

Strengthening voices, realising rights

Evaluation final report

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Executive Summary

Strengthening Voices, Realising Rights (SVRR) was a ground-breaking funding initiative from Trust for London and City Bridge Foundation. SVRR aimed to give Disabled people more control over grant-making for organisations run by and for Disabled people. This was only partially successful, but the learning generated is now informing other funding streams with similar aims.

The funding allocated through SVRR, between 2019 and 2024, was transformative for some Deaf and Disabled People's Organisations (DDPOs) and for many Deaf and Disabled Londoners (DDLs). The learning from evaluating this initiative has led to five key findings and seven recommendations for funders.

Overall, this evaluation shows that there is potential for a dramatic change in the way services for Disabled people are provided and funded. Implementing the recommendations would create a system change in advice provision for Disabled people. We hope this evaluation report will stimulate these much-needed changes.

Acknowledgements

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Thanks also to the staff at Trust for London whose commitment to the evaluation and the learning it can generate has underpinned the work, whose insight and contributions have pushed the report to meet the needs of all the partners.

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List of acronyms

BAM – Benefits Advice Manager

BAW – Benefits Advice Worker

CEO – Chief Executive Officer

DDL – Deaf or Disabled Londoner

DDPO – Deaf and Disabled People’s Organisation

DLA – Disability Living Allowance

DWP – Department for Work and Pensions

ESA – Employment Support Allowance

GAP – Grants Assessment Panel

IL – Inclusion London

PIP – Personal Independence Payment

SVRR – Strengthening Voices, Realising Rights

UC – Universal Credit

Key Findings

Impact of DDPOs: DDPOs play a crucial role in the advice service ecosystem, offering a unique blend of professional expertise and lived experience. They provide holistic, person-centred peer support that also benefits clients by connecting them to community and improving their wellbeing.

Financial Value: The SVRR programme generated significant financial value for Deaf and Disabled Londoners (DDLs), helping them access their rights and reduce poverty. Every £1 invested in SVRR generated at least £3 for DDLs.

Capacity building: Provided by Inclusion London and including training, peer support networks, and business development assistance it proved essential for enhancing DDPOs’ effectiveness and sustainability. This support enabled organisations to better serve their communities and adapt to rapid changes such as the Covid-19 pandemic.

Challenges: The programme faced several challenges, including high demand, complex client needs, and external factors such as the Covid-19 pandemic. These challenges highlighted the need for longer-term funding and the importance of peer support and networking.

Lasting Changes: The SVRR programme has contributed to deeper changes informing the launch and direction of the Disability Justice Fund and informing the Propel Funding initiative, which will contribute to the long-term sustainability of DDPO advice services.

Recommendations for Funders

- (1) Prioritise **longer-term funding** of 6 years or longer.
- (2) **Fund capacity building initiatives** that prioritise network building and shared learning.
- (3) Encourage applicants to **include costing to address wellbeing** issues for staff.
- (4) Fund advice services for delivery with **more than one advice worker**.
- (5) **Recognise and fund access costs** for staff and clients.
- (6) Offer additional funding for organisations to engage in networking, development, and peer-relationship building.
- (7) Adopt a **mixed funding model** that prioritises specialist DDPO community advice provision alongside advocating for larger agencies funded to improve their accessibility.

Introduction

This report examines the crucial role of Deaf and Disabled People's Organisations (DDPOs) in delivering advice services across London. DDPOs are uniquely equipped to provide support, blending professional expertise with lived experience to meet the diverse needs of their clients. The report highlights the significant impact of these services on the lives of Deaf and Disabled Londoners (DDLs), demonstrating how DDPOs help DDLs to navigate complex systems, access their rights, and enhance their overall well-being.

In addition to showcasing the essential services provided by DDPOs, the report underscores the importance of capacity building. Capacity building initiatives, such as training, peer support, and business development assistance, are vital for enhancing the effectiveness and sustainability of DDPOs. These initiatives enable organisations to better serve their communities, adapt to changing needs, and ensure long-term impact. Through an analysis of the SVRR programme, this report emphasizes the need for continued support and investment in both DDPO advice services and capacity building to foster a more inclusive and equitable society for DDLs.

Context

There are 1.3 million Deaf and Disabled people in London¹. Disabled people are far more likely than non-disabled people to be living with poverty. Nationally, Disabled people make up 28% of those living in poverty – over one in four. The impact extends to Disabled people's families and other co-dwellers: a further 20% of those in poverty live in a household with a Disabled person². In London, of those in households with a DDL, 37% lived with poverty, compared to 24% of those in households with no DDL³.

Poverty, disability and benefits

The relationship between poverty and Disability is complex and multi-directional. The impacts of poverty can create and worsen physical and mental health conditions, through poor living conditions, nutrition, stress and lack of access to services and preventative care. Disabling barriers mean people with impairments can struggle to find work and generate income, and other household members may be restricted from working through meeting care needs^{4,5}. Disabled people also experience additional costs to meet basic needs, for example accessing transport^{6,7}. The relationship between Disability and poverty has led some to argue, convincingly, that Disability rights must be a key focus of poverty reduction policy-making.⁸

Where families rely on disability benefits, more than four in ten people (42%) are in poverty⁹. Further, a significant proportion of all benefits go unclaimed. An analysis in 2024 estimated that annually about £19bn goes unclaimed, citing the reasons as administrative complexity, lack of awareness, increasing fragmentation of support and stigma.¹⁰ The DWP's own figures in 2023 suggested that 600,000 people in the UK could be missing out specifically on Disability benefits to which they were entitled¹¹.

The factors causing unclaimed entitlements may be more pronounced for Disabled people. Recent research conducted by Loughborough University for the RNIB showed

that over one in four blind and partially sighted people do not receive disability benefits to which they are entitled due to difficulty submitting applications, applications being refused, and poor communication from the DWP¹². This means that high quality, accessible advice is an essential service for Disabled people, to help them navigate a complex and confusing system, and to ensure that they are receiving the welfare benefits they are entitled to.

Deaf and Disabled people's organisations

The austerity measures introduced in 2010, ostensibly responding to the 2008 financial crisis, hit Disabled people hard, as essential welfare benefits and public services were cut. DDPOs were also hit, as the previous governmental strategy Improving the Life Chances of Disabled People, with the goal that there should be a DDPO in every area, was abandoned. The funding cuts to Local Authorities reduced their funding in real terms by 40% from 2009-10 to 2019-20¹³ and led to many DDPOs losing contracts or grant income and facing drastically reduced budgets. The increased competition for funding also meant small and specialised DDPOs lost out to larger, professionalised organisations not run by the people they serve¹⁴.

DDPOs play a key role in delivering services and immediate support for Disabled people. They are also one of the key levers in campaigning for the necessary social, institutional and policy changes to remove Disabling barriers from the world. In was this context - the growing crisis in Disabled people's rights and the threat to DDPOs that led to the conversations and collaborative work which became SVRR.

The SVRR programme

Strengthening Voices, Realising Rights (SVRR) was initially a £1.3m grant programme funded by Trust for London and the City Bridge Foundation. Additional funds meant the overall investment was just under £2m. Launched on 3 September 2018 it ended in mid-2024, running for six years in total with five years' funding for DDPOs. The programme was ambitious in scope, seeking Disabled people's leadership and aiming to address the issues through a combination of funding advice services, capacity building support for DDPOs, and policy and campaigns work. It also aimed to generate additional funding partnerships and to influence funder practice.

When the programme was launched nobody knew it would be affected by several deeply impactful global events: the Covid-19 pandemic, and the war in Ukraine and subsequent cost of living crisis. Disabled people were adversely and disproportionately affected by both the pandemic¹⁵ and the cost of living crisis¹⁶. This made the work of SVRR-funded organisations much more difficult than anyone could have foreseen.

The components of SVRR covered in this report are the frontline advice delivery through six DDPOs, and the capacity building strand delivered by Inclusion London (IL – also a DDPO). Part 1 of the report analyses case studies, interviews with advice clients, workers and managers in the six DDPOs, alongside advice outcome data, to present the vital work of DDPOs and draw out their key contributions to the advice ecosystem. Part 2 looks at the capacity building and wider SVRR model to show the critical role this played in supporting the DDPOs and contributing to further collaborations. The report concludes by drawing these sections together to provide advice to DDPOs looking to move into community

advice provision, and recommendations to funders in this area.

Part 1: Advice Service Delivery

The SVRR Programme funded six DDPOs to provide advice services across London. The organisations were Action Disability Kensington and Chelsea, Disability Advice Service Lambeth, Inclusion Barnet, Merton Centre for Independent Living, Richmond Users Independent Living Scheme, and Stay Safe East. They varied in size from the smallest with an annual income of £320k to the largest at £1.6m (figures from 2023). Descriptions of the organisations can be found in Appendix 2: Summary of DDPOs Funded by SVRR.

This section documents the unique contribution of DDPOs to the advice ecosystem in London. First it explores the key characteristics of DDPO-provided advice and the impacts on DDPOs' clients. It then documents the life-changing outcomes these services delivered for DDLs.

1.1 The value of DDPOs delivering advice

Timely and skilled advice services are critical in supporting people to access their rights, reduce poverty and improve their lives¹⁷. Across London advice provision is delivered through a range of different agencies, from MPs' surgeries and student clinics, to private law firms, Law Centres, and specialist or generalist advice centres¹⁸. Within this landscape DDPOs occupy a specific niche.

The data gathered for this evaluation **demonstrates that DDPOs can deliver effective advice services, supporting clients to increase their income and access the welfare and independent living support they are entitled to receive**. The figures alone don't clearly articulate the additional benefit of services delivered by DDPOs, or the unique role played by DDPOs in the advice service ecosystem. It is arguable that a good advice service from any agency could provide the uplifts in income and connection with entitlements. This section describes what clients, the benefits advice workers (BAWs) and their managers (BAMs) see as the distinct qualities and unique benefits of DDPO-located advice services.

Lived experience

The ability of DDPOs to meet more complex access needs flows from a deep understanding of Disability politics and the experiences and needs of people with a wide range of impairments. This combines professional expertise with expertise from lived experience, whether personal or from others in the wider organisation. BAWs were able to draw on this combination of expertise in delivering the advice service.

Within a DDPO model you've got that understanding of different people's access needs and different approaches for communicating with people. It's understanding different impairments and different access needs. (BAW)

We understand the humiliation that people feel, as we feel them too, we come across them in our daily lives. (BAM)

That lived and learned experience of a user-led organisation really rooted in a locality, where that organisation knows all possible sources of support, is really key. (IL)

Clients described getting help they didn't know they might be entitled to, e.g. PIP payments. BAWs worked with clients on a range of issues including blue badge applications, discretionary housing payments, housing adaptations, engaging with statutory agencies, Disabled Facilities grants and other grant applications. One client described the benefit of the depth of engagement: "I spoke to CAB and a couple of other places but they weren't so helpful. With the CAB it felt like they were reading off the website." (client).

Holistic person-centred peer support

BAWs and BAMs described the working model of the DDPOs as holistic. Advice work is one strand of a DDPO's work and enables cross-referral to other areas of the DDPO, in an environment that encourages clients to be seen and treated as individuals. Clients reported having a different experience with BAWs at DDPOs from advice services offered by other providers, attributed sometimes to BAWs and DDPO staff having lived experience, and sometimes to DDPOs' approach to service delivery.

The variety of [DDPO] services means we can provide a really holistic service for people. We have internally referred people from the benefits advice service to other services like befriending, shopping, and direct payment/care advice, and vice versa. The benefits advice service has helped to broaden our range of services on offer and has filled a gap in provision in the borough. (BAM)

We don't work to tight timelines. Holistic and person-centred peer support is part of everything we do. (BAW)

Even when [BAW] couldn't help she emailed me, and even when she hadn't heard from me she would message me to check in with me which you don't get from other people. (client)

DDPO staff also appreciate being able to work with people in this way. It helps them respond to the more unusual cases, such as a Disabled person who had been living overseas for some years and was told he was not entitled to benefits (Case Study 8), a young Disabled person who was struggling to learn to drive (Case Study 3), and a Disabled person whose mother and sole carer died suddenly, leaving him unable to cope alone (Case Study 10) (all case studies are in Appendix 3). BAWs were also able to put time into making supported referrals to other relevant service providers. And they, too, benefit from the accessibility and flexibility of this peer-led approach.

Catching people who fall through the gaps

DDPOs often provide services for the most marginalised. One BAW described 'catching those who fall through the gaps' in mainstream services. These are often people who struggle with the benefits system for various reasons (Case Studies 2 and 11) and/or people who have complex and multiple needs (Case Studies 5 and 6). The DDPO model prioritises accessibility, incorporating more flexibility and tailoring of the service to their clients. This includes varying appointment length times, home visits when needed, and accompanying clients for assessments, tribunals and other appointments to ensure their access needs are met.

[BAW] supported me at my PIP Medical assessment, which was very important for me. The assessment nearly lasted 3 hours due to my complex health conditions. It was so important that [BAW] was there as sometimes I don't always have clarity of mind,

which can be quite stressful if people are asking me multiple questions (client)

Because I've got learning difficulties and everything and I'm Disabled, [this] online business I wouldn't know where to start. (client)

People are quite shocked that we're trying to work with them rather than them trying to fit to us. We know that makes a difference because that's the feedback we are getting from our clients. (BAM)

As an example of the flexibility offered, one BAM described a BAW holding multiple 15-minute meetings over the course of a week when a client couldn't focus for a longer period. The access needs of clients, should be met through other services, but this is frequently not the case, leaving clients unable to access support other than through DDPOs.

Reducing stress, improving mental health

One of the themes emerging in the work was the interaction with clients' mental health. Many clients reported improvement in their levels of stress, and one in five clients interviewed said their contact with the BAW prevented their suicide.

They are not just helping you fill the form, but more healing your confidence. (client)

If it wasn't for her, I'm serious, I probably wouldn't be here, because there are times I've felt like doing myself in. (client)

Many of the descriptions of improved mental health stemmed from increased financial security. However, there were also links to the way clients were treated by DDPOs. Many services ignore or dismiss the needs of Disabled people^{19,20}, and this creates an extra burden for their mental and physical health. In contrast, many SVRR-funded services took a trauma-informed approach, and all offered a person-centred, deeper engagement with clients. One client described their experience of this: "[BAW] actually phoned me, and it went from there, and it was like wow, someone phoned me to help me. I couldn't believe it."

It is clear from the evaluation data that the DDPOs advice services often operate as a crisis prevention service. As we have seen, some clients reported that support from BAWs stopped them feeling suicidal. Clients and BAWs also reported that when people receive advice and the income lifts which take them out of debt, that reduces not only their own stress levels but those of their families and friends, preventing relationship breakdown and/or homelessness.

Connection and community

Running through the descriptions of the service and its benefits from clients were threads of surprise about being respected, treated as an individual, and BAWs making the time and effort to connect with them.

Without a shadow of a doubt, I know there is somewhere I can go to get support, and that has taken such a weight off me, really, a huge weight. (client)

You're never ever made to feel ashamed of your disability or whatever you struggle with in your life, and that's what made me confident to talk to people and mix with people, I'm a totally different person since they've been working with me. (client)

DDPOs were able to offer clients the opportunity to get involved and so connect those clients with a wider community. This was often paired with descriptions of greater confidence.

[DDPO] is also, you become a member, and a part of the organisation if you want, and that means we were getting together on Zoom and things like that, they were trying to make sure we were OK and things. There isn't another organisation like that. (client)

During this period there was another positive example of someone who had initially contacted us for advice and then went on to become involved in a number of [DDPO] services and groups, increasing in confidence with more engagement. This person subsequently volunteered with the organisation and continues to regularly attend meetings, despite initially only contacting us for advice. (BAW)

Employing disabled people

Few organisations offer truly accessible employment opportunities that provide the support many Disabled people need to thrive in the workplace. DDPOs are a rare and valuable exception. For the Disabled BAWs funded by SVRR, this offered great benefits, though the work itself could be very challenging.

Necessary accommodations are essential for Disabled staff as well as clients.

I'm a full time wheelchair user, because of the severity of my disability I can't stay in my wheelchair for the whole working day. So my employer has been really flexible in allowing me to work from home... I only work 12 hours a week so I split my 12 hours over three days. Without that flexibility I don't think I'd be in work. (BAW)

I've really struggled to maintain jobs in other organisations because of my impairment. Usually I'll burn out or make myself unwell and be unable to continue. So I think the small nature, in a team, really supported, access to expertise, allows people with lived experience to work. (BAW)

Disabled people who need help to access benefits often face a complex set of problems. It is not unusual for BAWs to work with clients whose benefits have been unjustly and incorrectly stopped, who are in large and increasing amounts of debt, at risk of losing their home or already homeless, and experiencing a mental health crisis, perhaps with suicidal ideation. BAWs also faced challenges around being Disabled employees, lone workers, working from home and feeling isolated. Rates of pay for advice work are not high and some BAWs found they were facing similar difficulties in the cost of living crisis to those affecting their clients. This all means the work of BAWs is time-consuming, challenging, and stressful. Case Study 7 in Appendix 3 gives an example of this. Fortunately there are also rewarding aspects to DDPO-based advice work which are covered later in this report.

It is also fair to say that employment as a BAW has been life-changing for some of the Disabled people who were able to secure posts funded by SVRR. SVRR's approach to employing Disabled people has been transformative. This is illustrated in case study 12 in appendix 3, which tracks Pippa's journey from trainee caseworker to policy manager at one of the SVRR-funded DDPOs.

1.2 Outcomes for clients and their impact

Trust for London and City Bridge Foundation invested just under £2m in SVRR over five years, which generated at least £6,191,597.90 in financial value for DDLs between April 2020 and March 2024. This means that every £1 invested in SVRR generated at least £3 for DDLs.

This is an under-estimate. The initiative was launched in April 2019 but due to evaluation issues no data on financial value generated for DDLs was collected in the first year of the initiative, so are not included in the calculation. Also, for later years where data was sought by DDPOs, not all clients shared their end outcomes.

In terms of reach, in years 2-5 of SVRR, 2,385 DDLs received ongoing support from SVRR-funded DDPOs' benefits advice services. A further 1,641 people received one-off advice or signposting. We don't know the impact of one-off advice and signposting, but it illustrates the level of demand for assistance.

There were 2,815 cases overall, as ongoing support often includes help on multiple issues, counted as separate cases. Of these 2,815 cases: over half were for PIP, one in five for Universal Credit, and one in 10 for Employment Support Allowance. Of all 2,815 cases, 1,402 (50%) were successful, and 221 were ongoing at the end of the project.

It is important to articulate the impact this work can have on the lives behind the statistics, for families, carers, and friends as well as clients.

I had Universal Credit, I was on sick leave for two years, at that time I was waiting, always I have to count every penny, how to manage. I have a son at school and there was so much stress for everything. Now I have the money for my son, for our food. I know it's not much but believe me in my situation it's a lot. It is almost covering our whole monthly food. I'm not worrying about bills any more because I know I've got the money to pay the bills from the benefit. (client)

I don't worry so much over money because I know I haven't got to do a form for another 10 years. If you're reliant on a person, a form every year that you may or may not get money, that really hinders your mental capacity to have a good life. And all you think of doing that year, if you don't get it, how are you going to pay your rent? Everything is reliant on the other, it's a domino effect, so your whole life in one year can turn around. (client)

It has helped my family because I was having to take money from my mother and she really didn't have it but I really couldn't manage. I've got a daughter who's 18 and has been in foster care because I had mental health problems, so I had expenses, it was affecting my mother, and I've been able to pay her back. She was really worried so it's changed things for her as well. It's had a huge effect. (client)

I actually have money I can buy food with, and have had fuel grants come through which have paid off some of my electric bill. So I don't know what I would have done without [BAW]. I would not have any money to live on. (client)

1.3 Challenges for DDPOs in delivering advice work

The challenging aspects of advice work focused mainly on the incredibly high levels of demand for the work, coupled with the complexity of clients' needs (which often multiply while they are on waiting lists) and the delays, inflexibility, and lack of support from other agencies, particularly the DWP, and sometimes lack of support from local partner agencies as in Case Study 4 in Appendix 3.

There are three key areas of learning from SVRR for DDPO's advice delivery. Firstly is that a lone caseworker cannot deliver an full advice service effectively, meaning that solo posts are not sustainable. Secondly, benefits advice needs to be linked with other DDPO services, such as housing advice, debt advice, counselling and so on, in order that clients receive the holistic support they need. Finally, while BAWs can foster skills and independence quickly for some clients, other clients will need long-term support over a number of years.

Managing an advice service also presented challenges, many mirroring the challenges faced by BAWs. These include: demand for the service exceeding capacity to deliver, and consequently ensuring BAWs are not overloaded and overwhelmed and managing fitting everything into the working day. Other challenges included securing funding, recruiting and retaining Disabled staff, managing an advice service with no experience of advice work, finding cover when a staff member is off work or a post is vacant, achieving and maintaining AQS accreditation. Many of the challenges emerge from running an underfunded service with underpaid staff, in a time of great uncertainty.

We should note here that there are also rewarding aspects to advice work for both BAWs and BAMS. Particularly successful applications and appeals that make enormous positive changes to people's lives. There are examples of this in Case Studies 1 and 9 in Appendix 3. Other rewards for BAMS include seeing staff grow and develop in their roles, and effective teamwork with BAWs and other colleagues. There case studies in appendix 3 which provide highlight these challenges and rewards.

1.4 Conclusion

The impact on clients of good quality benefits advice is clear – making it possible to access their rights and entitlements, which leads to increases in financial security, and a positive impact on DDLs' independence, confidence and wellbeing. DDPOs are able to deliver this, as many other advice agencies also do. However, this evaluation shows that the advice services located within DDPOs offer added value. This ranges from accessible support and a holistic service for some of the most marginalised people, to the deeper benefits of connection and community which impact on mental health and wellbeing in ways beyond an uplift in income. This added value is not a nice-to-have extra but an essential component for any service intended to reach some of the most marginalised people. Mainstream services continue to exclude people through exclusionary, ableist practices that don't meet access needs of clients. Without services like those offered by DDPOs, DDLs who are unable to access mainstream services will fall through the welfare 'safety net' with dire consequences.

Part 2: Capacity Building

The SVRR funding programme also included a programme of capacity building and support delivered through the second-tier agency Inclusion London. IL – which is also a DDPO – designed, tested, and developed a capacity-building programme with several interrelated elements. These included:

- ▶ Research in the form of service audits and training needs analyses
- ▶ A programme of training and support devised from the research findings
- ▶ Quarterly peer network meetings (PNMs): three each year for advice workers to give and receive peer support, and one for BAMS and CEOs
- ▶ A helpline for advice workers offering individual support for unusual problems and complex cases

- ▶ Support with social policy reporting to identify evidence from casework that could be used in campaigns
- ▶ Business/fund-raising support towards the end of the initiative

This approach to capacity-building underpinned all the work funded by SVRR. This section presents the value added by capacity building for individual BAWs and BAMs, for DDPOs, and for social policy campaigning. It also outlines some of the learning from the capacity-building strand and shows how this is being put into practice.

2.1 Value added by capacity-building

IL worked flexibly and made use of learning from a range of sources to respond to the capacity-building needs of DDPOs. The capacity building helped individual BAWs to work more efficiently and effectively, created and nurtured a community of practice among the SVRR-funded DDPOs, as well as provided invaluable business support to help DDPOs build on the work funded by SVRR and seek other funding.

The programme IL devised and delivered was highly valued by BAWs and BAMs, particularly in DDPOs where there was only one BAW. It was clear from the descriptions of what was valued, that good quality capacity building for small user-led organisations must be more than minimal one-to-one supervision and a generic training offer. Tailored supervision and regular bespoke training are essential elements of a capacity-building package, as are elements of peer support, networking, and building and maintaining a community of practice.

One element of the IL offer that was especially valuable was that it enabled DDPOs to contribute to social policy campaigning on a range of topics and at a variety of levels. The data gathered by BAWs was used by IL to influence policy, such as feeding into a consultation about a health and disability benefits Green Paper, and feeding into the House of Commons Work & Pensions Committee work on PIP. Although beyond the remit of this evaluation, there are many other examples from local, London-wide, and national campaigns. The vast majority of contributions the DDPOs made to these campaigns would not have been possible without the combination of SVRR funded frontline advice service delivery and IL's capacity-building work that build the networks and connections.

2.2 Learning and developments from SVRR

The SVRR model drew on a multi-strategy approach to address the crisis facing DDLs. As we have seen, this included directly funding quality advice services for DDLs, IL's capacity building, and some policy and campaigns work. Other strategies were shifting power to put DDLs in the lead, leveraging additional funding, and modelling inclusive funding practices. Over the six years of the project, learning from SVRR's challenges and successes has translated into changes and contributions to change, summarised here.

Advice service development and Propel

Learning from the experiences of DDPOs providing advice has dovetailed with other learning from community-specific small advice agencies²¹. The challenges of being a sole advice worker, managing peer identities and wellbeing, low pay, insecurity and poor career progression opportunities were highlighted amongst other findings. This has fed into Trust for London's contribution to the framing of the Propel Funding initiative, where the Robust Safety Net mission focused on advice provision from user-led organisations, which enabled advice worker training, career progression, and longer funding terms.

Disability Justice Fund

In July 2022 Trust for London and City Bridge Foundation launched the £3m Disability Justice Fund, a successor to SVRR, absorbing some key lessons learnt²². The focus of the fund is an approach which prioritises movement building and shared learning for DDLs and DDPOs. Where the SVRR's initial Grants Advisory Panel, comprised of leaders from London DDPOs, struggled, the DJF has learnt from this: it recruited activists in a different way²³ and used an experienced external facilitator.

Lasting partnerships and learning

The SVRR model enabled the forging of a network of DDPO advice providers facilitated by IL. This developed closer working relationships between the organisations including a successful bid to Propel. Beyond this, learning was shared with the wider DDPO community through additional training. IL were also able to learn about the needs of DDPO members in more depth, and to use this learning to secure other grant funding to continue movement-building work.

2.3 Challenges for SVRR

The ambition, complexity and innovation of SVRR, together with unexpected global and national events, meant that the programme evolved considerably over the six years of planning and grant funding. It also faced considerable challenges, summarised briefly below.

Challenges of co-production and participatory grant making

The Trust approached the programme with a desire to 'walk the talk' and handover leadership to Disabled people. Moving towards an ideal of co-production was new territory for the Trust and generated rich learning. The original grant decisions in 2018 were made by a Grants Advisory Panel, comprised of leaders from London DDPOs, but the policy restrictions on grant-making, the detailed procedures, differences in expectations of the role of the panel and later the impact of Covid-19, meant this was discontinued as an approach. Learning from this has been taken into the Disability Justice Fund (see page 16).

Challenges of managing change

There have been many unforeseen changes: external, internal, and to the evaluation itself. Evaluation personnel changed partway through the project which affected relationships with the funded partners, the Trust, and IL. The evaluation brief also evolved over time in response to learning from the project. There were significant internal changes in staff in some funded partner organisations and at Trust for London, as the project saw the SVRR Programme Lead, Director of Grants, and the Trustee championing SVRR, all leave during the lifetime of the project.

Externally, the Covid-19 pandemic hit when the DDPOs were one year into their initial three-year grants. As with many other community organisations, DDPOs had to quickly adapt their working practices during the crisis. DDLs were often harder hit by the pandemic, though the transition to life-online increased accessibility for some e.g. those with hearing impairments, or restricted movement. The impact continues through persistent circulation of Covid-19 and Long Covid. Other external factors affecting SVRR included the subsequent cost-of-living crisis (also affected by the war in Ukraine) and continuation and evolution of austerity politics in response.

Part 3: Key Learning and Recommendations

Key learning for DDPOs providing advice

The programme generated learning from the DDPOs as many set up advice services or substantially expanded their advice provision. This was a steep learning curve for many of the workers and managers, supported through IL and the peer networks. There are five key pieces of advice and learning that the DDPOs wanted to share with others:

(1) Employ more than one advice worker

- ▶ Single advice worker models were extremely challenging to manage and isolating for workers. When setting up a new advice service it's critical to have more than one advice worker (potentially two part-time roles) to improve service sustainability.

(2) Employ Disabled people to support other Disabled people.

- ▶ Services delivered by Disabled people have additional benefits; lived experience enabled staff to work holistically and meet access needs.

(3) Recognise the impacts of this work and ensure employees have support.

- ▶ Make sure employees have the support to manage demanding work, high-complexity cases, and clients presenting in crisis.
- ▶ Suggestions include robust line and case management, well-being support, and crisis debriefing or clinical supervision.

(4) Include sufficient allocations for management, administration, networking and capacity-building in funding bids.

- ▶ The funding environment is competitive. However, adequately accounting for the management, administration, and development needs of advice services is critical to their sustainability.
- ▶ Some DDPOs found using a full-cost recovery model helpful.

(5) Take advantage of peer learning and networking opportunities

- ▶ BAWs and BAMs found these to be a vital source of advice and support which enabled them to develop and sustain their services.

Recommendations for funders

The SVRR programme has generated considerable learning for funder and DDPO practice, much of which has already been put into action. These seven recommendations consolidate that learning for others looking to fund or deliver community-based advice provision.

(1) Prioritise longer-term funding of six years or more.

This will:

- ▶ Ensure services can support more clients throughout their cases.
- ▶ Enable longer-term contracts with better employment conditions to support retention and recruitment of staff.
- ▶ Reduce DDPO labour spent on frequent grant-fundraising and so increase capacity for service delivery.

- ▶ Enable DDPOs to meet the additional time and access needs of onboarding Disabled staff.

(2) Fund capacity-building initiatives that prioritise network building and shared learning.

This will:

- ▶ Enable organisations to develop and embed new areas of work, sharing real-time learning.
- ▶ Support the sustainability of smaller organisations and projects through peer support.
- ▶ Enable longer-term collaborations which can lead to deeper and more systemic changes through linking practice with policy and advocacy work across organisations.

(3) Encourage applicants to include costing to address wellbeing issues for staff.

This will:

- ▶ Ensure DDPOs are adequately resourced to work with higher-risk advice clients who have complex needs.
- ▶ Mean DDPOs can mitigate against isolation and burnout for staff likely to be lone or remote working.
- ▶ Help DDPOs to sustain the peer-delivered and holistic approaches which benefit clients but increase emotional strain on staff.

(4) Fund advice services for delivery with more than one advice worker.

This will:

- ▶ Mitigate against the challenges caused by a single-worker advice model, increasing the sustainability of the service and reducing the risk of burnout.
- ▶ Increase availability of the service for clients.

(5) Recognise and fund access costs for staff and clients.

This will:

- ▶ Enable DDPOs to employ Disabled staff, meet access needs and adaptations and/or additional lead time to ensure funding through other schemes (e.g. Access to Work).
- ▶ Enable DDPOs to sustain and deliver inclusive services for clients needing accommodations with costs associated, including less obvious costs such as additional time from advisers.

(6) Offer additional funding for organisations to engage in networking, development, and peer-relationship building.

This will:

- ▶ Enable advice workers with few direct colleagues to have relationships with others in similar organisations who can provide vital support and advice.
- ▶ Increase efficiency through sharing learning.

(7) Adopt a mixed funding model that prioritises specialist DDPO community advice provision alongside advocating for larger agencies being funded to improve their accessibility.

This will:

- ▶ Mean that the most marginalised Disabled people do not 'fall through the gaps' of mainstream provision.

- ▶ Ensure Disabled people who need it have access to the added benefits of community advice provision.
- ▶ Expand the availability of accessible advice to all Disabled people.

Conclusion

The evaluation of the SVRR programme highlights the indispensable role of DDPOs in providing advice services across London. These organisations have demonstrated their unique ability to combine professional expertise with lived experience, offering holistic, person-centred support that significantly improves the lives of their clients. The services provided by DDPOs not only help individuals navigate complex systems and access their rights but also foster a sense of community and connection, enhancing clients' confidence and independence.

The SVRR programme has also underscored the importance of capacity building. Funding in itself has a positive impact on small user-led organisations by increasing their capacity and financial stability, and so improving their credibility and their standing in communities and with partner agencies. Beyond this, initiatives such as training, peer support, and business development assistance have proved crucial in enhancing the effectiveness and sustainability of DDPOs. These efforts have enabled organisations to better serve their communities, adapt to changing needs, and ensure long-term impact of the programme.

Despite facing challenges such as high demand, complex client needs, and external factors like the Covid-19 pandemic, the SVRR initiative has made strides in supporting DDLs. The program's approach to employing Disabled people has also been transformative, providing life-changing opportunities and contributing to systemic changes within the advice service ecosystem.

To ensure the continued success and sustainability of these vital services, it is essential to prioritize longer-term funding and continued investment in capacity-building initiatives. Recognizing the unique benefits of community advice provision by DDPOs, and supporting their holistic, person-centred approach, will be crucial in fostering a more inclusive and equitable society.

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Appendix 1: Summary of DDPOs Funded by SVRR

Action Disability Kensington and Chelsea

Established in 1981. Covers Kensington and Chelsea and a small part of Westminster. Income in year ending 31.3.23: £321,248. Provides a range of services, groups, meetings and opportunities for Disabled adults who live and/or work in the borough. Has a purpose-built, fully accessible centre. Has had no staff changes in the management and operation of the benefits advice service throughout years 2-5.

Disability Advice Service Lambeth

Established in 2001. Covers Lambeth. Income in year ending 31.3.23: £504,023. Offers a holistic package of information, advice and support to Disabled people. Based in a voluntary sector disability hub with several other charities. Has had changes of both BAM and BAW during years 2-5 of SVRR, with gaps in both posts.

Inclusion Barnet

Established in 2010. Covers Barnet with some activities in Haringey and Enfield. Income in year ending 31.3.23: £1,219,252. Harnesses the strengths and expertise gained from lived experience for peer support, user voice/empowerment, community development and thought leadership. Has had three BAWs during years 2-5 of SVRR, though the BAM has stayed the same.

Merton Centre for Independent Living

Established in 2008 as a steering group, incorporated as a company in 2011 and registered as a charity in 2013. Covers Merton. Income in year ending 31.3.23: £334,769. Provides a range of interlinked services which support local people to live independent lives, and ensure they have a say on key issues such as their money, making informed choices, and speaking up. Management has been consistent. Differs from other SVRR-funded DDPOs in offering trainee caseworker posts. Recruitment for these posts has not always been easy, but seeing Disabled people progress in

their careers has proved very rewarding.

Richmond Users Independent Living Scheme

Established in 2003. Covers Richmond. Income in year ending 31.3.23: £1,569,455. Aims to enable Disabled people to live the life of their choice and to reach their full potential. Achieved AQS accreditation as a direct result of SVRR funding. Has had no staff changes in the management and operation of the benefits advice service throughout years 2-5.

Stay Safe East

Established in 2013. Offers services in Newham, Waltham Forest, Havering, Barking and Dagenham, Southwark and Enfield, plus pan-London training and policy work. Income in year ending 31.3.23: £749,322. Promotes the human rights of Disabled people by providing holistic advocacy to Disabled survivors of hate crime and domestic, sexual and other abuse. Has had several staff changes in both BAWs and BAMs during years 2-5 of SVRR.

Appendix 2. Case studies.

We have 32 case studies generated from monitoring form narratives and from interviews. These cover topics including: PIP and other benefits; housing and adaptations; working with the DWP, local councils and other partners; clients with a range of impairments; and recruitment/staffing. Brief details of each case are given below. Twelve illustrative case studies are provided in full, provided by the DDPOs and in their own words.

- ▶ PIP and learning disability
- ▶ Housing adaptations for a blind person
- ▶ Challenging a PIP decision
- ▶ Difficulties faced by a young disabled person learning to drive
- ▶ Rehousing for a wheelchair user
- ▶ Housing adaptations and partnership working challenges
- ▶ Garden path refurbishment to facilitate knee surgery
- ▶ Support for a client in communicating with the local council
- ▶ Partnership working and a housing offer
- ▶ A multi-faceted case including PIP and other benefits, travel support, housing, and health
- ▶ Another multi-faceted case including PIP and other benefits, housing, injury, neurodivergence
- ▶ Supporting clients to participate in a housing consultation
- ▶ Severe sensory and neurological conditions and benefits
- ▶ Successfully challenging the DWP to make a reasonable adjustment
- ▶ Challenges of supporting a client with long-term complex mental health problems
- ▶ Supporting a client with cyclical mental health crises
- ▶ Advocating on behalf of a non-speaking client with DWP
- ▶ Local improvements to the accessibility and effectiveness of interpreting services in GP surgeries

- ▶ Supporting a client with serious anxiety and a personality disorder in moving from DLA to PIP
- ▶ Supporting a client with mental health problems who had been living overseas
- ▶ Supporting an autistic client who has mental and physical health problems with a care needs assessment and a PIP review
- ▶ Supporting a client whose PIP and other benefits had been stopped because of punitive DWP deadlines and inflexibility
- ▶ The challenge of a client whose PIP was backdated which affected his universal credit claim
- ▶ Supporting a survivor of domestic violence who has a learning disability in managing her housing benefit payments
- ▶ Supporting a client with severe learning difficulties who was left alone after his only relative died
- ▶ Helping a client to get benefits and permanent housing after being given Leave to Remain
- ▶ Pippa's journey from trainee caseworker to policy and campaigns manager at Merton Centre for Independent Living
- ▶ Barriers in moving from ESA to UC
- ▶ Increased housing costs only partially covered by DWP
- ▶ Increased rent only partially covered by DWP
- ▶ Difficulty accessing employment with long Covid
- ▶ Local campaign on disrepair and social housing

Case Study 1

There was a minor adaptation case during this period with a very positive outcome. The client was a DDPO member who is blind and who had been having great difficulty using his heating system last winter. The Housing Association had installed a new boiler in the property and the heating was controlled via a small panel on the wall with two buttons. The client struggled because he could not always tell whether the heating had been switched on or off and he could not control the temperature without assistance. He was concerned about the rising cost of heating his home and wanted to find a solution before winter. The client is comfortable using technology and researched a potential solution. He requested support in approaching the Housing Association to request a minor adaptation to install a voice-controlled smart thermometer, which would allow him to operate the heating system with voice commands. The cost of the device and installation was below £1000. This was the first time I have been asked about an adaptation of this nature and it seemed that the Housing Association were not familiar with the device the client was requesting. Therefore, we were unsure when making the request whether it would be easily approved. The Housing Association requested an OT recommendation, despite the relatively low cost of the work, in order to ensure the device met the needs of the client, however they were supportive of the request and the work was organised and completed promptly following the Sensory Team's recommendation. The client confirmed the device was installed in his home and is working exactly as he would have hoped. He can find out the current room temperature, turn the heating on or off, control the thermostat and set a timer, either using his mobile phone or by using voice control. He is confident about being able to control his fuel usage independently going into the winter and feels more in control of his energy bills. (BAW)

Case Study 2

A client contacted [DDPO] for support with challenging a PIP decision. Their award had been

reduced at review, although the client was unclear as to why this had happened. Their condition had not changed since the previous PIP award.

The client had difficulty understanding the PIP procedures and did not know whether they had already challenged the decision at the Mandatory Reconsideration stage. They were assisted in determining the status of their challenge and lodging an appeal with the Tribunal Service. The client had been awarded the standard rates of both the daily living and mobility components of PIP. They believed they should have been awarded the enhanced rate of both components.

After the client had submitted their information to the Tribunal Service, including details of their representative at [DDPO], they were contacted by the DWP on the phone. The caller explained to them that the PIP decision could be changed in their favour and the appeal would end. The decision would be changed to the enhanced rate of the daily living component but the mobility component would remain at the standard rate, if they agreed. The client advised that they felt pressured to accept this offer. The DWP did not call the representative and the client felt that they had no choice but to make an immediate decision during the phone call.

When the client was later advised by [DDPO] that they could accept the offer made, but appeal the decision relating to the mobility component of PIP, they were surprised at this. They had not been advised of this right by the DWP during the call.

[DDPO] has supported the client to lodge a further appeal to challenge the new PIP decision. The client has expressed that they are very happy they have been supported with this, as they do not believe they would have managed to navigate this complicated system alone. (BAW)

Case Study 3

One [DDPO] member contacted us recently to let us know about some access issues they experienced when learning to drive. The member explained that they had been saving for a number of years in order to cover the costs of the lessons and the tests, but when it came to learning and taking the tests, they experienced difficulties at almost every stage. They had previously enquired about using some of their direct payments towards the cost of learning to drive, in order to increase their independence, but were advised that this was not allowed.

They said that at every stage, from finding an instructor, taking the theory test and even booking the tests online, they struggled with finding information about reasonable adjustments or accessibility at test venues.

The client was unsure whether they would be physically able to drive a car, so this was their first issue. They found that finding an adapted car to learn in, and an instructor who would teach them in an adapted car, was very difficult and would cost far more than learning in an unadapted car. They also found that no local instructors offered this service so they would have to travel much further for this. They could not afford to learn in an adapted car as the lessons were more expensive, so instead decided to try to find an automatic car to learn in. This would cost more than learning in a manual car, however they reasoned that if they could pass their test in an automatic car, they could then go on to lease an adapted car through the Motability Scheme. One option they considered but ultimately dismissed was leasing a car through Motability before learning. The problem with this was that the minimum lease period was 3 years and they would have needed a nominated driver to sign up to the scheme too. At this stage, they still did not know if they would be physically able to drive.

The member found that when arranging the Theory Test, additional costs were barriers. They were told that a specific letter from their doctor to evidence their access needs and adjustments for the test was needed, as existing evidence would not be accepted. Even finding information about

the accessibility of the test centre was very difficult and the member had no option but to turn up at the test centre, without knowing whether or not the adjustments they needed would be made and whether they would be able to take the test. They found that ringing the venue for information beforehand was not an option.

The client had difficulty finding out any information about reasonable adjustments when booking the practical driving test and again, turned up on the day not knowing whether they may be allowed to take the rest break they may need and not knowing whether or not they would manage to take the test.

I am very happy to say, the client passed the theory and practical tests in an automatic car and is now in the process of arranging an adapted car via Motability. They shared their story to highlight the difficulties they experienced as a young disabled person learning to drive. (BAW)

Case Study 4

There was a case during this period for a client who was due to have knee surgery and who needed a path to be paved in their garden for access. The client would be on crutches after the surgery and the front of the building is inaccessible and unadaptable. Fortunately, the client has a private garden, which could provide level access, however the surface is uneven and cannot provide safe access in the current state. The client had been advised that the surgery could not go ahead until the access issue had been resolved so they approached their Housing Officer. The client advised that the Housing Officer agreed to the work, however nothing was provided in writing. What followed was a loop of the client being advised that the issue was being handled by different people. The Housing Officer directed us to the Estates Team, who in turn directed us to Social Services to request an adaptation. Social Services stated that the path would not be assessed by Occupational Therapy until after the surgery, while the client was advised the surgery could not go ahead until the path had been paved. The Housing Management team directed us back to the Housing Officer, then a Project Manager, and for the client this felt like a never ending loop. At present, the path has still not been paved, however the client has now been visited by a contractor to assess the work needed and provide a quote. The surgery has been delayed indefinitely, after having been rescheduled on 3 occasions.

This client has been exhausted by the process. At one stage the client was advised to have the operation and "bed-block" in order to prompt action to be taken. The client has advised that their health has suffered due to the delay in having the surgery. (BAW)

Case Study 5

"W" first contacted [DDPO] for advice regarding a disability benefit. Our service had been suggested to them by a friend and they had had no previous contact with the organisation. Initially W needed advice regarding the PIP process and a referral was made for them to be supported through the telephone assessment. W received their PIP decision around 10 weeks later, however their award had been reduced. They requested support from [DDPO] to challenge this decision. At Mandatory Reconsideration the PIP decision was changed and W was awarded the enhanced rate for both the daily living and mobility components.

Shortly after the new PIP award, W requested some support in understanding whether they may be entitled to any travel-related support. They were advised on applying for a Blue Badge, Freedom Pass and Taxicard, to which the new PIP decision provided automatic entitlement. W applied for a Blue Badge and Freedom Pass and received these a short time later.

W made contact again regarding their housing situation. They were in Temporary Accommodation and waiting for a decision on a housing application. They were struggling in the bed-sit they were living in and had not heard anything about the housing application in some time, so enquiries were made on their behalf. The Council advised the case was still under investigation and no decision had yet been made. Around this time, W also asked for advice on Cost of Living payments and support which may be available to them.

No further update was received on the housing application by W, so further enquiries were made to the Council. They advised of a deadline date, by which time they would have made a decision and they apologised for the delay. Some further documentation was requested and W was supported to provide this. By the deadline date, W was advised that the housing application had been successful and that they could now begin to bid on suitable properties on the Council's "Choice-Based Lettings" system.

Following the favourable housing application decision, W advised that they had not been given an Accessible Housing Register category, despite their health issues and noted mobility restrictions. [DDPO] contacted the Council on their behalf to discuss this with a housing Occupational Therapist and advice was provided on the information needed to arrange a housing health assessment. At this time, the Council also advised that W was in rent arrears and no housing would be offered until this had been addressed. W's housing application was suspended and they were not able to bid on suitable properties.

W was advised to speak to the Council regarding the arrears and after making arrangements to re-pay the amount, their housing application was un-suspended. Shortly after this, W was invited to view a level-access property in the borough.

W had mentioned during a call that they were isolated and struggling to leave their home at times. Their health had gradually deteriorated and this had impacted on their confidence. They were referred to the Disability Connect Project at [DDPO]. This project was set up to assist local disabled people who may be socially isolated and support them to participate in activities and pursue their interests. W has reported ongoing involvement with this project.

Following the viewing of the property W had attended, they were offered and accepted the accommodation. The flat was unfurnished and this presented a problem for W, who had been living in a furnished bed-sit while waiting for the outcome of the housing application. W was supported to make an application for a Local Support Payment in order to ensure they were able to move into the new property with the essentials they would need.

W moved into the property and advised they are enjoying the freedom of having an accessible kitchen to cook in and a property where their children can visit. They have talked about the positive impact on their independence and overall well-being. They also advised they have used the mobility component of PIP to fund a car. (BAW)

Case Study 6

H contacted our Advice Service initially asking about how he could access a mobility aid. But upon questioning, our BAW discovered that H was homeless, sleeping in his car and had been sanctioned by the Jobcentre. H had been homeless since he left prison a few years earlier, largely staying between relatives but eventually secured work in a warehouse. Whilst at work, a manhole cover fell on both his legs and feet, the injury and subsequent infection led to long term pain and swelling which seriously affected H's mobility. Our BAW worked with H to challenge the decision by the Jobcentre, he had been sanctioned for missing a meeting he wasn't aware was scheduled, his entire Universal Credit award had been stopped and he was living on PIP payments of £345

per month alone - H was Dyslexic and unable to read messages on his Universal Credit journal without support, he also had limited internet access and relied on being phoned about Jobcentre appointments beforehand. Our BAW lodged a Mandatory Reconsideration of the decision to sanction H as the DWP had failed to follow their own guidance – this was successful and H was awarded a backdated payment of £1544.

Our BAW also contacted the Council who agreed to provide interim accommodation to H, due to his Disability, H should have been considered priority need for housing under the Housing Act. She helped H apply for Housing Benefit to cover his rent – and then get it back again after it was stopped when H didn't respond to a letter he was unable to read. Although H was initially happy to be given interim accommodation, the accommodation was not suitable for his disability, he was still needing to shower at his cousin's house as he was unable to use the bathroom provided. Our BAW referred H to a solicitor after the Council failed to move him to more suitable accommodation. H is now working with the solicitor to be moved.

Our BAW also helped H to maximize his income – he had already applied for, and been awarded, Personal Independence Payment (PIP) for help with his disability - but our BAW didn't think he'd been awarded the appropriate rate for his mobility needs. She lodged another Mandatory Reconsideration which was successful, he received a backdated payment of £2342, and his PIP was increased by £40 per week. Our BAW also ensured that H was referred for a 'work capability assessment' by the Jobcentre – H was eventually assessed and found to have 'limited capability for work related activity' – this meant that he no longer needed to report to the Jobcentre which meant the risk of him being sanctioned again was reduced, it also meant he received an extra £354 per month from Universal Credit in recognition of the difficulty he faced finding employment. (BAM)

Case Study 7

Our BAW has been working with client X since she started at our organisation in August 2021. The client has long term complex mental health issues which makes it difficult for them to be able to fully engage with support. Oftentimes, they feel overwhelmed by the information given to them and they can sometimes lack insight into the consequences of potential outbursts toward staff. There have been repeated incidents of these. The client lacks insight into their behaviours therefore does not accept responsibility of their reactivity. Client X has expressed suicidal ideation many times and when this is raised as a mental health crisis to our Safeguarding Lead they become very hostile. Each episode of these incidents can take hours to resolve. Our BAW has contacted their GP to make them aware of the crisis(s) the client is facing, as advised by our Safeguarding Lead. Unfortunately, GPs are very difficult to get hold of and our BAW has to wait at times this can fall outside of normal working hours to receive a call-back and explain the situation to them.

We have repeatedly explained to the client of our duty of care towards them that we cannot keep such serious information to ourselves. However, they have still wanted us to be in collusion with their suicidal plans. Having to break their confidentiality. Client X was unhappy about this this led to a series of inappropriate emails that detailed the client's anger towards our service.

On each occasion we have gone back to Client X for them to apologise and request that we continue to work them. Our BAW has managed to maintain a professional working relationship with client X through all of the crisis and complaints. She has helped them with calls to DWP, helping them navigate the complex welfare system and provided emotional support.

We have found that with cases like this there tends to be unrealistic expectations from the client in terms of what we can and cannot do. For instance, in a recent appointment with Client X and DWP they asked for our BAW to be made their appointee so DWP contacted our BAW. They became very

distressed when we informed them that this would not be possible due to logistical issues and appropriateness, they hung up the phone prematurely. Our BAW rang back to check in on the client and was met with a lot of hostility regarding the project. To date we are still working with client X. (BAM)

Case Study 8

BAW supported someone who had been told by everyone else that he wasn't eligible for any benefits because he had been living overseas for a while. He came back because of mental health issues, was from the UK and his sister was here, but was told he didn't have enough points, wasn't eligible. BAW did loads of research, found case law that gave her a base for arguing that he did have a connection to the UK, it went to a tribunal, and she argued that he was eligible, and they agreed. If she hadn't been so persistent, looking for evidence to help his case, he would have been told by the DWP that he wasn't eligible. (BAM)

Case Study 9

I helped a gentleman with a number of advice and advocacy issues. It started as a care needs assessment, then help with PIP review. He was moved to tears. He has autism and mental health conditions and physical health conditions as well, so he has a lot of complex needs. He found engaging with DWP staff extremely challenging. He has, the way that his mental health difficulties manifested, is that he felt like people were trying to persecute him. So I managed to persuade the DWP that a face-to-face health assessment, or an over the phone health assessment, would exacerbate his condition, and if we could do it paper-based or I could speak on his behalf, that would help him manage his anxiety. I managed to get them to agree to a paper-based assessment, and to extend from a review every year to every four years, and I also managed to increase his award level in respect of some of the difficulties from Covid. I was stunned, because, to be fair to this gentleman, you know when somebody comes up against so many hurdles, I was thinking there would be something in the way that shouldn't be there, but they were sympathetic. They did have a telephone conversation, he got upset, I intervened, and said this is counterproductive, it's going to affect him for a week, it's not fair. And when he got the award, he rang me in tears, and said 'thank you so much, you were going out of your way to help me' and I said 'it's my job'. (BAW)

Case Study 10

I can honestly say that without the help of [BAW] [client] would be in a very vulnerable and dangerous place. As a family friend who has tried to support him after the death of his mother, I was unaware of how to even start to deal with his financial and housing situation. He has severe learning difficulties and was not known to Social Services. [BAW] has been able to apply for all the relevant housing, and social benefits that he is entitled to as well as secure extra grants that we were completely unaware of. Throughout this process she has shown care, attention, and patience way beyond our expectations. The personal help that we have received from [BAW] and [DDPO] has been truly invaluable. (Client's carer)

Case Study 11

The text below is from a client who was formerly an asylum seeker, and who we helped apply for benefits when she got Leave to Remain, and are now supporting as she has moved from temporary to permanent accommodation and settle into a new life:

"It's been very difficult trying to navigate through the benefits system as this is my first time. I found it very difficult to understand and assimilate the information and all that needs to be done, and all the documents I have to submit. [DDPO] has been with me all the way, making calls on my behalf, sending emails, filling forms and having to explain things to me slowly and in simple language. I would not have been able to do these on my own. Even my care coordinator has asked for [DDPO] to explain things as she cannot. I've had help filling in the Universal Credit online forms, and Housing Benefit forms for temporary accommodation, applying for PIP and making sure everything is in order with my rent and charges. I can now do quite a lot of the work myself but I am thankful for the support I'm getting as this helps me to cope when I'm overwhelmed and feeling really low. Thank you to the team for everything they're doing. "

Case Study 12

Pippa's Story: from Trainee Caseworker to Policy Manager at Merton Centre for Independent Living (MCIL).

After 13 years of school teaching, Pippa undertook a Master's and then a PhD, whilst helping to care for her father. After completing her doctoral thesis, she was at a crossroads, unsure about academia, but clear that she wanted to help people who were at the sharp end of welfare reforms and cuts to public services. She decided to become a trainee caseworker at MCIL.

Over the next three years, Pippa took part in the new trainee caseworker programme. The programme provided her and others with internal and external training, and development opportunities, via a network managed by Inclusion London. In 2020 she was promoted to caseworker.

During this time, Pippa expanded her expertise in welfare benefits to include housing and social care. She also took advantage of the Week of Creativity offered by MCIL to its staff. This project offers staff one working week across a year to take part in work which falls outside the remit of their role, allowing for the exploration of issues in which they are interested or about which they are passionate, and for the opportunity to build their skills in certain areas. She spent her Week of Creativity becoming involved in our social policy and community engagement work. During this time, she was fundamental in developing relationships with the Council's adult social care team and starting conversations around making housing application processes more accessible, as well as raising the profile of our organisation more generally. The Week of Creativity also helped her to focus on developing skills which would help her in a policy manager role.

Pippa says: "My central aim is to help to amplify the voices of Deaf and Disabled people in Merton. Lived experience should inform decision making around local and national policies and practices."

In late 2023, Pippa was promoted to Policy and Campaigns Manager. She is motivated to bring about systemic change for Deaf and Disabled people due to her increased understanding of the structural inequalities that she gained through her casework.

Appendix 3. Evaluation Methodology.

There are four key approaches which have informed the methodology of this evaluation:

1. To use existing/secondary data first, and only collect new/primary data when absolutely necessary.
2. To maintain the anonymity of DDPOs and GAP members as far as possible.

3. To understand and acknowledge that everyone is an expert.

4. To work with DDPOs on this evaluation rather than doing it to them, ideally through co-production or a similar approach.

DDPOs use different terms to refer to DDLs they advise: customers, clients, members, service users. The evaluation used 'clients' throughout.

Data gathered was in the form of documents from Trust for London, monitoring forms from DDPOs, quarterly progress reports from IL and interviews with IL staff, GAP members, DDPO representatives, DDPO beneficiaries, and funders. In the interviews, everyone was very candid. Some of what people said was confidential or 'off the record' and the evaluator respected those boundaries in writing her reports, though what she was told in confidence undoubtedly influenced her thinking.

Quantitative data from monitoring forms was entered into a spreadsheet to assist with calculations. Interview notes and monitoring form narratives were imported into NVivo qualitative data analysis software and coded using emergent coding. This means the evaluator went through each set of notes, line by line, and attached labels, known as 'codes', to segments of the text, to reflect the meanings she perceived. Then all the text attached to each code was extracted and read through to find the stories behind the code.

Quotes from monitoring forms and interviews were used to illustrate the evaluation findings. Quotes were amended in three invisible ways:

1. Any quote may have had sections removed to increase clarity and brevity without altering the speaker's meaning.
2. In quotes from DDPOs, the terms 'customer', 'member' or 'service user' were changed to 'client' for anonymity.
3. In quotes from clients, the pronouns 'she/her' were used for all advice workers for anonymity.



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