Case Studies

The following case studies relate to Period 1 – September to December 2015.

The following is an example case study relating to a Theme 1 project.

SPLASH Play

X is a young female who is subject to social exclusion. She lacks confidence, is unable to make friends and spends a lot of time with staff members.

In the club she often got very aggressive with other children. If staff told her off she would not react very well. Consequently some children felt uncomfortable playing with w her and would sometimes refuse to be in the same group. X didn't have many friends outside of school and was bullied by children in the local area.

Staff managed to engage her in group activities and gained enough trust so that she was comfortable enough to tell staff about her issues and worries. By working in teams with other children over a period of 3 months has been accepted into the group. We are now working together with the parents to ensure the child is receiving support.

The following is an example case study relating to a Theme 2 – Routeways to Employment project.

Organisation: Bowhaven Project: Equip Initiative - Sep/Dec 2015

M is a single black British mother who was diagnosed with PTSD (Post Traumatic Stress Disorder). M came to us in October 2015 via a public event where we were promoting the Equip Project, requiring support in order to meet her goal of gaining employment in the housing sector.

M had already completed a Masters degree in Housing and was qualified to work but had experienced prejudice in relation to her mental health (which had necessitated a lot of time out of employment) and a criminal record (which was a driving offence). She was currently unemployed and had a large amount of anxiety about seeking employment; to the extent that she had given up completing any job applications for some time.

On our initial meeting with M, it was clear that needed skills to cope with interviewing and help to rebuild her confidence, as previous rejection had interfaced with her mental health issues and caused her to spiral downwards and terms of self-image and confidence.

After finding out a lot about her goals and ambitions as well as her skills and skill deficits, we were able to place her in the Leasehold Team of Circle Housing's Islington office as a volunteer Housing Officer. In addition, we have supported her in terms of confidence and interview skills via telephone and face-to-face support to enable her to access the placement.

More recently we have discovered from feedback from her supervisor at the volunteer placement, that M's IT skills need improving. We have negotiated that an IT placement on our digital inclusion training will be available for M if needed and await her feedback.

The following are example case studies from Theme 2 – Social Welfare Advice Services projects.

Project: Specialist Legal Advice Partnership **Lead Partner:** Tower Hamlets Law Centre **Delivery Partners:** Island Advice Centre & Legal Advice Centre

WELFARE BENEFITS – ISLAND ADVICE

Mrs X suffers from depression and anxiety. She came with her father for help as she was receiving letters from debt collectors for benefit overpayments.

She had overpayments from HB, CTB, ESA, IS, JSA of £30k+ for a past period when she was accused of benefit fraud and co-habitation with her husband whom she was separated from at the time. She had originally appealed with help of her father but had no legal representative, and by the time she came to us her appeals had already been heard by first tier tribunals and refused.

We made a late request to set aside the FTT decisions and the judge agreed to set aside all 7 negative decisions and for all the appeals to be heard by a district judge. We gathered the facts and evidence and errors in DWP submissions and made written representations. The DWP and HB presenting officers attended the hearing too, and client gave her verbal evidence along with witness accounts from her parents.

The appeals were all allowed and substantial overpayments removed; the client was very relieved as she had been struggling with this for over a year before she came to us.

EDUCATION – LEGAL ADVICE CENTRE

Our client has been making an application for assessment for an EHC Plan for her son for several months and it continued to be declined. The client had produced a great deal of medical evidence to support her application but the local authority had decided there was nothing to suggest the client's son needed help beyond that which was being provided by the school.

The client had missed the deadline for applying to the SENDIST tribunal as she had not taken part in mediation. A late application to the tribunal was submitted and successfully lodged as the tribunal agreed it was in the interests of justice to do so.

The local authority agreed to carry out an assessment as soon as they received notification from the tribunal that the claim had been accepted and have now given the client's son an EHC Plan.

The following case study relates to a Theme 3 Project

Organisation: Tower Hamlets Friend and Neighbours (THFN)

Project Title: Older Peoples Befriending Project Annual Grant: £35,000

Mrs S is 73 years old and was referred to THFN in October 201 5

Reasons for Referral: Mrs S was referred to us because she was lonely and becoming depressed. She lives alone and has no social contact with friends or family.

Issues and Needs: Mrs S has been diagnosed with diabetes, walks with a frame and is partially deaf. She has no family in London and was becoming reclusive and developing a fear of leaving the house by herself. She had complained of feeling isolated and lonely and was contacting her GP for someone to talk to every time she felt down. Her GP referred her to a local Community Centre, which in turn referred her to us.

THFN'S Input: Her THFN befriender visits MRS S at home on a regular basis and provides emotional support. She has been informed of local activities that may be of interest to her based on the information she provide at assessment stage.

Mrs S has also been assisted to apply for a taxi card which allows her to travel independently and she has expressed an interest in visiting her sister who lives outside of London. Mrs S has also asked for help to contact her carers' service.

Outcomes: Mrs S feels more supported and does not contact her without a medical reason now. Her THFN befriender has built up a god relationship with Mrs S so that she is able to encourage her to go on organised trips with THFN and meet other clients who have experienced similar depression and anxiety.

MRS S Says: "I like THFN's visits when we can talk about my family and show their pictures. I am feeling less lonely now as I know there is someone local who cares"