do people operating within different areas of the system engage with the Local Area Coordination?

3) To what extent does the Local Area Coordination alleviate pressure on the reliance of services? How does it do this? Why does it do this?

To answer these questions, the evaluation focused on three key areas of programme development and implementation. The three key areas were made up of 'establishing programme theory', 'testing programme theory' and 'refining programme theory'. In clearer terms programme theory can be defined as any given assumption of how and why a programme is expected to work.

### *Stage 1*

As part of this 'three steps' process, stage one involved 'gleaning' as much insight as possible from key stakeholders (including service providers) and deliverers in the LAC to understand their initial assumptions about how and why they saw LAC working and for whom. This fuelled the conjecturing of a series of CMMO configurations on behalf of the evaluator which was then presented to programme staff for consensus.

### *Stage 2*

This then lead to the testing stage (stage two) which aimed to test whether, or not, those assumptions manifested themselves in the way intended. This was made up of Q methodology, which is an innovative research methodology that is qualitative and quantitative in nature. Q explores the subjective viewpoints of individuals about a phenomenon, issue or programme, and in this case the subjective viewpoints of a range of participants across LAC on the IOW. Q involves participants (a p-set) ranking statements (a q-set) about a programme in relation to their subjective viewpoints.

These rankings were placed into a statistical programme and analysed to develop an understanding of shared viewpoints via factor analysis. In total 20 LAC participants took part in the Q sorting activity at three separate venues across three geographical areas on the Isle of Wight. The factor analysis exercise subsequently looked for shared viewpoints and enabled the grouping of participants into 3 subgroups of people who held similar views about LAC as to how and why it worked for them in the shape of a holistic narrative.

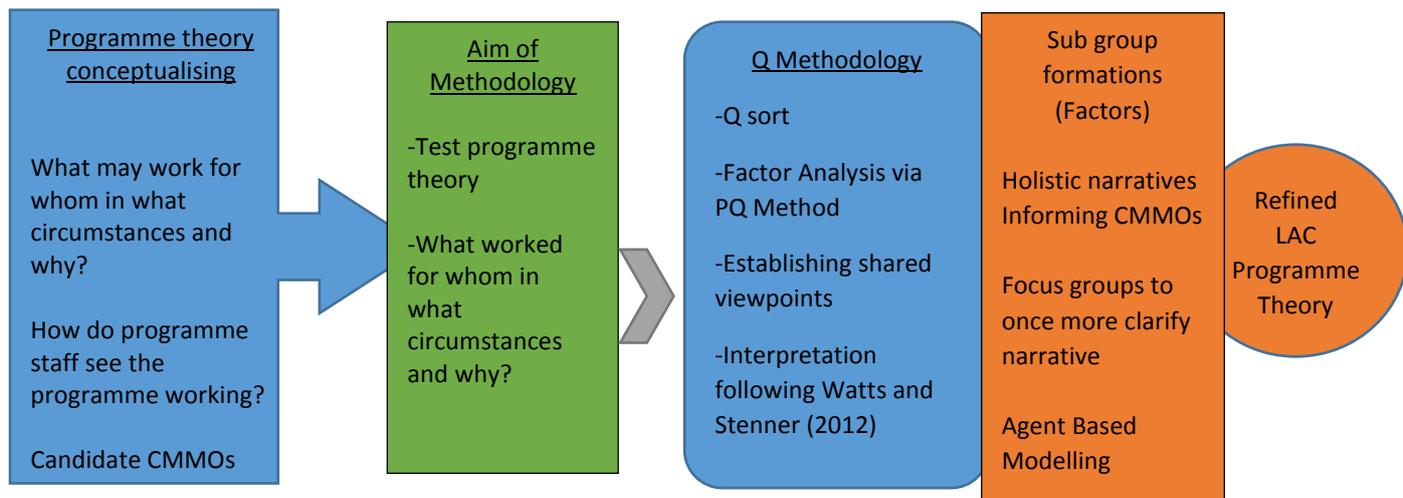
Overall, Q held significant value because it provided quantifiably reliable data, which was qualitatively, analysed leading to the formation of holistic narratives that were able to explain how and why LAC worked for different people, in different ways in varying contexts.

### *Stage 3*

The refinement stage (stage 3) involved taking stock of the learning gleaned from the Q exercise to reconfigure and reflect upon the initial programme theory devised to improve it for future implementation. This stage also involved the testing of the narratives through several realist interviews and focus groups with a sample of the participants representing each of the subgroups. This stage was also supported by the outcome of the ABM exercise which provided key insight into the effects of LAC on the IOW.

## Evaluation design:

Figure 3: Evaluation design



## Methodology

### Developing the programme theory for testing

This sought to gain an in depth understanding of how the programme was intended to work prior to any raw evaluation work being carried out. This programme theory gleaning exercise constituted secondary data (literature and bids relating to LAC) and primary data. Specifically, the primary data involved meetings with stakeholders to develop an understanding of the context surrounding the programme developing insight (from the evaluator's perspective) of what truly was under investigation. The understanding of the context was fundamental because this illuminated key characteristics about the area, demographics, socio economic make up specific nuances required to aid the understanding of the complexity that surrounded LAC. A range of key stakeholders were interviewed ranging from Public Health, Children Services and the Coordinators (themselves. This supported the development of micro and macro level candidate programme theory for testing and refinements to the specific evaluation questions being devised. (Appendix 1 details the full programme theory conceptualisation of specific areas of Freshwater, Ryde and Shanklin and the three areas collectively).

### Preparation of evaluation fieldwork

Having developed the micro and macro candidate programme theory (Appendix 1) this stage involved co-productively agreeing on the outcome of the exercise for consensus and then the evaluation methods to be implemented within the fieldwork. The evaluation team outlined and described the evaluation methods proposed for the fieldwork to ensure agreement and understanding. Within the spirit of co-production and use it was essential that the Coordinator's and line manager were consulted on how the evaluation was to be carried out. This ensured that the relevant people felt embedded and involved in the

evaluation. This is a democratic exercise that allowed those invested in the evaluation to put their views forward to the evaluation team.

This stage also clarified and articulated the key questions to be asked and aspects of the programme to be evaluated. Specifically, in relation to the Q aspect of this evaluation the Coordinator’s line manager was heavily consulted on the development of the Q-set statements, which are discussed below. This also determined the sample size of the evaluation (P-set).

### Testing the programme theory through Q Methodology

The methods selected were made up of Q method (Watts and Stenner, 2012). Q method focuses on subjective viewpoints of its participants (Watts and Stenner, 2012), asking them to decide what is ‘meaningful’ and what does (and what does not) have value and significance from their perspective (Watts and Stenner, 2005). Q method involves developing a set of statements (Q-set) representing the viewpoints of certain individuals about an issue, programme or phenomena and reflective of the programme theory. The Q set in this instance was made up of a total of 35 statements which were fuelled by the programme theory gleaning exercise and consultation with a range of LAC stakeholders. These are displayed below.

**Table 1: Introducing the Q statements (Q-set)**

1.	Since working alongside the Local Area Coordinator, I feel I know more about what there is to do in the local community based on my interests	2.	Since being introduced to the Local Area Coordinator, I have been more involved in the things I like to do within my local community
3.	The Local Area Coordinator has helped me think about my vision for a good life and how I could get there	4.	Since working with the Local Area Coordinator, I am more confident and feel I can achieve what will lead to a good life for me
5.	I feel the Local Area Coordinator takes time to listen to me and understands what is important to me	6.	As the Local Area Coordinator understands me, I think the Local Area Coordinator could help to make sure the service(s) I use talk to one another more frequently and are aware of my circumstances
7.	Because of the Local Area Coordinator’s support and guidance, I feel I can do more for myself	8.	Since working with the Local Area Coordinator, I have had to use the services less often
9.	I would like to attend events within my local community, arranged by my Local Area Coordinator, but poor accessibility in terms of my geographical location is a barrier for me	10.	I would like to attend events in my local community, arranged by my Local Area Coordinator, but poor accessibility in terms of transport is a barrier for me
11.	Before being introduced to the Local Area Coordinator I often felt isolated and	12.	Since being introduced to the Local Area Coordinator I feel more connected to my

	disconnected from my local community		local community
13.	Because of the Local Area Coordinator, I feel I am more aware of other individuals that have similar interests to me within my local community	14.	Since working with the Local Area Coordinator, I have more trust than I had before in members living within my community that come from different backgrounds to me
15.	I have a trusting relationship with the Local Area Coordinator that I work with	16.	Since working with the Local Area Coordinator, the trust I have in the services I use has improved
17.	People and groups, I have been introduced to via my Local Area Coordinator have made me feel welcome and supported	18.	Since being introduced to my Local Area Coordinator, I feel I am aware of opportunities to develop my existing skills set
19.	I have taken opportunities to develop my employability skills since being introduced to my Local Area Coordinator	20.	Since working with the Local Area Coordinator, I am more confident in terms of accessing, negotiating and connecting with the service(s)
21.	Since being introduced to the Local Area Coordinator, I feel I am managing my own health and well-being more effectively	22.	The Local Area Coordinator has supported me to interact with people I wouldn't usually connect with
23.	I feel more confident in building relationships due to the supportive conversations with the Local Area Coordinator	24.	People that I wouldn't usually connect with have been introduced to me through the Local Area Coordinator and they have brought enjoyment to my life
25.	It is important to me that my Local Area Coordinator has no set uniform and no pre-set agenda	26.	It is important to me that the Local Area Coordinator is easily accessible in the community
27.	Since being introduced to the Local Area Coordinator I feel less dependent on the service(s)	28.	I think it is important that I am leading the process of setting my own goals and planning for the future
29.	I am happy to share my goals and targets with the Local Area Coordinator as I feel they will encourage me to achieve them	30.	I have worked with my Local Area Coordinator to achieve my aspirations, build my vision and plan my future
31.	It is easy to contact the Local Area Coordinator when I require their support and guidance	32.	I feel like I need to see the Local Area Coordinator more than I currently see them
33.	I believe the Local Area Coordinator has the knowledge and understanding to directly support me or connect me to someone who could help	34.	The Local Area Coordinator encourages and supports me to solve my own problems



way' (Pawson and Tilley, 2004, p.12). This was followed by a series of semi structured interview questions, which were designed around testing specific contexts, resources, reasoning or outcomes from each programme theory. Realist studies that collect data through qualitative means are not considered constructions. Data are instead considered evidence to prove or disprove real phenomena captured by programme theories (Maxwell, 2012).

### **Sample and demographics**

In total 20 (8 female / 12 male) individual Q sorts were administered across the programme which culminated in the production of a Q sort for each participant. Following the data analysis (discussed below) 18 were statistically relevant and selected for thorough interpretation. The participant set (P-set) was spread across the following sessions:

- Tuesday Morning Community Session in Freshwater
- Wednesday Community Session at Aspire in Ryde
- Thursday Age Concern Café Morning in Shanklin
- Several completed during one to one home visits with the Coordinator

Of the 18 participants selected for interpretation, 11 were male and 7 were female. Participants across the sample were aged between 18 and 74 years. In accordance with ethics each participant was presented with a participant information briefing sheet and consent form which was duly signed.

### **Data analysis**

To explain how and why the 18 participants (out of the 20) were selected for full interpretation, factor analysis was administered. This factor analysis was a quantitative, statistical approach which examined all 20 Q sorts from each participant to identify shared correlations of viewpoints amongst those individuals. Out of the 20 participants, it became apparent that a total of 18 possessed shared correlations which led to the creation of sub groups of the participants (P-set). Each sub group was identifiable by its very own Q sort representing those shared viewpoints.

In total 3 subgroups representing shared viewpoints emerged. The table below provides information regarding gender, age, an overview of where each participant was when introduced to LAC, and an overview of where each participant is now (this table was completed by the Coordinator's and includes pseudonyms) Subgroup 3 is shown below and subgroup 1 and 2 can be located in appendix 4.

**Table 2: Subgroup 3 participant overview:**

Name (area)	Gender	Age	How they were introduced to LAC	Overview of where they were?	Overview of where they are now
Kevin (Ryde)	Male	55-64	Local Area Coordinator approached them	Kevin was living in an inappropriate flat with noisy neighbours and a limited social network. Due to Kevin's aggressive behaviour he had been banned from many establishments in Ryde. Kevin had a history of being abused as a child which still affected him.	Kevin is now accessing counselling for his childhood abuse, he is also in weekly contact with a supporting people worker to help with housing. John has calmed down due to feeling he has support and real friendships in his local community. Through collaborative working Kevin now visits local cafes and community venues. He attends church and is a member of the British legion which he raises money for. Kevin has a weekly timetable where he has an activity every day. These include functional skills, craft groups and bible studies. There have been no reports of Kevin becoming angry within any of his chosen activities.
Dom (Freshwater)	Male	45-54	Introduced via family member	Dom was introduced as he was struggling with his MS diagnosis.	Dom remains at home with family but has been active in upcycling furniture when his condition allows. He has also been instrumental in directing the redecoration of his own room and is remaining active at home with aids and adaptations. He is now in receipt of more income as I helped him complete PIP and ESA forms in relation to his illness. He is now keen on producing a guide of MS friendly pubs on the island.

Tom (Ryde)	Male	35-44	Local Area Coordinator approached them	Tom has severe mental and physical health problems. He had been asked to leave his volunteering role at a local community café and music group when I became involved. Tom had been getting angry and had been caring for his dad.	Tom became involved in several projects which suited his creative side. He became involved in a writing group and decided to research and write a book about the 1960s show the prisoner. Tom has had his book published with all proceeds going to charity. Tom is now accessing his GP and specialists regarding his physical illness. Tom has remained independent and no needed to be in contact with local area coordination for over 12 months.
Faye (Ryde)	Female	35-44	Introduced via the services	Faye was introduced via the mental health service after being diagnosed with PTSD, anxiety and depression. Faye has mental health issues resulting from her time in the armed forces. Emma developed PTSD, anxiety and depression. Emma had been accessing mental health services and is relatively stable. She volunteers at a local Christian charity 3 mornings per week cleaning. Emma is also a very keen and talented weight lifter who competes at a national level. Faye does however feel lonely and isolated on an evening.	After meeting Faye several times and discussing her passion for weight lifting, comic books and films we talked about her isolation. Faye feels she has things to do during the day with her weight training and voluntary work but feels that late evening she sits in all night alone.  Faye stated she loved films but hated going to the cinema alone. I had connections with other people in the community who felt exactly the same. Faye and I came up with the idea of a Cinema Social Group who would meet weekly, chat about films and then visit the local cinema to see what was on.  Faye set up a Wednesday meet up at a local community centre for refreshments and then on to the cinema to see Spiderman. Several people attended and Faye wants to make this a weekly group.  Faye feels really good about this and feels like she will

				make some real friends. She plans to visit Comic-Con in November and wants to arrange a group trip there.
Jolie (Ryde)	Female	45-54	Introduced themselves	Jolie suffers from multiple sclerosis. She has to use a wheelchair constantly and was becoming socially isolated. She has a few friends visiting at home but was never going out.
				Jolie now is able to use the bus which has allowed her to access the island. She attend the MS group weekly and goes on trips with them when available. Jolie attends a women in sheds group and making great friends and wooden signs for her house. Jolie contacts me regularly and still likes to meet up as she feels as her health deteriorates she will need more support and wants the Local area Coordinator alongside her through this process.

Having statistically identified the three groups (made up of the individuals stated above) these were then qualitatively interpreted. The qualitative interpretation involved examining in specific depth each resultant Q sort scores for each group. Thus, in this case 3 resultant Q sorts were examined making use of Watts and Stenner's (2012) crib sheet (see below). The crib sheet allowed the researcher to focus upon where certain statements were ranked to allow for the building of a narrative for each group:

- Statements ranked at +4 / +3
- Statements ranked higher in the factor group than any other group
- Statements ranked lower in the factor group than any other group
- Statements ranked at -4 / -3
- Distinguishing statements
- Using demographical information about participants and micro macro circumstances
- First take – (building in initial story or theory)
- Any other additional information

The crib sheet facilitated an emerging narrative about each subgroup capturing shared viewpoints about LAC, culminating in a holistic narrative.

## **Agent Based Modelling**

At the beginning of the simulation, there is a population of agents already experiencing a life problem that would benefit from LAC intervention, for example social isolation, mental health problems, physical health problems, etc. These are described in the model as being in the Affected state (the red circle in the figure above). This population might grow with time based on the demographics of the catchment area (for example a high percentage of elderly people susceptible to social isolation), although it could be offset by a flow of people leaving the area as well.

Some people that are in the affected state might not be introduced to their local Coordinator but might nevertheless overcome their problems on their own or by making use of other local service provisions. They therefore move directly from the affected state to the Recovered state (green circle).

Any individual that is in the affected state could be introduced by a third party to their local Coordinator or could self-refer themselves. At this point they are considered to be part of the programme and are added to the active caseload of the LAC and are now in the Active state (pink circle).

Individuals that are Active are being helped by the Coordinator to achieve their vision of a good life. When this has been achieved they are deemed to have moved from the Active to the Recovered state (green circle), and are no longer part of the programme. However, there is the possibility of a subsequent relapse from the Recovered state back to the

affected state. There is also the possibility that they could drop out of the programme before a successful conclusion is reached.

With these basic agent transition rules established, the model can be run in two modes, once with the LAC programme switched on and once with the LAC programme switched off (i.e. with the pink circle and associated transitions absent from the model). The difference in total cost between the two model runs represents the estimated avoided cost of the LAC programme.

### User interface

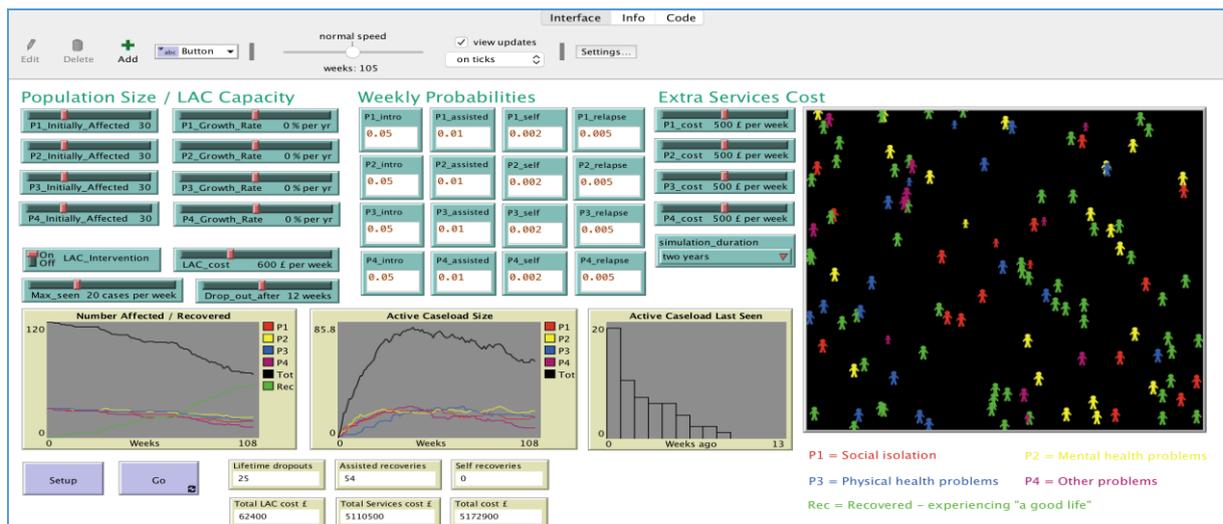
The user interface for the model is shown over the page. The model has been written in Netlogo, which is an open source agent based modelling framework developed by North Western University<sup>2</sup>.

The turquoise-background sliders and input boxes allow the user to vary the model parameters such as the size of the affected populations and the weekly probability that an agent transitions from one state to another. As of 31<sup>st</sup> May 2018 the model has been set up using dummy data for all the inputs, but over the next month we will be aiming to estimate plausible values for all the inputs based on the available programme data.

The black square is an ‘infographic’ representation of the current population, with each person positioned randomly on a 2d grid. The colour of the icon shows whether they are currently affected by one of four main presenting problems (red = social isolation, yellow = mental health problems, etc.). An icon coloured green represents someone who has reached the recovered state. The icon size shows whether they have been referred to the LAC programme (large size) or not (small size).

The other yellow-background graphs and counters show week various model outputs as time histories or total values. In this example the simulation has been run for two years (104 weeks).

Figure 5: User interface of ABM for LAC IOW



<sup>2</sup> The Netlogo home page can be found at <https://ccl.northwestern.edu/netlogo/>

## Presentation of findings

Each holistic narrative is displayed below, in present tense with the support of statement rankings (Watts and Stenner, 2012). For example, in group one '5+4' would indicate that participants within this group ranked statement 5 at '+4' on their Q sort whereas they ranked statement 9 at '-4'. Each ranking and score acts as a supporting reference to justify the narrative.

Each narrative is then followed by a series of additional 'realist explanations' adding extra depth to explain how and why LAC worked for each subgroup. These are written within the context of the CMMO taking into consideration crucial aspects of context, mechanisms and outcomes. To clarify, CMMOs can be defined as follows:

- C = Context: circumstances and environment / personal characteristics of the participants
- MRES = Mechanism Resource: Resources involved and provided in the programme
- MREAS = Mechanism Reasoning: Reaction and reasoning that comes about in response to the resource taking into consideration the circumstances
- O = Outcome: The resulting outcome that is produced as a result of the above 3 key elements coming together

Each of these explanations offer immediate insight into how the programme works leading to insights for programme refinement and learning moving forward. When compared to the initial programme theory, these narratives explain how (in reality), LAC really works, for its end users and why.

### **Subgroup 1: Holistic Narrative “I know you are there and that means a lot, but I’m building my own social networks”**

This subgroup represented a total of 7 participants of which six were male and one was female. Three males were from the Freshwater area; one was aged 35-44, one was aged 45-54 and one was aged 65-74. In addition, one female was from Freshwater aged 65-74. In contrary, three males were from the Shanklin area; one was aged 18-24, one was aged 25-34 and one was aged 55-64. Two of the participants introduced themselves to the Coordinator, one found out by being approached by the Coordinator, one found out through the services, one through the local health advisor, one through the Freshwater food bank and one through a conversation in the doctors’ surgery waiting room. Seven out of seven participants identified as white/Caucasian. The strong representation of Freshwater and Shanklin participants in this factor could be significant for micro level CMMO’s.

Like every other subgroup, due to the Coordinator’s ability to take time to listen and understand what is important to each person (5 +4), this subgroup felt the Coordinator had the knowledge and understanding to directly support them and connect them to someone who could help (33 +4). Moreover, due the easy access of the Coordinator within the community (26 +3) and the trusting relationship which had developed (15 +2), individuals felt like they could contact the Coordinator when support and guidance was required (31 +3).

Interestingly however, this subgroup did not feel like they needed to see the Coordinator more than they currently saw them (32 -4), instead, when they did see the Coordinator, they were encouraged and supported to solve their own problems (34 +2). This shows evidence of this subgroup aligning to LAC intended outcome, centred on reducing dependency on the system and building personal resilience among community members. Furthermore, the ability to recognise the Coordinator as a first point of contact within their local community (35 +3) could show further evidence of reducing pressure on the system.

Although this subgroup did not feel overly confident in building relationships (23 -1), they had taken initial steps to becoming more involved in the things they like to do in the community (2 0) demonstrated through the ability to take opportunities in introducing themselves and interacting with people they wouldn’t usually connect with (22 +2), furthermore these people had brought enjoyment to their lives (24 +1). These items were ranked higher than any other subgroup which demonstrates further evidence of individual and community resilience and social capital (bonding) increasing. However, in contrast to any other subgroup, individuals ranked building trust in those from different backgrounds as somewhat important (14 0) demonstrating some aspects of social capital (bridging).

More than any other subgroup, it was significantly unimportant to receive support in mapping out their vision for a good life (3 -3) or to increase their confidence in achieving a good life (4 -1). This could be because the participants in this group already had a clear vision of what a ‘good life’ looks like and instead utilised LAC for small scale support (occasionally) and to access interaction with other people. Interestingly, despite there being several younger individuals within this subgroup, the group did not see it as important to be made more aware of opportunities to develop their existing skills set (18 -3) and thus it was

relatively unimportance to develop their employability skills (19 -1). The younger age and mobility of older individuals within this subgroup could explain why accessibility (in terms of transport (9 -4) and geographical location (10 -3) was not a barrier to attending events in their local community, arranged by their Coordinator.

Overall, it appears this subgroup are more casual users of LAC (specifically) than subgroup 2 and 3. However they utilise LAC to build and sustain social connections with others. Like other subgroups, the personal traits of the Coordinator are most important. On the other hand, for this subgroup, the individual benefits of being able to access the LAC at their own discretion is very important. The participants in this subgroup are not however as dependent on LAC or the service(s) (27 0) like subgroup 3. Instead building trusting relationships and socialising with likeminded individuals has brought enjoyment to the individuals' lives (24 +1) and they are more aware of what there is to do (1 +1) in the community since being involved with LAC. This could be because they were socially disconnected from their community before being introduced to LAC (11 +2).

### **Interview data to support narrative: Subgroup One**

The interviews supported the notion that this group were mostly capable in their everyday lives but needed some support. Introduction to other individuals in LAC has provided participants with a friend, as well as giving them the opportunity to receive help or advice from the Coordinator. Those in this subgroup use the Coordinator casually for minor things, such as setting up a mobile phone. These small actions seemingly have a big impact on this subgroup's lives. Where this subgroup does not have close family or friends on the island, the casual use of LAC is important to them. When an incident occurs that would cause disruption to the individual, the Coordinator is a mechanism for emotional support and actions are collaboratively set to reassure the individual.

*“When something goes wrong, I look forward to the coffee morning where I get to speak with the Coordinator, it gets me through the week”.*

This indicates that they continue to require access to the Coordinator to prevent greater use of services or a reliance on LAC. Keeping casual contact prevents the build-up of issues. Where this participant has moved to the island, they have not developed friendships or have any family to support them. This isolates them and means they are able to use the Coordinator as their support mechanism. Introduction to friends, via the Coordinator, seemingly takes pressure off the Coordinator as previously isolated individuals can now support and be supported by others who need help.

It is suggested that the participants do not worry about developing their employability skills as they already hold a good level, however their mental health has caused them to stop working/being confident. This also affects taking up any volunteering opportunities.

*“The Coordinator has shown me where I can volunteer and get involved in different things, but I am not at a stage where I take these opportunities”.*

It is not that developing employability skills is not important; rather their involvement in LAC is to get the help they need. The focus opportunities provided by the Coordinator has exposed participants to more people they can engage with. This has also contributed to the development of social capital amongst the participants.

Interaction via interviews would indicate that members of this group have a higher potential to generate social capital than other subgroups, allowing greater interaction with new people. They are however still relatively isolated. The relationship with the Coordinator was still a large contributing factor to these participants taking the next steps in improving their lives.

*“My mental health has really suffered, and I have struggled recently, especially with the stress it has caused. I’m going to be moving closer to my daughter who can help me. Adam has helped me realise this”.*

The listening skills, trusting nature and openness of the Coordinator have helped the individuals to trust them to collaboratively outline the next best steps to achieve a good life. These individuals are not reliant on LAC however this does not mean that they are completely free of their use of services.

**Table 3: Snapshot of findings - Subgroup One**

Key themes from this subgroup:	Key distinguishing themes compared to other subgroups:
<p>Four participants from Freshwater area and three from Shanklin</p> <p>Six males and one female</p> <p>Like every other subgroup trust, listening and time appear to be key mechanisms.</p> <p>Like subgroup 2, knowledge and understanding of the Coordinator to provide support and guidance is key</p> <p>Like subgroup 2, individuals feel less isolated and disconnected from the community since being involved with LAC</p> <p>Like every other subgroup (apart from subgroup 3), accessibility in terms of transport or geographical location is not a barrier</p> <p>Like every other subgroup, employability skills are not very important to this subgroup (even though younger individuals are in this subgroup)</p> <p>Like every other subgroup, involvement with LAC has had little effect on usage of services and has not had a</p>	<p>Multitude of introductory methods (diversity of network)</p> <p>Least dependent subgroup (on service and LAC).</p> <p>Accessibility of LAC is important</p> <p>Despite this they do not need to see them more than they currently see them (more resilient)</p> <p>Interacted and met people that have brought enjoyment to their life (building social capital bonding and bridging)</p> <p>Unlike every other subgroup, some impact on integration with people from different backgrounds (social capital bridging)</p> <p>Furthest down the LAC journey</p>

great impact on re-building trust in the services	
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**Additional statements of explanation – What is it about local area coordination that works (or doesn't, for whom, under what circumstances and why)?**

- The variant methods to which individuals can be introduced to LAC (MRES) enables individuals with a range of different needs (C) to come into contact, access and utilise the support of a facilitator (MREAS) who is not available through any other service (MREAS) to address personal issues which can reduce systemic barriers (O)
- The accessibility to the Coordinator in the local community (MRES) facilitates opportunities for individuals who need casual, but specific support, (C) to contact the Coordinator when required (MREAS) at a time convenient to them (MREAS) to access support and guidance (O) before issues become greater systemic problems (O)
- Individuals who lacked trust in other people (C) through conversations with the Coordinator (MREAS) gained trust and confidence in others (MREAS) leading to increased confidence in connecting with people who could help them (O)
- Due to the ability to see the Coordinator at their own discretion (MRES) participants who only require casual support (C) can access support at a time which works for them (MREAS) leading to the Coordinator being a helping hand, rather than someone to depend on (O)
- Due to the infrequent, but effective meetings with the Coordinator (MRES) individuals who were not confident in solving specific problems (C) were supported to collaboratively solve these problems (MREAS) leading to increased understanding into how to deal with these problems independently if they were to come up in the future (O)
- For individuals who were disconnected from the community (C) conversations with the Coordinator's (MRES) means they feel more understood (MREAS) and the Coordinator's knowledge of likeminded people within LAC (MREAS) has allowed individuals to know more about opportunities which allows them to interact with people they wouldn't usually connect with (O) and they have brought enjoyment to their lives (O)
- Since being introduced to LAC (MRES) individuals that were unclear about which service to use for support (C) have approached the Coordinator as a first point of contact in the community (MREAS) mitigating pressures on the system (O)

- Due to a lack of confidence in speaking to people within the community (C) and disconnection from the community (C) weekly drop in centres (MRES) where other members of the community attend (MRES) provides an opportunity for interaction with people with similar, but also different interests (MREAS) leading to more confidence and trust in people within the community (O)
- Due to the individuals' clear vision of a good life (C) the individual interaction with the Coordinator (MRES) is one of support, encouragement and guidance (MREAS) to ensure build confidence and personal resilience is sustained (O)
- Despite individuals in this subgroup being younger (C) the Coordinator's knowledge of employment opportunities in the community (MRES) and ability to connect participants to relevant placements (MREAS) has had little impact in individuals taking opportunities to develop employability skills (O) due to participants mental health capacity (C)
- Due to the location and time of community events organised by the Coordinator's (MRES) geographical location and transport factors (C) are not a barrier to capacity building (MREAS) increasing social connectedness and belonging within the community (O)

## **Subgroup 2: Holistic Narrative “Thank you for your support, I’ve come a long way”**

This subgroup represented a total of 6 participants of which four were female and two were male. Three females were from the Freshwater area; two were aged 35-44 and one was aged 45-54. In addition, one male was from the Freshwater area aged 65-74. In contrary, one female was from the Ryde area aged 45-54 and one male from the Ryde area was aged 45-54. Four of the participants found out about LAC through the services. One introduced themselves and one found out through being approached by the Coordinator. Six out of seven participants identified as white/Caucasian. One participant preferred not to say. The strong representation of Freshwater participants in this factor could be significant for micro level CMMO’s.

The Coordinator’s personal traits of taking time to listen and understand the individuals’ needs (5 +4) is consistent as the most important item across all three subgroups. This is symbiotic with the trusting relationship the individuals have with the Coordinator (15 +3) because of their ability to directly support them and/or connect them to someone who could help (33 +2). Similarly, to the first subgroup, this subgroup has also moved beyond benefiting from the one to one relationship with the Coordinator and due to the supportive conversations with the Coordinator, relationships have been built with others (23 +1) as people and groups that they have been introduced to via the Coordinator have made them feel welcome and supported (17 +2). Furthermore, individuals know more about what there is to do in the local community based on their interests (1 +4) and have taken opportunities to be more involved in the things they like to do within the local community (2 +2) thus becoming more socially connected.

On the other hand, unlike subgroup 1, individuals’ engagement with LAC has not led to wider integration with people they wouldn’t usually connect with (22 -3). Contextually, the individuals do not feel they have developed more trust than they had before in members living within the community that come from different backgrounds (14 -2) and people that they wouldn’t usually connect with have not brought enjoyment to their life (24 -3). This could show that despite outcomes in line with social capital ‘bonding’ being achieved within this subgroup (i.e. bringing together people with similar beliefs), the context for ‘bridging’ (i.e. bringing people together with different beliefs and from different backgrounds) has not been achieved. This could align to the deeper class divisions on the Isle of Wight and the limited ethnic diversity.

Interestingly, very similar to subgroup 1, accessibility is not an issue for the individuals from this subgroup. Indeed, poor accessibility in terms of geographical location (9 -4) and poor accessibility in terms of transport (10 -4) is not a barrier. In addition, like every other subgroup, developing employability skills since being introduced to my Coordinator (19 -3) was again ranked of little importance compared to the other statements. This shows that developing employability is a very niche outcome and could be a wider contextual factor

with the older population and high volume of people with mental health issues accessing LAC on the Isle of Wight.

Individuals are more confident in terms of accessing, negotiating and connecting with the service(s) (20 +2) and despite its relatively low ranking, it could appear that the usage of the services has decreased somewhat (8 -1), especially in the context of these two statements being ranked more important in this subgroup than any other. This could show that LAC has eased systemic pressures. On the other hand, the trust individuals have in the services has not improved (16 -2) and could show the Coordinator is limited when trying to rebuild this relationship once it has already been broken.

Overall, like subgroup 1, this subgroup is further down the path of being individually resilient and in control of their own lives when compared to subgroup 3. They feel less isolated and disconnected from the local community (11 +3) due to taking opportunities to do things I like to do in the community (1 +4) and from this meeting people that have made them feel welcomed and supported (17 +2). However, unlike subgroup 1, they are also more confident in accessing, negotiating and connecting with the services because of the support from the Coordinator (20 +2). The Coordinator's ability to help individuals think about their vision for a good life and how they could get there (3 +3), but also the longer-term outcome of achieving this vision (30 +1) supports the justification for resilience increasing. Furthermore, individuals generally have the viewpoint that it is not important that they see the Coordinator more than they currently see them (32 -2) and it is not important to access them easily (26 -1), this could demonstrate power has been giving back to the people to solve their own problems.

### **Interview data to support narrative: Subgroup Two**

The Coordinator is instrumental in supporting the participants in this subgroup to improve their lives, through small achievable tasks. This ranged from understanding and applying for benefits, volunteering and skill building opportunities (cooking), or affordable activities with family members.

*"The Coordinator has been vital to developing a community spirit inside me where I want to give back to others and help them".*

The introduction into the community is an important factor, with the Coordinator a key instigator in this introduction due to the trust placed in them. This has been built up through the caring actions of the Coordinator, which is lauded by those who get to see the Coordinator each week. The time seeing the Coordinator is still important due to the need to build up this relationship.

The participants still rely on services such as a social/support worker as well as various health support, mental health nurse or psychiatrist. Since the introduction to the LAC, they have built confidence and reduced their reliance on some of these services due to the guidance and support from the Coordinator. The key listening and caring skills shown by the Coordinator has proved important to the participants trusting the Coordinator's advice and helping to shape a better life.

*“The Coordinator advised me to take up opportunities [a cooking class] which I would not have taken if I did not trust the Coordinator. They show they care and explain the how these things can help me and it did help me”.*

The reliance on the Coordinator is lessened as they continue to engage with LAC however the Coordinator is still an important part of the participants’ lives. The time taken up by participants in this subgroup ranges from 2 hours a week individually to conversation when they come across the Coordinator via different engagements (Sports Centre, Our Place, Food bank etc.).

*“My partner did everything, so when she passed away I did not know how to pay the bills, how to cook. The Coordinator was great, just sorted everything out for me and got me to come along to Our Place”.*

The participants tended to rely on the Coordinator on the back of an incident (bereavement, issue with child behaviour or mental health issue). The Coordinator was a support mechanism in their time of need.

*“The Coordinator comes over for an hour a week, we talk and he chats with my son. They get on really well and he’s supported him loads with his anger issues”.*

The Coordinator appears to have enough time to work with participants in the way they need them most. As more participants come into LAC it is likely to decrease the time each Coordinator can spend with each participant individually.

**Table 4: Snapshot of findings - Subgroup Two**

<b>Key themes from this subgroup:</b>	<b>Key distinguishing themes compared to other subgroups:</b>
<p>Four participants from Freshwater area</p> <p>Four females and two males</p> <p>Like every other subgroup trust, listening and time appear to be key mechanisms.</p> <p>Like subgroup 1, knowledge and understanding of the Coordinator to provide support and guidance is key</p> <p>Like subgroup 1, individuals feel less isolated and disconnected from the community</p> <p>However, like subgroup 3, limited impact on integration with people from different backgrounds (social capital bridging)</p> <p>Like every subgroup (apart from subgroup 3), accessibility in terms of transport and</p>	<p>Generally found out about LAC through the services</p> <p>Started to demonstrate confidence in building relationships with others and are doing more within the community (social capital bonding)</p> <p>Considerably more confident than any other subgroup in accessing, negotiating and connecting with the services</p> <p>Feel confident in terms of what a good life looks like to them and how they can achieve this</p> <p>Interacting and meeting people</p> <p>Increased sense of belonging and community</p>

<p>geographical location is not a barrier</p> <p>Like every other subgroup, employability skills are not very important to this subgroup (could show LAC more frequently used by older population on the IoW)</p> <p>Like every other subgroup, involvement with the Coordinator has had little effect on usage of services and has not re-built trust in the services</p>	<p>Not important to see the Coordinator more often</p>
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**Additional statements of explanation – What is it about local area coordination that works (or doesn't, for whom, under what circumstances and why)?**

- For individuals that lack clarity on certain things (C) the Coordinator and the time they can provide to each individual (MRES) allows them to listen and understand the needs and interests of each individual (MREAS) leading to trusting the Coordinator's judgement of connecting them with someone that can help (O)
- The open access to the Coordinator within the community (MRES) and the non targeted focus (MRES) enables a range of different individuals with different requirements (C) to feel comfortable and connected to access the Coordinator for relevant support (MREAS) this enables small problems to be addressed in a timely and efficient manner (O) easing pressure on the services.
- Due to the Coordinator's ability to invest time in each participant (MRES) those who are most vulnerable in the local community (C) can build or rebuild self-confidence through working with the Coordinator collaboratively (MREAS) leading to increased individual resilience in the longer term (O)
- Due to the Coordinator's ability to invest time in each person (MRES) those who were previously isolated and disconnected from the community (C) are heard and their specific interests are understood (MREAS) leading to the Coordinator introducing them to other members of the community with similar interests (O) thus building community resilience (O)
- Due to the broken relationship between the participants and the services (C) the Coordinator (MRES) and the support and guidance they can provide (MREAS) builds confidence in accessing, negotiating and connecting with the services (MREAS) to alleviate pressure on a range of services (O)

- The Coordinator's knowledge of the services (MREAS) takes away some of the systemic challenges (C) by supporting individuals' capacity to understand each service and what they can provide (MREAS) leading to more efficient use of the services (O).
- The variant methods of which individuals can be introduced to the Coordinator (MRES) enables individuals with a range of different needs (C) to come into contact, access and utilise the support of a facilitator who is not available through any other service (MREAS) to address personal issues which can reduce systemic barriers (O)
- Individuals have been involved with LAC for a long period of time (C) through access to the Coordinator (MRES) they have built a relationship centred on mutuality, understanding and trust (MREAS) leading to a clear vision of what a good life looks like to them (O) and the participants taking ownership and working independently towards this (O)
- Due to the individuals being disconnected from the community (C) weekly drop in centres were provided (MRES) where members of the community would attend (MRES) this provided an opportunity for interaction with people with similar interests (MREAS) building social capital among people from similar backgrounds and with similar interests through bonding (O) and reducing social isolation (O)
- Individuals were disconnected and had little idea about what there was to do in the community (C) voluntary networks such as clubs and community groups (MRES) worked closely with the Coordinator (MRES) to build community networks and promote during coffee mornings (MREAS) leading to participants knowing more about what there is to do in the community based on their interests (O) and becoming more involved in the things they like to do within the local community (O).
- Despite being made more aware of employment opportunities (C) due to the Coordinator's knowledge of employment opportunities in the community (MRES) and ability to connect participants to relevant placements (MREAS) this has had little impact in individuals taking opportunities to develop employability skills
- Individuals with low confidence (C) take on opportunities to develop life skills offered to them by the Coordinator based on their specific interests (MRES) due to the trust they have in the Coordinator (MREAS) leads to increased confidence in completing everyday tasks (O)
- Due to the location of community events organised by the Coordinator (MRES) geographical location and transport factors (C) were not a barrier to capacity

building (MREAS) this lead to a greater sense of connectedness and belonging within the community (O)

- Due to individuals being disconnected from the community (C) weekly drop in centres were provided (MRES) where members of the community would attend (MRES) however, due to the lack of attendance of those from different backgrounds (MREAS) building social capital amongst people from different backgrounds and with different interests through bridging has not occurred (O)

### **Subgroup 3 Holistic Narrative “I’m moving down the path, but I still need your personalised support”**

This subgroup represented a total of 5 participants of which three were male and two were female. Two females were from the Ryde area; one was aged 35-44 and one was aged 45-54. In addition, two males were from the Ryde area; one was aged 35-45 and one was aged 55-64. In contrary, one male was from the Freshwater area aged 45-54. Two of the participants found out about LAC through being approached by the Coordinator. One introduced themselves, one found out through the service and one through a family member. Five out of five participants identified as white/Caucasian. The strong representation of participants from Ryde in this factor could be significant for micro level CMMO’s.

Like every other subgroup, it appears that the most important items are those which are built around the personal traits of the Coordinator. The participants have a trusting relationship with them (15 +4) because they take time to listen and therefore understand what is important to each person (5 +4). This has ultimately led to the belief that the Coordinator has the knowledge and understanding to directly support or connect the participants with someone that can help (33 +3). Within this subgroup, due to this support, individuals not only have a vision for a good life and how they could get there (3 +2) but are more confident in achieving what a good life looks like to them (4 +3). This item is ranked considerably more important than any other subgroup and could be because the group are happier than any other group to share their goals and targets with the Coordinator and feel they are supported to achieve them (29 +3).

Before being introduced to LAC the individuals in this subgroup were not as disconnected from the local community (11 -1), subsequently it is not important to know what there is to do in the local community based on their interests (1 -2) or to be more involved in the things they like to do within the local community (1 0). Significantly, this item is ranked more unimportant than any other subgroup. On the other hand, this group remain dependent on the services and the Coordinator has had little impact on this (27 -3). This is supported by the limited impact in line with reducing the frequency at which individuals use the services (8 -4). Subsequently re-building a broken relationship between the individuals and the services is once more beyond the Coordinator’s capacity (16 0). However, similarly to every other subgroup, the individuals do not see it as significantly important for the Coordinator

to have a role in ensuring the services talk to each other more frequently (6 -1). This could show this is a management level intended outcome and is not recognised as much at a delivery level.

However, within this subgroup the dependency on the services, also extends to the Coordinator. More than any other subgroup, individuals feel they need to see the Coordinator more than they currently see them (32+1). This could explain why it is important for the Coordinator to be easily accessible in the community (26 +2) and why they are recognised as a first point of contact (35 +2). On the other hand, the support and guidance has started to show signs of the participants doing more for themselves (7 +2) and thus moving along the pathway towards individual resilience.

The general lack of importance when it comes to anything outside the remit of the Coordinator and participants personal relationship show further evidence that this subgroup utilises LAC predominantly at a personal level. This is shown through the insignificance of the Coordinator supporting them to interact with people they wouldn't usually connect with (22 0) and the people and groups they have been introduced to have made me feel welcome and supported (17 0). Once more this group has not gained trust in those that come from different backgrounds (14 -3).

The geographical location (9 0) and poor accessibility in terms of transport (10 +1) is more of a barrier for this subgroup than any other subgroup. This could show accessibility is more of an issue for participants in Ryde. Moreover, more than any other subgroup, participants suggest they are aware of opportunities to develop existing skills set (18 +1). However, developing employability skills is once again ranked significantly unimportant (19 -4).

Overall, this subgroup is the most dependent of all the other subgroups on the services and show some dependency on the support of the Coordinator. On the other hand, individuals are starting to show some evidence of doing more for themselves and are also the least socially isolated subgroup. The participants are at the early stages of engaging with LAC, but already have a strong relationship with the Coordinator. The scope of the programme may well start to lead to the participants becoming more in control of their own lives.

### **Interview data to support narrative: Subgroup Three**

Interviews highlighted how the participants were the most reliant on services, being dependent on others (Coordinator, Social/Support worker) for many things. The relationship with the Coordinator is very important to them, seeing them often and relying on them for greater intervention than the other two subgroups.

*“The Coordinator is helping me to get another flat, my old social worker was rubbish and left me in a bad area but the Coordinator and my social work are trying to get me out of there”.*

This indicates the difference in support provided by the Coordinator. Rather than small interventions that build up to make a greater difference, there is a different level of reliance on the Coordinator. It also shows how participants feel they have been let down by services in the past, with little done to reassure that faith.

The Coordinator continues to provide support with the little things, but it is clear the reliance on services from subgroup 3 is the greatest. The listening skills and time provided

by the Coordinator is vital for the participants, whilst with one participant the Coordinator provided emotional support that had been absent throughout their life. This signifies why there is a great dependency on the Coordinator.

The interviews also illuminated how differing participants viewed the importance of developing new relationships. The participants were not socially isolated so did not feel that developing new relationships through LAC was important.

*“I’ve got lots of mates from different things, and I come to this church because of the people. They are sound Christians who care about others, and I will care for them too. That is what I want to be involved in”.*

The Coordinator provided them with new contexts to meet new people, increasing their social capital and network of support. They appreciated the new environments, as well as trusting the Coordinator’s advice due to their developed relationships. The participants do not struggle with social interaction in this subgroup however their dependence on services and the Coordinator does not seem likely to change in the short term. It is clear from conversation that their capacity to live independently is the lowest of the 3 subgroups.

The opportunity to be employed is low in importance, however the Coordinator’s understand the capabilities of the participants and encourage them to try opportunities suitable, such as volunteering. It would appear the skillset for subgroup 3 is lower than other subgroups. The inability to work means they will remain reliant on services, despite any intervention from LAC.

*“I’m unable to work due to my learning disability so I get involved down here and help out, but I just can’t be told what to do. So I can’t have a manager, so I’m still looking for opportunities to volunteer”.*

This highlights how the Coordinator is able to support the participant in envisioning a better life and attempting to do so, however there are greater factors at play that would likely prevent the participant ever leaving LAC.

There is a large representation of participants from the Ryde area which the Coordinator is shown to have 241 participants accessing LAC. The number of referrals in previous months has been incredibly low (4 in 2018) compared to previous years which would indicate that the Coordinator is either at capacity or there is no one else who needs referring.

*“I would like to see the Coordinator more than I currently do, he’s really great when I get to see him but he’s a really busy man”*

This statement emphasises the current workload for the Coordinator, showing that the participants who currently access LAC within this subgroup require more time with them.

**Table 5: Snapshot of findings -Subgroup Three**

<b>Key themes from this subgroup:</b>	<b>Key distinguishing themes compared to other subgroups:</b>
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<p>Four participants from Ryde area.</p> <p>Three males and two females</p> <p>Like every other subgroup trust, listening and time appear to be key mechanisms</p> <p>Like subgroup 2, limited impact on integration with people from different backgrounds (social capital bridging)</p> <p>Like every other subgroup, developing employability skills are not important, but this subgroup are aware of employment opportunities.</p> <p>Like every other subgroup, involvement with LAC has had little effect on usage of services and has not re-built trust in the services</p>	<p>Predominantly approached by the LAC</p> <p>This subgroup is not socially isolated</p> <p>This subgroup is the most dependent on the services</p> <p>They get on very well with the LAC and are happy to share goals, see them as a first point of contact, but feel like they need to see them more than they currently see them (dependency)</p> <p>Participants do however feel like they can do more for themselves</p> <p>Accessibility in terms of transport and geographical location is more of a barrier</p> <p>Feel confident in terms of what a good life looks like to them and how they can achieve this (with support from LAC)</p> <p>Interacting and meeting new people through LAC with similar interests is not important (social capital bonding)</p>
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**Additional statements of explanation – What is it about local area coordination that works (or doesn't, for whom, under what circumstances and why)?**

- Individuals initially had low levels of personal resilience (C) the Coordinator and the time they can provide (MRES) enables opportunities to listen and understand the needs and interests of individuals (MREAS) fostering a feeling of being valued (MREAS) leading to higher sense of self-worth and personal resilience (O)
- The Coordinator's knowledge of the services (MRES) supports Individuals with a range of personal issues and a lack of knowledge into the complexity of the service providers (C) to connect with someone that can help (MREAS) navigating systemic barrier by making sure individuals are contacting the right service provider (O)

- The open access to the Coordinator within the community (MRES) and the non targeted focus (MRES) enables a range of different individuals with different requirements (C) to access the Coordinator whenever required (MREAS) and by viewing them as a first contact point within the community (MREAS) supports individuals with personal issues in a timely and efficient manner (before they become wider systemic issues) (O)
- Due to the Coordinator's ability to take time to listen (MRES) to those who are dependent on people and services (C) the Coordinator's are able to understand and speak positively of the individuals existing skill set (MREAS) and by working collaboratively with the Coordinator (MREAS) they are able to develop resilience so they can start to do more for themselves (O)
- The Coordinator's ability to listen (MRES) to individuals that are unclear in terms of what they would like to achieve (C) facilitates a comfortable environment where the individual can share goals (MREAS) leading to increased confidence in achieving what a good life looks like to them (O)
- Due to the support from the Coordinator (MRES) individuals who did not know what a good life looked like to them (C) work collaboratively with the Coordinator (MREAS) to map out and work towards achieving a good life (O)
- The variant methods of which individuals can be introduced to the Coordinator (MRES) enables individuals with a range of different needs (C) to come into contact, access and utilise the support of a facilitator who is not available through any other service (MREAS) to address personal issues which can reduce systemic barriers (O)
- Due to the individuals long term dependency and usage of the services (C) the Coordinator's knowledge and ability (MRES) to build capacity of what the services provide (MREAS) has little effect on individuals accessing, negotiating and communicating with the services (O)
- Due to the broken relationship between the individuals and the services (C) the Coordinator (MRES) and the support and guidance they can provide (MREAS) can do little to rebuild trust in the services (O)
- Due to the geographical location (C) and the lack of community venues (C) weekly social events the Coordinator organises (MRES) are not always accessible for individuals (MREAS) leading to opportunities missed to build individual resilience and ease dependency on the Coordinator (O)

- Due to transport barriers (C) social mornings the Coordinator organises (MRES) are not always accessible for individuals (MREAS) leading to opportunities missed to build individual resilience and ease dependency on the Coordinator (O)
- Despite being made more aware of employment opportunities (C) by the Coordinator's knowledge of employment opportunities in the community (MRES) and ability to connect participants to relevant placements (MREAS) has had little impact in individuals taking opportunities to develop employability skills
- Individuals are dependent on the Coordinator (C) as the LAC is located and is visible within the centre of the communities daily (MRES) and is accessible and approachable (MREAS) the individual becomes dependent on the support of the Coordinator (O) and feels like they need to see them more (O)

## **Reflections and refinements to the programme theory**

The findings above have demonstrated quite clearly that LAC works for different people in different ways. Within the spirit of the realist approach to the evaluation (Pawson and Tilley, 1997) the subgroup holistic narratives have provided an insight into what works for whom in what circumstances and why. The additional statements of explanation following each narrative offer new refinements to the programme theory put forward for testing at the commencement of the evaluation. However, in some cases they also show consistency with the initial programme theory.

Key refinements and recommendations for LAC moving forward are summarised in this section.

1. Consistent across all subgroups, is the importance of the personal traits of the Coordinator. The ability to ensure marginalised voices are heard through listening and understanding the needs of every individual they work with, is vital, and provides the basis for a wider birth of outcomes to be achieved. Alongside this is the knowledge and understanding the Coordinator has of the services and indeed the assets and resources available within the community such as community clubs. However, undoubtedly, the infinite time the Coordinator can spend with every individual (within reason) is the most important mechanism. Moving forward these factors should continue to be considered through the recruitment and managerial process.
2. The importance of LAC being an open service (highly accessible), but at the same time being person centred, is vital. In the 18 (P-sets) used, introductions to LAC came from a variety of methods, specifically; self-introductions, being approached by the Coordinator, conversations with people in the doctor's surgery waiting room, with family members, with health advisors, with people at the food bank and through the services (not specified). It is important the Coordinator's continue to build relationships and communicate with the services to ensure more people are aware of LAC

3. The lack of younger people accessing LAC is also something which should be explored. Specifically, within this (P-set) there were only a few individuals accessing LAC under the age of 25. With this said, individuals representing all ages have engaged with LAC. Interestingly, age does not seem to be a significant factor shaping shared viewpoints.
4. Considering the unimportance of individuals using LAC to access opportunities to develop employability skills. If this is to be a key outcome of LAC - moving forward, more support will have to be put in place and Coordinator's may have to provide further support and guidance and build more connections will voluntary and paid opportunities.
5. Poor accessibility in terms of geographical location and transport is an issue within the Ryde area and could reflect an older population which live in this area using LAC. This was gleaned during a meeting with the local area coordinator of Ryde and was confirmed through the Q sort.
6. The lack of ethnic diversity on the Isle of Wight limits social capital (bridging) from occurring. The lack of integration between those from different class backgrounds is also a concern to wider level social integration on the Isle of Wight.
7. The terminology nebulous around the 'LAC' term needs to be addressed. A definitive and consistent acronym should be alluded to the avoid confusion with the services moving forward.
8. There is scope for a more focussed evaluation on younger people who access the programme to understand more about how and why this group access the LAC.
9. There is scope for a more focussed evaluation on those participants accessing LAC on the IoW who do not identify as White/Caucasian - How and why do they engage with LAC in line with findings regarding a lack of social capital (bridging).
10. There is scope for a more focussed evaluation exploring how and why the system's services and other key stakeholders perceive LAC working and contributing to the system
11. We recommend the implementation of a monitoring approach, which captures how the usage of services has stabilised or decreased in relation to LAC on the IOW.
12. As supported by the ABM exercise, it is advised that clearer timelines are put in place to capture an individual's journey through LAC. The issue of complexity and context is entirely recognised here, however monitoring procedures should be established to make sense of who, where and when individuals benefitting from LAC achieve certain outcomes. When they achieve such outcomes are they still part of LAC or are they released to no longer rely on the LAC?
13. Finally, regarding transformational aspects of the programme, the initial programme theory conjectured prior to testing placed significant focus on the personal traits of the Coordinator and specifically the 'golden triangle' of time, listening and trust. These were confirmed as the most important mechanisms to every subgroup.

However, the holistic narratives of each subgroup also demonstrated that key outcomes centred on individual and community resilience, social capital and mitigating systemic barriers were being achieved. Though the time it takes different individuals to become confident to work independently towards their vision of a 'good life' will vary. It was clear that all three subgroups were on their way to achieving this and were supported in different capacities. While some used the LAC casually, others were more dependent on them. While some entered LAC feeling disconnected from the community, others used LAC for personal one to one discussions about specific forms given to them by the services. Ultimately, the complexity of individuals accessing LAC means LAC will continue to be an asset for the services, particularly in supporting those hard to reach individuals.

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## **Appendices**

### **Appendix 1: Candidate programme theory for testing**

#### ***Key Contexts surrounding LAC – Isle of Wight (Macro)***

##### **MACRO (IOW)**

- High unemployment
- Dependency on services
- Low Empowerment/ aspiration
- Poor integration of services
- Limited access to services
- Low resilience
- Systematic issues – hard to get in and out.

#### ***Key Contexts surrounding LAC – Ryde (Micro)***

##### **MICRO (RYDE)**

- Older retired
- Older with mental health issues
- Young and single parents
- Single occupancy
- Densely populated, but social isolation prevalent
- Loneliness
- Lack of things to do
- Geographical issues regarding access/ community centre at the top of a hill
- Access and awareness of facilities
- Reliance on system

#### ***Key Contexts surrounding LAC – Shanklin (Micro)***

### **MICRO (Shanklin)**

- Boredom
- High unemployment
- Closed networks
- Acceptable in the community/ class divide (white retired/affluent/ middle class and white young people/ deprived)
- Retirement destinations
- Transport issues regarding accessibility
- Tourist economy
- Limited community assets
- Ageing and stagnant high street business

### ***Key Contexts surrounding LAC – Freshwater (Micro)***

#### **MICRO (Freshwater)**

- Affluence and deprivation next to each other
- Awareness of opportunities
- Access to facilities
- Transport issues regarding accessibility
- Strong family ties
- Unsustainable living (sofa surfing)

### **Key stakeholders**

- Children's Services
- GPs
- Counsellors
- Community Support Officers
- Our Place Drop In
- Housing
- Local Links Trust/ People Matters
- Police
- local craft group
- Children Around the Family (school)
- Primary Mental Health

- Local Health Trainer
- Church)
- Family
- Foodbanks
- Adult Social Care
- Mothers Union Group
- Other community members

### **Key outcomes**

- Build personal and community resilience
- Reduce reliance on service (cost saving)
- Contribute to Vanguard outcomes
- Contribute to Public Health Outcomes
- Improve access to and awareness of services
- Increase social capital
- Give power back to the people to solve their own problems
- Provide innovative approach to mitigate systemic barriers to facilitate service transformation
- Reduce dependency

### **Key resources**

- Time to build relationships
- Driver, passenger, pedestrian (Isolated and lonely people)
- Vicars
- Child services
- Adult social care
- Barnados

- Housing
  - Community groups
  - Community clubs
  - Community Centres
  - Colleges and Schools
- No uniform / name badge

### **Anticipated Reasoning**

- Listening and valuing voices
- Trust
- Building relationships
- Building on people's existing skill sets
- Coproduction
- Goals are collaboratively set
- Seen as part of the community

### **CMMOS**

- *C = Context: circumstances and environment / personal characteristics of the participants*
- *MRES = Mechanism Resource: Resources involved and provided in the programme*
- *MREAS= Mechanism Reasoning: Reaction and reasoning that comes about in response to the resource taking into consideration the circumstances*
- *O = Outcome: The resulting outcome that is produced as a result of the above 3 key elements coming together*

### **Macro – Across Shanklin, Ryde and Freshwater**

- *Individuals have limited trust in those working within the services on the island due to their perceived superior status (C) the LAC has no set uniform or name badge (Mres) which removes the perception of authority and superiority (Mreas) leading to trust being built in the support networks (O)*
- *Individuals have limited trust in those working within the services on the island due to their non-appearance within the community (C) the LAC is located and is visible within the centre of the communities daily (Mres) which means the LAC is more approachable (Mreas) leading to trust and connectedness being built in the support networks (O)*
- *Negative experience of services on the island due to poor accessibility (C) the LAC utilises their knowledge and understanding of the services (Mres) to support individuals to access the right service, at the right time, through the most effective and efficient channels (Mreas) reducing strain on services (cost saving) (O)*
- *Negative experiences of services on the island due to a lack of awareness and understanding of what each service does (C) the LAC utilises their knowledge and understanding of the services (Mres) to support individuals to build an awareness of how, when and why they should utilise the service most effectively and efficiently (Mreas) Improving awareness of required service and reducing strain on other services (cost saving) (O)*
- *Within an island context there is a dependency on the services (C) the LAC takes time to collaboratively set realistic goals with the individual (Mres) to develop shared ownership and responsibility (Mreas) this gives power back to the people to become an active participant within their own lives (O)*
- *Within an island context there is low resilience (C) the LAC takes time to collaboratively set realistic goals with the individual based on their existing skills set (Mres) to initiate a positive outlook on one's self (Mreas) to build personal resilience in the long term (O)*

- *Within the island context there is systemic barriers which affect service transformation (C) therefore the LAC's position as an intermediary supporting individuals and families across the services (Mres) provides an opportunity for building relationships between the services (Mres) leading to an innovative approach to mitigate systemic barriers to facilitate service transformation (O)*
- *Within a context of high unemployment (C) the LAC utilises their networks (Mres) to explore employment opportunities that are available on the island (Mreas) which develops the process of individuals having access to and knowledge of employment opportunities (O)*
- *To address the issue of low aspirations amongst young people (C) the LAC forms agreements with local facilities (Mres) to provide subsidies to support young people to make progress towards specific long-term goals (Mreas) this contributes to building aspiration and proving direction to young people's lives (O)*
- *To address issues linked to effectiveness and efficiency of services i.e. hard for individuals to get out of the system (C) the LAC supports the individual on their journey (Mres) to transform into a resilient and independent subject (Mreas) reduces dependency on the services (O)*

#### **Micro – Ryde**

- *Despite being densely populated, social isolation for older retired people is prevalent (C) the LAC and the time he is able to provide (Mres) enables the building of understanding and trust (Mreas) so that the person can access more opportunities in the community (O)*
- *To address the issue of social isolation for older retired people (C) the local area coordinator and the time they provide (Mres) enables further opportunities to listen and understand the needs and interests, fostering a feeling of being valued (Mreas) so that the person can access specific opportunities in the community based on those interests (O)*
- *For those who are reliant on the system, with negative outlooks on services and provision (C) the LAC and his awareness of additional services and networks (Mres) draws upon the assets of the individual and what they can contribute to these networks opposed to highlighting the problems (Mreas) which enables the individual to take part in these networks (O).*

#### **Micro – Shanklin**

- *Within an area of closed networks and a clique (C) voluntary networks such as clubs and community groups (Mres) are accessed by the LAC and a relationship is built with them to integrate alienated people with these groups (Mreas) to increase social capital (O)*
- *Within an area of closed networks and a clique impacting on young unemployed (C) voluntary networks such as clubs and community groups through the referral of the LAC (Mres) fosters key employability skills and confidence (Mreas) to provide increased access to paid work (O)*
- *Boredom is a key issue in the area based on the tourist sporadic situation, lack of facilities and a tired location (C) the links the LAC has with the community groups and the opportunities they provide (Mres) provides increased awareness and access to constructive opportunities (Mreas) which then reduces boredom (O).*

### **Micro – Freshwater**

- *Limited awareness of opportunities within the community (C) drop in centres are provided (Mres) where organisations are in attendance alongside members of the community (Mreas) providing access to new opportunities or existing (O)*
- *Community disconnect (C) Drop in centres are provided where organisations are in attendance alongside members of the community (Mres) provides an opportunity for interaction (Mreas) creating social capital amongst people themselves and better relationships / bonding and bridging (O)*

## **Appendix 2: Sub group 1 crib sheet evidence**

Q Factor 1 Story / Holistic narrative

7 participants loaded onto this factor

### **Items ranked at +4 and or +3**

5. I feel the Local Area Coordinator takes time to listen to me and understands what is important to me (+4)

33. I believe the Local Area Coordinator has the knowledge and understanding to directly support me or connect me to someone who could help (+4)

26. It is important to me that the Local Area Coordinator is easily accessible in the community (+3)

31. It is easy to contact the Local Area Coordinator when I require their support and guidance (+3)

35. I recognise my Local Area Coordinator as a first point of contact within my local community (+3)

### **Items ranked higher in factor 1 array than in any other factor arrays**

13. Because of the Local Area Coordinator, I feel I am more aware of other individuals that have similar interests to me within my local community (0)

14. Since working with the Local Area Coordinator, I have more trust than I had before in members living within my community that come from different backgrounds to me (0)

19. I have taken opportunities to develop my employability skills since being introduced to my Local Area Coordinator (-1)

22. The Local Area Coordinator has supported me to interact with people I wouldn't usually connect with (+2)

24. People that I wouldn't usually connect with have been introduced to me through the Local Area Coordinator and they have brought enjoyment to my life (+1)

26. It is important to me that the Local Area Coordinator is easily accessible in the community (+3)

27. Since being introduced to the Local Area Coordinator I feel less dependent on the service(s) (0)

31. It is easy to contact the Local Area Coordinator when I require their support and guidance (+3)

33. I believe the Local Area Coordinator has the knowledge and understanding to directly support me or connect me to someone who could help (+4)

34. The Local Area Coordinator encourages and supports me to solve my own problems (+2)

35. I recognise my Local Area Coordinator as a first point of contact within my local community (+3)

### **Items ranked lower in factor 1 array than in other factor arrays**

3. The Local Area Coordinator has helped me think about my vision for a good life and how I could get there (-3)

4. Since working with the Local Area Coordinator, I am more confident and feel I can achieve what will lead to a good life for me (-1)

15. I have a trusting relationship with the Local Area Coordinator that I work with (+2)

17. People and groups, I have been introduced to via my Local Area Coordinator have made me feel welcome and supported (+1)

18. Since being introduced to my Local Area Coordinator, I feel I am aware of opportunities to develop my existing skills set (-3)

32. I feel like I need to see the Local Area Coordinator more than I currently see them (-4)

### **Items ranked at -4 and or -3**

10. I would like to attend events in my local community, arranged by my Local Area Coordinator, but poor accessibility in terms of transport is a barrier for me (-4)

32. I feel like I need to see the Local Area Coordinator more than I currently see them (-4)

3. The Local Area Coordinator has helped me think about my vision for a good life and how I could get there (-3)

9. I would like to attend events within my local community, arranged by my Local Area Coordinator, but poor accessibility in terms of my geographical location is a barrier for me (-3)
18. Since being introduced to my Local Area Coordinator, I feel I am aware of opportunities to develop my existing skills set (-3)

### **Distinguishing statements**

26. It is important to me that the Local Area Coordinator is easily accessible in the community (+3)
31. It is easy to contact the Local Area Coordinator when I require their support and guidance (+3)
35. I recognise my Local Area Coordinator as a first point of contact within my local community (+3)
34. The Local Area Coordinator encourages and supports me to solve my own problems (+2)
22. The Local Area Coordinator has supported me to interact with people I wouldn't usually connect with (+2)
24. People that I wouldn't usually connect with have been introduced to me through the Local Area Coordinator and they have brought enjoyment to my life (+1)
1. Since working alongside the Local Area Coordinator, I feel I know more about what there is to do in the local community based on my interests (+1)
27. Since being introduced to the Local Area Coordinator I feel less dependent on the service(s) (0)
14. Since working with the Local Area Coordinator, I have more trust than I had before in members living within my community that come from different backgrounds to me (0)
19. I have taken opportunities to develop my employability skills since being introduced to my Local Area Coordinator (-1)
4. Since working with the Local Area Coordinator, I am more confident and feel I can achieve what will lead to a good life for me (-1)
17. People and groups, I have been introduced to via my Local Area Coordinator have made me feel welcome and supported (+1)

18. Since being introduced to my Local Area Coordinator, I feel I am aware of opportunities to develop my existing skills set (-3)
3. The Local Area Coordinator has helped me think about my vision for a good life and how I could get there (-3)
9. I would like to attend events within my local community, arranged by my Local Area Coordinator, but poor accessibility in terms of my geographical location is a barrier for me (-3)
10. I would like to attend events in my local community, arranged by my Local Area Coordinator, but poor accessibility in terms of transport is a barrier for me (-4)
32. I feel like I need to see the Local Area Coordinator more than I currently see them (-4)

### **Using demographic information**

Opposed to doing this before factor interpretation, Watts and Stenner suggest waiting because each factor array is approached on its own terms and avoids preconception and expectation.

#### *Demographical observations from factor 1:*

- 3 out of 7 participants from Richard's area
- 4 out of 7 participants from Adam's area
- 0 out of 7 for participants from Steve's area
- 6 out of 7 participants were male
- 1 out of 7 participants were female
- 7 out of 7 participants defined their ethnicity as White / Caucasian
- 1 from Richard's area aged 18-24. Found out through introducing themselves to LAC
- 1 from Richard's area aged 25-34. Found out through Local Health Advisor.
- 1 from Adam's area aged 35-44. Found out via the services
- 1 from Adam's area aged 45-55. Found out through person at Freshwater Food Bank
- 1 from Richard's area aged 55-64. Found out through introducing themselves to LAC
- 2 from Adam's area aged 65-74.
  - 1 from Adam's area aged 65-74. Found out through LAC approaching them
  - 1 from Adam's area aged 65-74. Found out through someone in the Doctors surgery.
- The impression from this data is that this group of people represent a range of different ages, thus showing how age might not necessarily be an important demographic for what participants rank as most important. Significantly, it demonstrates the breadth of ways in which the participant can come to be in contact with the LAC programme, which could show its accessibility to people with a

complexity of needs. It also shows that 100% of participants in this group identify as White/Caucasian and could be linked to the insignificance of items around more trust than before in terms of members living within the community that come from different backgrounds (15 0) (in relation to ethnic beliefs and values).

### **1<sup>st</sup> take - Initial reflections / hypotheses (Applying logic of abduction)**

In line with Watts and Stenner (2012) the logic of abduction pertains to the view of considering the implications of each items' ranking. What does it mean? Why is it ranked where it is?

It is important to once again reiterate that these items were ranked by participants in line with 'how important the item is to me' – least important -4 to most important +4.

- Participants in this group viewed the item, the Local Area Coordinator has the knowledge and understanding to directly support me and connect me to someone who could help me (33 +4) as most important.
  - This may be due to the importance of the Local Area Coordinator's ability to take time to listen to participants and understand what it is that is important to each participant (5 +4).
  - This could also be supported by the participant's acknowledgement that, it is important for them to easily access the LACs within the community (26 +3), and the importance in being able to contact the LAC when support and guidance is required (33 +3). Moreover, the trusting relationship with the Local Area Coordinator that they work with (15 +2) supports this assumption.
- Interestingly, the group ranked the statement I need to see the Local Area Coordinator more than they currently see them (33 -4) as significantly less important.
  - Therefore, the ability to recognise the Local Area Coordinator as a first point of contact within their local community, as being important to them (35 +3), yet not needing to see the LAC on a more frequent basis, could show evidence of involvement with the LAC reducing dependency and subsequently strain on the services.
  - However, in contrast, participants did not rank it as significantly important that since being introduced to the Local Area Coordinator they felt less dependent on the service(s) (27 0), and indeed, it must be stated that this item was ranked higher than any other group. On the other hand, the Local Area Coordinator encourages and supports them to solve their own problems (34 +2) was ranked higher than any other group. This could show that they

did not feel dependent on the services before being introduced to their LAC or that they use few services.

- Another point of discussion to note, is that it is unclear how long the LACs spend with each participant. This will need to be clarified during the interviews to gain a better understanding of how much time, on average, is spent with each participant, and indeed whether this has decreased over time, in terms of reducing dependency.
- Those in this group do not see accessibility, in terms of transport, being a barrier to attending events in their local community, arranged by their Local Area Coordinator (9 -4)
  - This could be due to demographics and will be tested during the cribs process. This could be supported by the participants indicating that poor accessibility in terms of geographical location, is not a barrier for them (10 - 3).
- The Local Area Coordinator has helped me think about my vision for a good life and how I could get there (4 -3) was ranked lower than any other group.
  - This could be because they already had/have a vision of what a good life is to them, but they required support in getting there initially. Paradoxically, it could be something which needs to be explicitly addressed within the programme, if it is a main outcome for this specific group of participants. This should be tested during interviews.
- The group did not see the item, I am more aware of opportunities to develop my existing skills set, since being introduced to their Local Area Coordinator (18 -3) as significantly important.
  - This should be explored within the demographics.
- The group did not see it of significant importance to them, that they were more aware of other individuals that have similar interests within the local community (13 0), furthermore, they did not show it was important to them that they had more trust than they had before, in members living within their community, that come from different backgrounds to themselves (14 0).
  - This was interestingly ranked higher than any other group which could show aspects centred on integration with others and building social capital being important to some extent for this group, but not as much of a primary outcome compared to other outcomes.
  - In contrary, the Local Area Coordinator has supported me to interact with people I wouldn't usually connect with is (22 +2) is ranked higher than any other group. People that I wouldn't usually connect with have been

introduced to me through the Local Area Coordinator and they have brought enjoyment to my life (24 +1) is also ranked higher than any other group.

- This could show building social capital is important, but not as important as one to one support at this moment in time for those participants. Indeed, this could be a longer-term outcome which could be seen to be more sustainable in future evaluations.

### **Adding additional items**

This section focuses on items currently omitted up to this stage from the arrays.

2. Since being introduced to the Local Area Coordinator, I have been more involved in the things I like to do within my local community (0)
6. As the Local Area Coordinator understands me, I think the Local Area Coordinator could help to make sure the service(s) I use talk to one another more frequently and are aware of my circumstances (0)
14. Because of the Local Area Coordinator's support and guidance, I feel I can do more for myself (+1)
15. Since working with the Local Area Coordinator, I have had to use the services less often (-2)
11. Before being introduced to the Local Area Coordinator I often felt isolated and disconnected from my local community (+2)
12. Since being introduced to the Local Area Coordinator I feel more connected to my local community (0)
33. Before being introduced to the Local Area Coordinator I often felt isolated and disconnected from my local community (+2)
16. Since working with the Local Area Coordinator, the trust I have in the services I use has improved (0)
20. Since working with the Local Area Coordinator, I am more confident in terms of accessing, negotiating and connecting with the service(s) (-2)
21. Since being introduced to the Local Area Coordinator, I feel I am managing my own health and well-being more effectively (-2)
23. I feel more confident in building relationships due to the supportive conversations with the Local Area Coordinator (-1)
25. It is important to me that my Local Area Coordinator has no set uniform and no pre-set agenda (-1)
28. I think it is important that I am leading the process of setting my own goals and planning for the future (+1)

29. I am happy to share my goals and targets with the Local Area Coordinator as I feel they will encourage me to achieve them (+1)

30. I have worked with my Local Area Coordinator to achieve my aspirations, build my vision and plan my future (-2)

**Appendix 3: Interview Schedule Factor 1**

Question	In relation to provisional C-M-O from Q	Notes/ reflections/ refinements during Realist Interviews
1) When were you introduced to the LAC network?	Gauge where they are in terms of their journey – compared to time with the LAC network (C)	
2) Why is it important that your LAC takes time to listen and understand you?	The local area coordinator and the time they can provide to each person (MRES) allows them to listen and understand the needs and interests of each person (MREAS) leading to trusting the local area coordinators’ judgement of connecting them with someone that can help (O)	
3) How often do you see your LAC on a one to one basis?	<p>The accessibility to the local area coordinator in the local community (MRES) facilities opportunities for individuals who need casual, but specific support (C) to contact the local area coordinator when required (MREAS) at a time convenient to them (MREAS)</p> <p>Due to the ability to see the local area coordinator at their own discretion (MRES) participants who only require casual support (C) can access</p>	

	support at a time which works for them (MREAS)	
4) Generally, what do you seek support from the LAC for?	facilities opportunities for individuals who need casual, but specific support (C)	
5) When you see the LAC on a one to one basis, how much time do you spend with them, usually?	(C) How much time is needed for this sub-group? (C) Less dependent on LAC	
6) Do you see your LAC less frequently, in relation to when you were first introduced to them?  a. Can you talk me through how your involvement with the LAC has changed?	leading to the local area coordinator being a helping hand, rather than someone to depend on (O) and more resilient (O)	
7) Why is it important to have the LAC as a first point of contact in your community?	(C) to come into contact, access and utilise the support of a facilitator (MREAS) who is not available through any other service (MREAS) to address personal issues which can reduce systemic barriers (O)	
8) How often do you attend weekly community drop INS/ coffee mornings arranged by your LAC?	the local area coordinators' knowledge of likeminded people within the network (MREAS) has allowed individuals to take opportunities to interact with people they wouldn't usually connect with and they have brought enjoyment to their lives (O)	
9) To what extent does the time the LAC can provide support you	To access support and guidance (O) before issues	

personally?	become greater systemic problems (O)	
10) Has your involvement with the LAC network introduced you to other people that you now socialise with?	For individuals who were disconnected from the community (C) conversations with the local area coordinators' (MRES) means they feel more understood (MREAS) and the local area coordinators' knowledge of likeminded people within the network (MREAS) has allowed individuals to take opportunities to interact with people they wouldn't usually connect with and they have brought enjoyment to their lives (O)	
11) How have people/ services/ groups you have been introduced to through the LAC supported you?  a. Who are these people/ services/ groups and how have they supported you?	Increased confidence in the local area coordinator to connect them with someone who can help them (O)	
12) To what extent is developing employability skills not an important component of the network for you and why is this?	The LAC's knowledge of employment opportunities in the community (MRES) and ability to connect participants to relevant placements (MREAS) has had little impact in individuals taking opportunities to develop employability skills (O)	



## Appendix 4: Participant Overview

### Subgroup 1:

Name (area)	Gender	Age	How they were introduced to the network	Overview of where they were?	Overview of where they are now
Dave (Freshwater)	Male	45-54	Referred by person at food bank	Dave was in a difficult situation with income and debt. He was isolated from his daughter who he was not seeing very much and was feeling isolated as he had lost work and could not find another job.	Dave is no longer in direct contact with LAC as he is in Gibraltar but before the left the island, his debts were sorted as I had linked him with SSAFA armed forces support that had helped with some of the debts. He was interested in contributing to the local time bank allotment project and was seeing his daughter regularly. He is currently stopping with his daughter in Gibraltar but does admit life is quite tricky again now.

Jonathan (Shanklin)	Male	55-64	Introduced themselves	Data not provided	Data not provided
Tom (Shanklin)	Male	25-34	Local health advisor	Data not provided	Data not provided
Sam (Freshwater)	Female	65-74	Someone in the Doctor's surgery	Sam was in a very isolated position having moved to the island recently from America not knowing anyone. She was having memory issues due to stress and a previous illness contracted abroad.	Sam is shortly due to leave the island to move closer to her daughter in Kent who she has a strong relationship with. Whilst here she has built up a small network of friends who have supported each other as new women to the island. Sam has donated items to the local drop and swap scheme to benefit others who may not have enough at home and she has been in talks with Barnardo's to offer support to new mums as she used to be a nurse. This did not come to fruition as she is now moving.

Ravi (Shanklin)	Male	18-24	Introduced themselves	Data not provided	Data not provided
Reilly (Freshwater)	Male	35-44	Introduced via the services	Reilly was in a poor state of mental health and was sleeping rough. He did not have many places he felt safe on the island but did feel safe talking to me and at the Our Place community café.	Reilly had a downturn in mental health and last year when we could not get him additional medication as he had been taking too high a dose and GP would not prescribe more, he felt we were no longer helping and he refused to return to Our Place or any of my calls. His current whereabouts are unknown.

**Subgroup 2:**

Name (area)	Gender	Age	How they were introduced to the network	Overview of where they were?	Overview of where they are now
Helen (Ryde)	Female	45-54	Introduced via the services	Helen was suffering severe mental illness, she wouldn't leave her house was suffering severe depression and needed to be referred to the mental health home treatment team to prevent a hospital admission. Helen had no social outlet, issues with family and was in financial difficulties due to having to give up her self-employed gardening business.	Helen now volunteers 2 days per week within a local community hub supporting volunteer recruitment. Helen has been supported to access support regarding benefits which has enabled her to start working again 2 days per week which is sustainable. Helen states she still struggles but feels there is support around her and can now see a future.
Curtis (Ryde)	Male	45-54	Introduced via the services	Curtis is a 50 year old gentleman with significant history of trauma throughout his childhood and his adult life. Acquired brain injury at birth has exacerbated his mental health problems. He has had various diagnoses, ranging from depression/anxiety to severe personality disorder.	After meeting with Curtis several times, contacting his previous mental health worker on the mainland and talking to him about what he is passionate about we worked together to introduce Curtis to a local community centre.  Curtis immediately became involved in the gardening, helping to paint fences and creating homemade jewellery and rugs for the community centre to sell to raise money.

				<p>states that the job centre is blocking this due to his history of violence and aggression.</p> <p>He feels over sedated on his current medication, finding it difficult to motivate himself.</p> <p>He suffers anxiety when faced with new situations, and would benefit from some support with accessing services</p>	<p>He now uses the community centre as often as he feels he needs to. He loves to interact with like-minded individuals.</p> <p>He has used the woodwork area to make a tombola ticket drum for the British legion and continues to collect bottle tops, stamps and other recyclable material from his neighbours to generate additional income for the community centre and other local charities.</p> <p>Curtis now goes out to bingo, plays snooker for the British legion and goes sea fishing independently as he feels he has the confidence.</p> <p>Walked alongside /Curtis to ensure he had all the information and a choice in relation to his medication.</p> <p>Curtis feels really happy and</p>
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				<p>independent, he now sees me in passing at the community centre and tells me about all the exciting things he has done or is doing.</p> <p>Curtis is an integral part of the gardening group at Aspire and is helping to plan the future activities the group will be doing throughout the summer.</p> <p>Curtis doesn't feel he needs to see the mental health team as often and is settled in his accommodation.</p> <p>Curtis has shown no violence or aggression and says he always feels calm now as he is doing what he enjoys (apart from when his neighbour's cat digs fouls his vegetable plot at home)</p>
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Darryl (Freshwater)	Male	65-74	Introduced via the services	Darryl had lost his wife in the last year and was struggling to cope with bills, his flat and was very isolated and was not going out.	Darryl has now employed a cleaner, gets some of his meals delivered as he is not confident at cooking alone. He attends a weekly cooking session where he cooks with other community members once a week. He plays his guitar at Our Place once a week and has started playing guitar for the local respite care home. He is now walking regularly with a group of people twice a week and is accessing informal bereavement peer support which is helping him move forward with the loss of his wife. He has joined a local arts club where he enjoys musical performances throughout the year and says he is busier than he has ever been.
Karen (Freshwater)	Female	35-44	Introduced themselves	Karen was in a position where she was not seeing her children, was struggling in a relationship with her partner and was not in control of her finances and having to access foodbank	Karen has become heavily involved in giving her time to others, she supports people in the community visiting them in the week. She has spent time at the local sports centre volunteering with a toddlers group and also with the café. She has been in more discussions with wider family and spent time with her daughters last summer and is phone contact with them semi-regularly. She has been exploring her housing options and is now applying for her MA which she never thought she

					would be doing after her life had become so difficult. She also offers a listening ear regularly at the Our Place drop-in.
Sue (Freshwater)	Female	35-44	Introduced via the services	Sue was introduced with her family who were introduced by children's services.	Sue and family are still under children's services but her son now has support from the youth trust. Sue herself attends weekly cooking sessions to improve her skills in that area. She has been involved in cake baking raising money for charities on the island. She has recently joined the gym and her home is in a much better condition as she has painted it with her husband. She has also been involved in painting the local sports centre. She is now seeing herself as more than just mum and wife and is finding time to do some of the things she loves and is great at.

Katherine (Freshwater)	Female	45-54	LAC approached me	Katherine was introduced by local school as she was struggling with her daughter and the loss of her partner.	<p>Katherine is now much more involved in the local community. She helps her next door neighbour with shopping trips, she has begun to keep chickens and shares the eggs with neighbours. Family have stepped down from being under TAF (team around the family) and her daughter attended a residential adventure placement which they did not think would happen as the pair had not been separated since the death of dad and also daughter did not like exercise.</p> <p>After linking them with Barnados and through joint work, Katherine also cleared her daughter's room so that they began sleeping in separate rooms, something again that had not happened since partner's death. Relationship between them is now much stronger and both are more resilient independently.</p> <p>Katherine began working locally which she had not done for a long time. She is now looking at how she can offer support to local people through dog walking and potentially building that into a part-time business.</p>
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**Subgroup 3:**

Name (area)	Gender	Age	How they were introduced to the network	Overview of where they were?	Overview of where they are now
Kevin (Ryde)	Male	55-64	LAC approached them	Kevin was living in an inappropriate flat with noisy neighbours and a limited social network. Due to Kevin's aggressive behaviour he had been banned from many establishments in Ryde. Kevin had a history of being abused as a child which still affected him.	Kevin is now accessing counselling for his childhood abuse, he is also in weekly contact with a supporting people worker to help with housing. John has calmed down due to feeling he has support and real friendships in his local community. Through collaborative working Kevin now visits local cafes and community venues. He attends church and is a member of the British legion which he raises money for. Kevin has a weekly timetable where he has an activity every day. These include functional skills, craft groups and bible studies. There have been no reports of Kevin becoming angry within any of his chosen activities.

Dom (Freshwater)	Male	45-54	Introduced via family member	Dom was introduced as he was struggling with his MS diagnosis.	Dom remains at home with family but has been active in upcycling furniture when his condition allows. He has also been instrumental in directing the redecoration of his own room and is remaining active at home with aids and adaptations. He is now in receipt of more income as I helped him complete PIP and ESA forms in relation to his illness. He is now keen on producing a guide of MS friendly pubs on the island.
Tom (Ryde)	Male	35-44	LAC approached them	Tom has severe mental and physical health problems. He had been asked to leave his volunteering role a local community café and music group when I became involved. Tom had been getting angry and had been caring for his dad.	Tom became involved in several projects which suited his creative side. He became involved in a writing group and decided to research and write a book about the 1960s show the prisoner. Tom has had his book published with all proceeds going to charity. Tom is now accessing his GP and specialists regarding his physical illness. Tom has remained independent and no needed to be in contact with local area coordination for over 12 months.
Faye (Ryde)	Female	35-44	Introduced via the services	Faye was introduced via the mental health service after being diagnosed with PTSD, anxiety and depression. Faye has mental health issues resulting from her time in the armed forces. Emma developed PTSD, anxiety and	After meeting Faye several times and discussing her passion for weight lifting, comic books and films we talked about her isolation. Faye feels she has things to do during the day with her weight training and voluntary work but feels

				<p>depression. Emma had been accessing mental health services and is relatively stable. She volunteers at a local Christian charity 3 mornings per week cleaning. Emma is also a very keen and talented weight lifter who competes at a national level. Faye does however feel lonely and isolated on an evening.</p>	<p>that late evening she sits in all night alone.</p> <p>Faye stated she loved films but hated going to the cinema alone. I had connections with other people in the community who felt exactly the same. Faye and I came up with the idea of a Cinema Social Group who would meet weekly, chat about films and then visit the local cinema to see what was on.</p> <p>Faye set up a Wednesday meet up at a local community centre for refreshments and then on to the cinema to see Spiderman. Several people attended and Faye wants to make this a weekly group.</p> <p>Faye feels really good about this and feels like she will make some real friends. She plans to visit Comic-Con in November and wants to arrange a group trip there.</p>
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Jolie (Ryde)	Female	45-54	Introduced themselves	Jolie suffers from multiple sclerosis. She has to use a wheelchair constantly and was becoming socially isolated. She has a few friends visiting at home but was never going out.	Jolie now is able to use the bus which has allowed her to access the island. She attend the MS group weekly and goes on trips with them when available. Jolie attends a women in sheds group and making great friends and wooden signs for her house. Jolie contacts me regularly and still likes to meet up as she feels as her health deteriorates she will need more support and wans the Local area Coordinator alongside her through this process.
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