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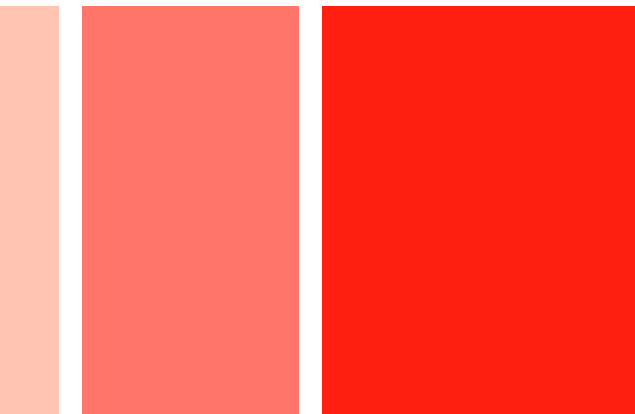
Llywodraeth Cymru
Welsh Government

Rapid Evidence Assessment: The Effective Delivery of Information, Advice and Guidance

Rapid Evidence Assessment: The Effective Delivery of Information Advice and Guidance

Consilium Research and Consultancy

Views expressed in this report are those of the researcher and not necessarily those of the Welsh Government

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Glossary of acronyms and terminology

BME	Black, Minority and Ethnic
CABx	Citizens Advice Bureaux - referring to individual local bureaux
CLAC	Community Legal Advice Centre
DWP	Department for Work and Pensions
IAG	Information, Advice and Guidance
ICT	Information Communication Technologies
LSC	Legal Services Commission
LSRC	Legal Services Research Centre
MoJ	Ministry of Justice
NEET	Not in Education, Employment or Training
NfP	Not-for-Profit
REA	Rapid Evidence Assessment
Advice Services	Services that diagnose the client's legal problem and any related legal matters; identify relevant legislation and decide how it applies to a client's particular circumstances, including identifying the implications and consequences of such action and grounds for taking action; providing information on matters relevant to the problem, such as advising on next steps; and identify dates by which action must be taken in order to secure a client's rights.
Advocacy	Used within the advice sector to describe a level of service which the advice agency provides for its clients: i.e. negotiation with third parties and representation at tribunal and court proceedings. Agencies providing advice may often describe their activities as "advocacy" where they are supporting a client to access justice through taking action on their behalf in line with the definitions of 'advice', 'specialist advice' or 'specialist casework', e.g. representing a client at court or tribunal hearings.
Beneficial outcome	The positive changes, benefits, learning or other effects that happen as a result of the delivery of information, advice and guidance
Clients	A customer or patron of a service or organisation, generally where the service provider is professional and is in a position of trust and confidence.

Discrimination	Less favourable treatment of a person compared with another person because of a protected characteristic.
Information Services	Services that give clients the information they need, for them to know and do more about their situation. It can include information about rights, policies and practices; and about national and local services and agencies. Responsibility for taking any further action rests with the client.
Legal advice	Within the not-for-profit sector, advice on matters of social welfare law is often given by advisers, paid or voluntary. These are not legally qualified people and may not consider that they are giving "legal" advice simply because they do not have detailed knowledge of, or training in, social welfare law or case law. However, any advice which involves interpreting how the law applies to a client's particular problem or set of circumstances is legal advice.
Not-for-profit advice sector	A not-for-profit organisation does not earn profits for its owners. All of the money earned by or donated to a not-for-profit organisation is used in pursuing its objectives. The majority of not-for-profit advice providers are community based charities, sometimes focusing solely on advice provision, but often providing an array of services of which advice is a key part.
Specialist consumer advice	Relates to the purchase or use of goods and services, and can range from information and advice on financial services and products, to considering the impact of rising fuel costs on people living in poverty, through to miss-selling and aggressive sales tactics.
Specialist debt advice	Advice linked to financial difficulties resulting from a range of reasons including financial shocks, low incomes, poor money management and creditor behaviour.
Specialist discrimination advice	Discrimination advice relates to equality legislation and ensuring those within protected characteristic groups are not discriminated against within society, as well as ensuring broader coverage regarding the Human Rights Convention.
Specialist employment advice	Advice covering individuals' rights at work including leave, flexible working and problems at work and health and safety issues. Within the wider scope of employment advice also includes support for those seeking employment or facing redundancy.
Specialist housing advice	Advice covering issues linked to homelessness legislation, housing standards, energy efficiency, and adaptations and in relation to tenancy issues.

Specialist welfare benefits advice	Advice linked to the understanding, access and entitlement to welfare benefits.
Low level provision	Information services (e.g. signposting, and providing information for the client to pursue such as leaflets or verbal information).
Medium level provision	Advice services (e.g. benefit eligibility check, help with form filling, contacting someone on behalf of the client, repayment arrangements, advice on rights).
High level provision	Specialist advice (e.g. due to a client's multiple and complex needs or in-depth pieces of work, specialist legal knowledge is required to resolve the issue).
Social Welfare Law	Those categories of law which govern entitlement to state benefits and housing; the management of personal and business debt; an employee's rights at work and access to redress for unfair treatment; and access to appropriate care and support for people with particular health problems.
Specialist Advice	Services where the adviser or services as a whole undertakes advice and casework at a level where very detailed knowledge of the law and case law is required. Usually, this means it is delivered by advisers who have the necessary levels of knowledge and expertise to undertake representation for clients through the court or tribunal.

Executive Summary

1. Consilium Research and Consultancy (Consilium) conducted an evidence review in order to assess the effectiveness of the different delivery mechanisms service providers use to provide information, advice and guidance (IAG) to members of the public. The research provides a summary of the evidence collated and reviewed as part of the review of studies that focus on delivery mechanisms that are recognised as ensuring beneficial outcomes for clients and specifically those aspects evidenced as instrumental to prompting positive changes in the behaviours of clients.

Context

2. The provision of IAG services in Wales is a key component of both the Welsh Government's Tackling Poverty Action Plan, 2012-2016 and the Strategic Equality Plan, 2012-2016. Access to these services is seen as central in giving everyone a fair and equal chance in life. However these services in Wales face considerable pressures due to a combination of factors including the economic downturn, UK Government reforms to Welfare and Legal Aid and as a result of the reduction and changes in funding for advice provision itself. This study complements a range of research emanating from the review of not-for-profit (NfP) advice services with an objective of informing the future allocation of resources for the delivery of IAG.

Key Findings

3. A broad overview of the key findings is outlined below.

The effectiveness of different IAG delivery mechanisms

4. The REA process has highlighted a range of factors which can influence the impact and effectiveness of the range of IAG delivery methods or channels employed by IAG providers. These include combining IAG delivery methods including Information Communication Technology and the development of a strong relationship between the advisor and the client based on trust and respect.

5. **Face-to-face support** is acknowledged as the predominant delivery method for IAG, although the research points to the fact with vulnerable clients more likely to be found in face-to-face channels.

6. **Telephone channels** are frequently cited as a cost effective approach to delivering or allocating increasingly scarce resources according to complexity and need (e.g. a triage system).

7. **Online support** is frequently cited as enabling quick and up to date access to information on a range of issues although there remain concerns over barriers to access

8. **Self-help methods** are defined as generic or specific information targeted at resolving specific social welfare issues.

Measurement Systems and Outcomes

9. The quality of advice should relate to a combined measurement of how good the advice given to a client is, the effectiveness of the delivery and the degree to which the client acts upon the advice provided. However, there are no consistent standards or frameworks against which providers of IAG and funders can assess the quality of the IAG provided, and attribute the service to the achievement of outcomes and impacts. The REA highlights the difference between short term satisfaction with the research process and quality advice which contributes to quality outcomes.

Effectiveness of IAG Delivery by Client Group

10. The evidence of the effectiveness and key attributes of IAG delivery to the general public highlights issues which will also be of relevance for specific target groups.

General Public

11. Face-to-face channels are successful in reaching socially and financially excluded people, develop trust and outcomes that can change a client's advice seeking behaviour by empowering them to take control of their problems and use self-help materials to achieve a more sustainable solution to their problems based on establishing a trusted relationship with clients.

12. Question marks remain over the effectiveness of telephone channels whilst the practical and financial benefits of online support channels are recognised.

13. Vulnerable groups need more than just access to information but also help in interpreting it. There is value in adopting a holistic view in providing on-going casework to resolve complex and inter-linked issues.

Older People

14. The value of face-to-face IAG support for older people is reinforced in much of the evidence base with older people valuing a personalised approach from a trusted source who is focused on their interests.

15. Telephone support channels are a cause of frustration for service users and advisers, whilst a significant proportion of older people are likely to remain unable to take advantage of new technologies for the foreseeable future.

16. Many older people will need support to fully understand and act on information, highlighting the role of the adviser in achieving positive outcomes although the value of self-help provision for older people can often be realised between more intensive support sessions.

Young People

17. The evidence suggests that remote mediums, such as email and telephone, are not as conducive to building the trust with an adviser which is necessary for young people to open up about their social welfare problems. Successful helplines for young people tend to focus on sensitive personal, emotional and health issues rather than legal or practical issues.

18. An adviser who possesses the skills to engage with troubled young people and the tenacity to pursue a case is more likely to produce positive outcomes.

People with Health and Social Care Needs

19. There are skills gaps amongst advisers which contribute to a lack of understanding and unfulfilled outcomes for cancer patients. The knowledge that financial issues can be taken care of can have additional impacts linked to reduced stress levels.

20. The research highlights a need to ensure that unemployed disabled people or those in a poor financial position have access to IAG support.

Gaps in the Evidence Base

21. This REA review acknowledges the absence of robust, quality evidence which refers to the effectiveness of IAG and specifically IAG delivery methods that are effective in achieving positive outcomes for and changes in the behaviour of clients.

22. The major omission from the evidence base is a critical mass of material outlining the outcomes and impacts of IAG support by delivery method. The longer term benefits of IAG provision can take many years to fully emerge and only after a lengthy, multi-method IAG journey. This makes it hard to disaggregate and attribute impact to individual methods when eventual impacts fall outside the scope of time limited evaluations that do not incorporate a longitudinal element.

Conclusion

23. Whilst the majority of the studies fall short of evidencing a causal link between IAG delivery and outcomes for clients, there are a number of delivery characteristics, which are recognised as crucial to the achievement of successful outcomes. These can provide guidance to policy makers and delivery agencies on approaches which are able to alleviate barriers to accessing IAG or hasten the identification of the root causes and therefore effective solutions to the often multifaceted problems faced by many clients.

24. The distinction between information and the added value offered by advice, guidance and advocacy highlights the importance of the role of the adviser in coordinating the relative values and benefits to be gained from each element of the IAG journey as part of a trusted relationship with the client. Indeed, the combination of different delivery methods, exploiting technology and convenience, is recognised as providing the most effective package of support to meet the IAG needs of clients.

25. Face-to-face support is acknowledged as the predominant method of IAG delivery from which the most substantive outcomes can be achieved and especially when dealing with clients with clusters of problems. However, research has shown that there are occasions when clients either do not want a face-to-face discussion or have no preference in delivery method and simply search for help from the first available organisation (particularly for clients at crisis point).

26. There are clear lessons for the allocation of resources to ensure that face-to-face support is prioritised to those clients and cases which require the level of support offered by this route although more research is required to match service provision to advice seeking behaviour.

27. The REA has highlighted the challenges faced in rolling out a larger proportion of IAG delivery through telephone services. There is evidence to suggest that the outcomes associated with telephone support are less effective when compared to face-to-face and could also be more expensive in the longer term as problems are not tackled in the most appropriate way and/or clients are not empowered to try to address future problems earlier and on a self-help basis.

28. There are similar access and impact issues associated with online support as telephone support, although the growing use and advancement of the Internet provides examples of good practice that can be applied to a range of problems and clients.

1   Introduction

1.1   In October 2013 Consilium Research and Consultancy (Consilium) was commissioned by the Welsh Government to undertake an evidence review in order to assess the effectiveness of the different delivery mechanisms service providers use to provide information, advice and guidance (IAG) to members of the public.

1.2   This narrative report provides a summary of the evidence collated and reviewed that focus on delivery mechanisms, which are recognised as ensuring beneficial outcomes for clients and specifically those aspects evidenced as instrumental to prompting positive changes in the behaviours of clients.

1.3   The key research questions that the evidence review seeks to answer are provided below:

Impact questions
- What evidence is there of the effectiveness of different delivery mechanisms service providers use to provide information, advice and guidance to members of the public?
- Which delivery mechanisms are known to ensure positive outcomes for and changes in behaviours of service users?

Non-impact questions
- What are the key characteristics of effective delivery mechanisms?
- What is the role of new technologies in facilitating effective delivery of information, advice and guidance to members of the public?
- How are the outcomes for service users measured?
- How is the link between the delivery of information, advice and guidance and the outcomes for service users assessed?

- What are the key characteristics and models of service delivery that service providers use to deliver effective information, advice and guidance to members of the public?

- What is the role of service providers in enhancing the delivery mechanisms used to provide information, advice and guidance to members of the public?

- What mechanisms deliver the best return on investment?

1.4 This report is structured into the following six sections:

- Context.

- Methodology.

- Results.

- Gaps in the evidence base.

- Conclusion.

- References.

2 Context

2.1 The provision of information, advice and guidance services in Wales is a key component of both the Welsh Government's Tackling Poverty Action Plan, 2012-2016 (Welsh Government, 2012a and the Strategic Equality Plan, 2012-2016 (Welsh Government, 2012b). Access to these services is seen as central in giving everyone a fair and equal chance in life. However these services in Wales face considerable pressures due to a combination of factors including the economic downturn, UK Government reforms to Welfare and Legal Aid and as a result of the reduction and changes in funding for advice provision itself.

2.2 In light of the challenges facing not-for-profit (NfP) advice providers the Minister for Local Government and Communities and the Finance Minister instigated a review of advice services in Wales (Welsh Government, 2013). The scope of the review was limited to primary advice provision by the third and public sectors while also taking into account private sector provision and organisations which offer advice as a secondary part of their aims.

2.3 The review recognises that access to IAG is an enabling and preventative service, which can help citizens to make informed decisions relating to their lives. Effective IAG has the potential to improve an individual's health and wellbeing as well as reducing their reliance on public services.

2.4 The literature review conducted as part of the wider review summarises the characteristics of the different channels through which advice is provided. It highlights that face-to-face advice delivered through outreach offers the advantage of widening access to advice for hard to reach communities, whilst telephone advice appears most suited to initial advice and guided self-help as opposed to supporting people to address complex problems. However the review acknowledges that online advice services are still relatively new with little research into their impact on resolving people's problems, despite their rapid growth in recent years.

2.5 The review report also identifies a likely increase in advice seekers requiring specialist welfare benefit, debt and housing advice as well as money advice as a result of Welfare Reform and the on-going economic downturn. The report also states that this increase in demand will occur at the same time that these specialist services are diminishing under Legal Aid Reform as part of a range of unprecedented challenges being faced by NfP advice providers.

2.6 This raises concerns regarding the capacity and ability of the sector to support people with complex problems seeking help. In response the report outlines a series of recommendations which aim to respond to these challenges and meet the rising demand for specialist advice services. This evidence review is one of a number of research studies on-going in Wales with an objective of informing the future allocation of resources for the delivery of IAG.

3 Methodology

3.1 The approach to completing this evidence review has followed established good practice (see Appendix 1) including the formulation of review questions and the development of a conceptual framework (Appendix 2). Inclusion and exclusion criteria were agreed with officials from the Welsh Government's Local Government and Communities Analytical Team and the search strategy implemented. The evidence review was implemented between the 1st October and 31st October 2013.

Search Strategy

3.2 The search strategy incorporated a number of approaches in order to identify research that would assist in answering the key review questions. Searches were undertaken of a range of web based knowledge management systems including British Library Public Catalogue[1], Google Scholar, The Cochrane Library, Joseph Rowntree Foundation, Wiley Online Library, Ingenta Connect, Third Sector Knowledge Portal, Online Information Review, The King's Fund and Taylor & Francis Online. A full list of knowledge management systems utilised in the search strategy is provided in Appendix 1.

3.3 To interrogate the knowledge management systems the research team used a number of search terms including:

- Information advice guidance.

- Debt advice.

- Welfare benefits advice.

- Housing advice.

- Employment advice.

- Consumer advice.

- Discrimination advice.

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[1] Included a search of journals only.

3.4   Analysis of the scale of the results generated through the application of these search terms across a cross section of the knowledge management systems used is provided in Appendix 3. The analysis highlights the scale of the screening process required in order to identify research evidence that meets the inclusion and exclusion criteria.

3.5   The research team was kindly assisted by a number of membership based organisations who cascaded information regarding the research to their respective networks. This has been particularly valuable in the identification grey literature that is difficult to trace via conventional routes such as published journals, either because it has not been published commercially or is not widely accessible.

3.6   Generating a 'call for evidence' across a range of organisations has enabled the evidence review to draw on original and recently published reports. The 'call for evidence' was cascaded through the Independent Advice Providers' Forum. In total the research team disseminated details of the evidence review to 73 individuals covering 63 organisations.

3.7   Finally as part of the review and screening process, the research team sourced relevant publications referenced in studies collated as part of the evidence review. All studies identified in the evidence review process have been referenced within a bespoke database to provide a resource that can underpin future research and development.

Screening

3.8   The evidence review identified 205 documents that met the search criteria. Each document was screened and compared against the final agreed inclusion and exclusion criteria. The initial inclusion and exclusion criteria were modified following discussion with the Welsh Government with a stronger focus on non-UK evidence within the latter stages of the search and the inclusion of a small number of influential and relevant reports published prior to 2003.

Inclusion criteria

- Studies that focus on the delivery of information, advice and guidance.

- Studies that can evidence clearly defined outcomes for service users.

- Studies that provide evidence of the effectiveness of information, advice and guidance in prompting positive change that officials can draw from to inform policy.

- Formal research (i.e. subject to a clear research process).

- Informal published material (i.e. grey literature) with reference to the 'quality' of the evidence.

- Studies that report on the delivery of advice in the following areas (as defined above):

    o Generalist advice services.

    o Social welfare law information services.

    o Social welfare law advice services.

    o Specialist debt advice.

    o Specialist welfare benefits advice.

    o Specialist housing advice.

    o Specialist employment advice.

    o Specialist consumer advice.

    o Specialist discrimination advice.

Exclusion criteria

- Studies that report on practice that doesn't have a clearly stated purpose or include clearly defined outcomes.

- Soft evidence (i.e. primary commentary, anecdotal evidence or interview data).

- Studies that report solely on evidence of satisfaction derived from the delivery of information, advice and guidance as opposed to the achievement of defined outcomes for service users.

- Studies published before 2003[2].

- Studies not published in English.

3.9 The initial screening process reduced the number of documents to be synthesised in the REA report to 100. The screening process identified a number of trends in these studies, in particular those submitted by organisations and individuals as part of the 'call for evidence' process, namely:

- The majority of studies fell short of evaluating the longer term outcomes and impact achieved as a consequence of the IAG delivery.

- The majority of publications focus on outputs (i.e. numbers supported) and access issues.

- Most reports do not specifically link the IAG delivery method used to the achievement of longer term outcomes.

3.10 These trends are discussed in more detail as part of wider analysis of gaps in the evidence base (see Section 5) and measurement of outcomes within the evidence base (see page 33).

Quality assessment

3.11 Following the initial screening process the research team reviewed the quality of the studies and their potential to answer the key research questions. This secondary screening process had to overcome challenges in categorising studies which assess multiple delivery methods targeting a variety of client groups and a wide range of service areas.

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[2] A small number of reports published prior to 2003 were included given the value added to the REA process.

3.12 Many of the studies present evidence of practice in the form of individual case studies. These vary in the strength of their evidence base with a number offering greater value as advocacy or awareness raising publications, rather than robust evidence and insight regarding the relative merits and effectiveness of different delivery methods for IAG. However, these publications do still retain value in building a picture of the extent of practice across the UK and in several cases make a case for future research investment in order to build a stronger evidence base.

3.13 Where the research team considers publications to have value but are methodologically weak this has been denoted with appropriate caveats.

3.14 A breakdown of the research evidence reviewed across a range of variables is provided below:

Table 3.1 - Research Type

Research Type	Number	%
Primary	21	21
Secondary	21	21
Mixed	58	58
Total	**100**	**100**

Table 3.2 – Sector Provider

Sector	Number	%
Private	1	1
Public	41	46
Third	48	53
Total	**90**	**100**

Table 3.3 – Service Area

Sector	Number	%
Generalist	43	43
Specialist Debt Advice	15	15
Social Welfare Law Advice	15	15
Specialist Welfare Benefits	14	14
Specialist Consumer	7	7
Specialist Employment	4	4
Social Welfare Law Information	1	1
Specialist Housing	1	1
Total	**100**	**100**

Table 3.4 – Service Level

Research Type	Number	%
Low	14	14
Medium	81	82
High	5	5
Total	**100**	**100**

Limitations of the Review

3.15 This evidence review has been conducted over a period of four weeks which incorporated the research design, the search for evidence, analysis and reporting. Given the benefits of the call for evidence approach in generating research evidence, and in particular grey material, then further time to dedicate to this area may have enabled additional relevant evidence to be identified and reviewed in particular from partners unable to respond within the short timeframe available.

3.16 There is considerable variation in the quality and rigour of the research reports identified in the evidence review. Examples range from a research study based on a randomised control trial to small scale pilot studies that present qualitative evidence from a handful of service users using a case study format. The evidence also provides wide variance in the definition of a positive outcome which makes any overall analysis problematic.

3.17 There are also issues which need to be overcome relating to the search strategy for evidence related to the impact of IAG delivery outside of the UK. Differences in terminology, the delivery of services and requirements for IAG in different service areas (e.g. US law) requires a longer and more sophisticated search and analysis process than could be employed in this study.

3.18 There is a lack of consistency in the research reports regarding the measurement tools used to assess the impact of different delivery methods of IAG on clients. Indeed, a number of the studies highlight the need for follow-up research (in particular longitudinal assessments) in order to validate any findings arising from pilot or small-scale studies. This highlights the current dearth of evidence attributing IAG provision, and specifically comparing the method of delivery of the IAG, to clearly defined outcomes for clients.

3.19 The limitations of the evidence base identified through the REA process highlights both a necessary feature of the process itself in terms of being driven by tight inclusion and exclusion criteria and the availability of published evidence to form the subsequent analysis and reporting. Good practice can involve the use of REAs as part of a larger research process which, for example, creates a baseline from which value can be added through primary research and debate (e.g. an IAG provider workshop) in order to explore the findings and gaps in more detail.

3.20 This review does however recognise the potentially transferable lessons from studies that report on the benefits of using different delivery methods to support beneficiaries across different topics and different advice levels. It identifies common themes and learning arising from the evidence base that can inform future approaches to delivering IAG.

3.21 In particular, many of the reports detail how providers have facilitated access to advice services for a range of client groups which can be linked to the achievement of positive outcomes (assuming that quality advice is provided). Consequently facilitating access to IAG (process) and the provision of quality advice (output) represent key factors which support the delivery of positive outcomes.

3.22 Gaps identified in the evidence base used to inform research are presented in Section 5 of this report.

4 Review Results

4.1 This section of the report provides a synthesis of the evidence captured through the review process. It begins with an analysis of some of the relevant evidence which explores the key impact issues linked to the following terms:

a) Information, Advice, Guidance and Advocacy.

b) Informing Policy.

c) IAG Delivery Methods:

- Face-to-face.

- Telephone.

- Online.

- Self-Help.

d) Measurement Systems and Outcomes

4.2 The remaining analysis is presented against the following service user groups:

a) General public[3].

b) Older people.

c) Young people.

d) People with health and social care needs.

4.3 Where evidence is available, the key characteristics of IAG delivery to each of these cohorts is presented through analysis of the following issues:

a) Delivery methods[4]:

- Face-to-face.

- Telephone.

- Online.

- Self-help methods.

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[3] A group comprised of clients not within the other service user group categories
[4] In line with those used in the Welsh Government Advice Services Review: Final Research Report (Welsh Government, 2013)

- Facilitating Factors (i.e. features of service delivery across delivery methods which act as catalysts to support the achievement of successful outcomes).

- Service level.

- Provider sector.

Guiding Definitions of Characteristics of IAG Provision

4.4 The evidence base gathered in the development of the REA has revealed a wide range of definitions of key terms which require explanation in order to support the commentary and analysis. An exploration of these key terms is provided using examples from the REA database.

Information, Advice, Guidance and Advocacy

4.5 Clarity on the nature and scope of each aspect of advisory services, namely information, advice, guidance (IAG) and advocacy, is required to fully understand the relevance of key factors crucial to their delivery across a range of channels or methods.

4.6 The distinction between information and advice lies not only in the content of the material, but also the context within which it is given. Advice adds to the content through interpretation by an adviser for example and delivery of a suggested course of action. As outlined by Margiotta et al (2003), information and advice and guidance are often used interchangeably, but are in fact distinct and should be seen as having different applications.

4.7 Advocacy sees the role of the advisor increased through 'the provision of support and encouragement, or representation of individuals' views, needs or rights'. Moreover, a range of research studies including Citizens Advice Scotland (2011) highlight that information, advice/guidance and advocacy are interlinked and should be provided within an integrated approach with the client remaining central in order to maximise the efficiency and effectiveness of support provided. Such an approach recognises the fact that clients often require support in respect of multiple and often interlinked issues or 'problem clusters' (Lamb et al. 2006), which cannot be dealt with effectively through the provision of information, advice/guidance or advocacy in isolation.

4.8 In other words, and as outlined by D'Angelo and Kaye (2012) '[accessing advice services] is just one step in a longer and sometimes complicated journey for a client'. Fox et al (2010) highlight the importance of integrating general and specialist advice services and providing a seamless link between the two in order to ensure that 'you don't lose people in the crevasses'.

4.9 These publications suggest that the provision of a holistic package of support that uses the most appropriate and relevant approach in light of the client's context are prerequisites for the delivery of 'good advice' and resultant positive outcomes.

Informing Policy

4.10 In addition to the direct provision of IAG, the evidence base incorporates recognition of the impact of policy reforms, legislation and national initiatives. The research highlights how the achievement of successful outcomes through the provision of IAG can be supported by tackling the very drivers of the demand for IAG. Johnson and Steed (2011) identify three key drivers of increased demand for advice:

- Increased value demand (i.e. demand for IAG increases in line with the scale of issues such as unemployment or problem debt and therefore can be reduced by reducing such factors).

- Increased system failure (i.e. demand for IAG stemming from failures in public services such as the welfare state or social housing).

- Output-driven commissioning (i.e. a focus on meeting the short term problems of clients rather than their root cause can contribute to a 'revolving-door' of demand for IAG services).

4.11 Consequently, the prospect of advice services delivering sustainable outcomes for individual clients can be strengthened by addressing wider policy failures which drive the demand for support. This highlights the importance of advice services continuing to draw on their delivery experience in order to influence and inform policy change.

IAG Delivery Methods

4.12 The REA process has highlighted a range of factors which can influence the take-up and effectiveness of the range of IAG delivery methods or channels employed by IAG providers.

4.13 A key facilitating factor across the evidence base is exemplified by the findings of the Review of Not-for-Profit Advice Services in England (Cabinet Office, 2012) which highlights **the value to be derived from combining IAG delivery methods**. Specifically, the report emphasises a need to exploit digital technology to increase access and achieve economies of scale from national networks highlighting that this can prove effective especially when combined with outreach strategies tailored to specific local needs.

4.14 Indeed, there is evidence that **delivery methods become irrelevant when clients reach crisis point** as they **seek solutions from the first available provider** they trust, are aware of or find. In the context of debt advice for example, Ellison and Whyley (2012a) highlight that clients' needs at crisis point are for information on their rights and options to resolve their debt levels with **little variation observed in choice or outcomes between clients using different channels**.

4.15 Much of the evidence base stresses the **importance of establishing a strong relationship between the advisor and the client if positive outcomes are to be achieved** across a range of service areas.

4.16 For example, Bell and Smerdon (2011) highlight that people who access advice services funded by civil legal aid are **more likely to reveal full information if the advisor builds a trusting and respectful relationship, thus leading to swifter resolution of cases, and clients who are more satisfied with the outcomes**. Furthermore, patients who experience a good relationship with their healthcare professional are more likely to engage in positive behaviour change.

4.17 The importance of building relationships between advisers and clients is reinforced by Whitfield (2013) who cites the need for social housing providers to develop more personalised and interactive relationships with residents in order to support the early identification of problems and solutions. As emphasised by Smith et al (2013) in their analysis of legal advice in England and Wales, the process of maintaining a strong relationship between the adviser and client necessitates a level of continuity that is not always apparent or possible within advice services.

4.18 Examples of the outcomes that can be improved and/or secured across delivery methods as a result of an effective relationship between adviser and client include:

- Information is gathered accurately ensuring that the problem or issue is correctly identified.

- A fuller understanding is achieved of the issue being tackled and wider problems that may be contributing to it enabling the correct action to be identified.

- Greater commitment and motivation to achieve outcomes.

- Immediate problems are addressed and prevented from escalating.

- Clients experiencing a range of psychological benefits from a positive relationship in addition to a beneficial outcome from the IAG.

4.19 This conclusion has some clear implications for service delivery including:

- Increasing the effectiveness of relationships can be linked to quality of service and achievement of positive outcomes.

- Where people using services have lower skills or self-confidence it is even more important for service providers to develop effective relationships.

- Delivery channels which distance the adviser from the clients may undermine the potential for positive outcomes.

4.20 It is however important to avoid establishing a relationship of dependency amongst clients and to adopt an approach which empowers clients to deal more effectively with their issues on their own in the future (D'Angelo and Kaye, 2012). The notion of empowering the clients and building their resilience in a common theme in the evidence base.

Face-to-face Support

4.21 Face-to-face support is acknowledged within the evidence as the delivery method most likely to deliver positive outcomes, in particular for vulnerable clients. For example, in their response to the Welsh Government's Advice Services Review (Welsh Government, 2013) [5], Age Connects Wales stresses the importance of the face-to-face channel for older people who wish to discuss their issues and needs in a confidential and familiar environment. **The evidence base is clear in reaffirming that there is, and will continue to be, a need for face-to-face advice and guidance in order to deliver positive advice outcomes for some clients**.

4.22 As well as physical face-to-face support, **new technology enables the benefits of this approach to be employed on a wider basis**. Wood and Griffiths (2007) emphasise the benefit of a client being able to see an advisor via a web-cam. This was found to bring both reassurances when forming a relationship on the Internet coupled with the advantages of anonymity emanating from a one-way feature where the adviser cannot see the client.

4.23 However, Ellison and Whyley (2012a) demonstrate that vulnerable clients (requiring debt advice) do not always either need or want face-to-face support. Indeed, the research suggests that more clients are using face-to-face delivery methods for debt advice than either need or desire them. **This has implications for resource allocation and efficiency savings to be gained from greater understanding of the channel preferences/needs of different clients**.

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[5] Appendix 10

Telephone Support

4.24 As outlined in the Welsh Government's Review of the not-for-profit IAG sector (Welsh Government, 2013), there is a paucity of research comparing the outcomes of telephone IAG support combined with face-to-face channels. However, **telephone channels are frequently cited as a cost effective approach to delivering or allocating increasingly scarce resources according to complexity and need (e.g. a triage system)** with the quality of the rating of calls/issues and the appropriateness of sign-posting and referral key variables that highlight the importance of locally based IAG services.

4.25 Balmer et al (2012a) also highlight the limited empirical research which compares the effectiveness of telephone to face-to-face services in the field of legal advice. The research examines the client groups and issues which gravitate toward particular channels of advice, the relationship between mode of advice and the outcome of cases for clients and the relationship between mode of advice and advice time.

4.26 The findings conclude that there is some evidence to suggest that **mode of advice may be dictated in part by socio-economic status**, with clients who were tenants of social landlords, private landlords, the local authority or homeless shown to be much more likely to use face-to-face services. The report states that this may, in part, be explained by disadvantaged clients being less likely to have a fixed line telephone and being increasingly reliant on pay as you go mobile phones which have higher charges than landlines for non-geographic numbers such as the 0845 prefix for telephone advice line.

4.27 Earlier research conducted by Hasluck et al (2005) concludes that for some clients telephony costs may present a barrier to accessing services which may produce a more stark disparity in the event that 'client call back' features are made unavailable. Such concerns are also evident in CAB commissioned research into the effectiveness of call centres (Chatha et al. 2004) who found that '*when it comes to delivery by call centres in the public and private sector there is a long way to go to achieve the right balance between high volume, resource efficient and consistent standards of service on the one hand and accessible, responsive and personalised services for all on the other. Too many consumers and CABx report extreme service shortcomings in the delivery of call centres, often incorrectly leaving people living on very low incomes, in debt, out of pocket, feeling frustrated and under extreme stress'*.

4.28 Balmer et al (2012b) conclude that whilst the majority of substantive benefit outcomes for telephone advice comprised '*enabling clients to plan or manage affairs'*, more tangible outcomes such as being '*housed, rehoused or retaining a home'* in the case of homelessness, or '*repairs*' in the case of disrepair were rare, and far more common for face-to-face advice.

4.29 The strengths and weaknesses of IAG provision delivered by telephone are outlined later in this report. It is apparent however that **the most effective IAG channels will vary by client group, socio-economic characteristics of the client and the complexity of issues to be addressed** (i.e. the client's context).

Online Information and Guidance

4.30 The merits of online information are frequently cited as **enabling quick and (assumed) up-to-date access for clients** across a range of issues. There are numerous examples of innovative approaches to improving access to online information including video-chats, self-help interactive tools, advice via email and smart phones apps (Cabinet Office, 2012) although **very little evaluation of the related outcomes is currently available**.

4.31 There also remain concerns over the growing use of online methods in terms of the barriers to accessing these resources amongst older people, those with a dementia, disability or sensory impairment and those in remote areas without access to quality broadband services.

4.32 Taghioff (2006) showed that the success of online guides was based on a combination of focused content, the range of information techniques employed and the variety of design techniques used in order to provide a relevant overview of a specific user 'situation'. The use of presentation techniques including realistic case studies, question and answer examples, checklists and prompts about key factors and key decisions, glossaries and presentations customised to different learning styles of different users were also identified as catalysts of effective online information provision.

Self-help

4.33 Self-help methods are defined, as per the Advice Services Review: Final Research Report (Welsh Government, 2013) as generic or specific information targeted at resolving specific social welfare issues. Focusing on the provision of information within the wider scope of IAG, self-help information can be delivered in a variety of formats from leaflets and letters to websites and email. There is therefore a degree of cross-over between other IAG channels which needs to be accounted for in the analysis of effectiveness of IAG delivery overall.

Measurement Systems and Outcomes

4.34 The quality of advice should relate to a combined measurement of how good the advice given to a client is, the effectiveness of the delivery and the degree to which the client acts upon the advice provided. However, **there are no consistent standards or frameworks against which providers of IAG and funders can assess the quality of the IAG provided and attribute the service to the achievement of outcomes and impacts**[6].

4.35 **There are a range of factors linked to the delivery and content of IAG provision which will impact upon** the **effectiveness of quality advice.** For example, providing IAG in a format that enables the client to engage with the adviser on an inter-personal level and derive the benefits of a trusted relationship/rapport is more likely to produce enhanced outcomes (Kenrick, 2011).

4.36 Home visiting is important for older clients and enables the adviser to understand the client's context whereas neutral space meeting is important for services looking to protect individuals (i.e. discrimination at work or domestic abuse).

4.37 **There are also a range of factors which can provide a false impression of quality**. Age UK (2010) explores the difference between client satisfaction and the receipt of quality advice that can be attributed to beneficial outcomes - the 'phew effect'. This refers to the sense of relief people often feel immediately after having visited an advice service, which cannot be used in isolation as an indicator of the quality of advice received or any longer term change in behaviour or gain for the client.

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[6] As found by a survey of the debt advice landscape recently commissioned by the Money Advice Service, in part because it is challenging and can be seen as imposing a disproportionate burden. Referenced in Cabinet Office (2012) - 'Not-for-Profit Advice Services in England'. October 2012.

4.38 D'Angelo and Kaye (2012) provide an example of an assessment of the impact of advice on individual clients in the form of analysis of the 'costs and benefits' related to the amounts of debt of clients and the reductions due to CAB intervention. However, whilst representative of a number of impact research studies of IAG provision, such an analysis **does not account for the counterfactual scenario and the additionality of the IAG provided**. The research also recognises the **difficulties in attributing impact and outcomes to one specific element of IAG given that in many cases the process of support will take the form of a multi-stage journey** comprised of a range of different interventions which will be difficult to attribute to an eventual outcome. **The importance of effective signposting or referral in order to support the client to engage other services along the multi-stage IAG journey and ultimately achieve a positive outcome is therefore clear**.

4.39 Griffith (2003) states that there is a link between good advice and good outcomes (i.e. **'good advice gives good results'**). However, the research also suggests that there is a difference between user-satisfaction with advice and outcomes and a professional assessment, with users often much less critical than a professional assessment of the service. The value of the service to users is such that people trust the project to take care of their interests and assume that any unmet needs are due to other people (i.e. inaction by other agencies) or to the rules. Consequently as the report concludes **there is clearly a difference between satisfaction and effectiveness and a difference between assessments made by different stakeholders**.

4.40 Pleasence and Balmer (2007) conducted a randomised trial to assess whether the offer of advice to those experiencing debt problems and who had yet to obtain any formal advice, had a positive impact on their financial and general circumstances. The research found that there was no significant difference in the rate at which intervention and control group respondents had resolved their debt problems at the 20-week follow-up. However, the former were significantly more likely to describe their financial position as 'better' than at baseline. There was also evidence that they became more knowledgeable about their financial circumstances, more focused on dealing with priority debt, and more optimistic about their future prospects, relative to control group counterparts. It should be noted however that these findings fell short of statistical significance.

4.41 The measurement of impacts and outcomes that can be attributed to IAG provision, and specifically the mode of delivery of IAG, are crucial to the REA process. However, **the focus within the evidence base is largely on outputs (e.g. numbers of people accessing IAG) or relatively short term outcomes (e.g. welfare benefits accessed) rather than impacts that tend to fall outside of often short term research timescales**.

4.42 The **REA process therefore encompasses those factors which are provided in the evidence base as supporting the achievement of positive outcomes and longer term changes in behaviour**. Given the inconsistencies in the evidence the relative strength of the evidence in scaling and attributing outcomes and impacts to IAG provision is stated in each case.

Effectiveness of IAG Delivery by Client Group

4.43 Drawing on the evidence base, the following presents an analysis of the key characteristics and impact of IAG provision on the following client cohorts:

- General public (mixed profile of service users).

- Older people.

- Young people.

- People with health and social care needs.

4.44 Where there is an absence of evidence linking the provision of IAG to specific client outcomes, the analysis summarises the key characteristics or key catalysts which underpin positive change in the client's circumstances.

General Public

Face-to-face

4.45 Outreach services offering face-to-face support are identified in the evidence base as being **successful in reaching socially and financially excluded people** seeking advice and guidance for the first time. Such clients can benefit from partnership working and the delivery of support services from a variety of locations. Buck et al (2009) evidence this success in the form of a range of positive outcomes for clients, including payment plans, crisis avoidance, averting the loss of a home or utilities disconnection and gaining nearly £1.9million as income for clients in a one-year period. The research also identifies a variety of softer outcomes for clients including reduced stress levels and, importantly, changes in clients' attitudes to advice-seeking. This last point is important as **changing clients' advice seeking behaviour can yield future cost savings as they may be more likely to seek support before reaching crisis point**.

4.46 The value of providing a holistic service delivered by trusted CAB advisers on a face-to-face basis is reiterated by Jones (2009) who brings to light the important role of specialist casework advisors who are skilled at explaining problems to clients and setting out a range of solutions using straightforward language that clients could understand. The benefits of face-to-face support in **facilitating emotional and practical support helps to reassure clients that their problems can be resolved although it can take time to address often multiple problem areas**.

4.47 Jones also makes a case for the continued delivery of face-to-face advice services which are able to **devote adequate time to individuals from outreach and other venues in order to achieve positive service outcomes**. Whilst the report acknowledges the pressure from some funders to restrict the time spent with individual clients in order to achieve 'value for money', Jones argues that this needs to be assessed against the cost benefits associated with increasing clients' self-confidence and coping capabilities.

4.48 Indeed the process of receiving some initial support from an adviser can also prove effective in addressing anxiety and associated mental health difficulties and in turn can **enable and empower clients to take control of their problems and use self-help materials to achieve a more sustainable solution to their problems** (Direct Impact Research Group and Minogue, 2006).

4.49 **Face-to-face contact is important in building trust and enabling the adviser to spend sufficient time to give the clients the level of support and help they need.** Providing an overview of CAB research on mental health and social exclusion, Cullen (2004) emphasises the importance of face-to-face advice which can stop clients' difficulties mounting to a point where they become so stressful they might suffer serious negative health consequences.

Telephone Support

4.50 Delivering a greater proportion of advice by telephone may cause access problems for some clients, for example due to **literacy issues, language barriers or their perceived inability to act on advice given. Telephone channels also reduce the ability of the adviser to pick up on non-verbal cues and are also likely to limit their knowledge of local support services available to clients**.

4.51 Griffith and Burton (2011) highlight the dearth of independent research comparing telephone and face-to-face advice provision. In particular, **the efficiency and effectiveness of telephone-only contact for dealing with on-going complex social welfare law cases remain to be evaluated**.

4.52 Research into users of telephone advice 'hotlines' in the United States cited by Pearson and Davis (2002) found that 21 per cent of callers had not acted on the law advice they had been given, many of them because they had not understood it. The callers reporting the highest level of unfavourable outcomes included those classed as Spanish-speaking, of Hispanic ethnic origin, having no income and having low education levels.

4.53 Balmer et al (2012b) also highlight the lack of evidence on comparative effectiveness of telephone-based over face-to-face advice. Based on analysis of Legal Services Commission administrative data, the research found that whilst cases concluded over the telephone take less time than those conducted face-to-face, this disparity becomes less pronounced once factors such as demographics, matter type and (particularly) stage reached are accounted for. The results demonstrate a clear difference between the outcomes achieved based on mode of advice with far fewer telephone cases proceeding beyond 'First Meeting' whereas clients of face-to-face services had a broader range of outcomes[7].

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[7] It should be noted that the data does not capture differences in the severity or complexity of the problems handled via the telephone versus those handled face-to-face, so this consideration must necessarily be set aside.

Online Support

4.54 The isolated nature of many rural communities generates a number of practical and financial problems for agencies charged with delivering IAG services. McQuaid et al (2003) reflect upon the growing propensity for policy makers to turn to Internet and other ICT-based approaches to deliver services.

4.55 There are, however, concerns linked to access which could impact upon take up amongst the most disadvantaged groups in society. Bottery (2006) highlights calls for IAG services provided by CAB '*to be very personal and relevant*' – especially as over half of the service users consulted were seeking advice about more than one problem. The research describes the most important aspects of face-to-face support services as confidentiality, independence, ease of access, local knowledge and trust – factors which are largely not associated with online support channels.

Facilitating Factors

4.56 The challenge of assessing the impact of stronger partnership working and the use of quality marks on the ability of advice agencies to provide more effective advice has been highlighted in a number of studies – for example The Gilfillan Partnership (2011). Indeed the Advice Services Alliance Conference report (Griffith, 2003) highlights the '***lack of clear evidence on which we can rely in seeking to prove the impact of advice***'. What is clear from the evidence base is that the outcomes and impacts delivered for the client may not be immediately apparent or intended. The report makes reference to a HIV project delivered by Camden CAB that highlighted an unexpected outcome in users' appreciation of the way in which the staff deliver the service, concluding that '***the way in which users are treated is an important part of what people get from the project; eliciting feelings of self-esteem and positive outlook which is reported by users to reduce their stress and improve their physical and mental health.***'

4.57 A number of reports emphasise that to be effective it is **important that advice is tailored specifically to meet the needs of clients**. In their analysis of the provision of energy advice Boardman and Darby (2000) suggest that '*likely reasons for any lack of impact are over-formulaic or perfunctory advice, too much reliance on written information and inadequately trained or experienced advisers*'. Moreover, in their evaluation of the National Financial Capability Project, ECOTEC (2006) highlighted the **importance of focusing on 'life stage' events and to tailoring IAG materials to particular beneficiaries' needs**.

4.58 Arguing a similar point, Sommerlad and Sanderson (2013) express **concerns about the notion of a 'model' client** who is computer literate, with a mobile and is able to understand advice. The report states that this isn't the profile of clients that many advice services recognise. For many clients with multiple problems **advice services need to adopt a holistic view and provide on-going casework to resolve complex and inter-linked issues** and therefore be effective.

'*Face-to-face advice rather than a telephone line or website is necessary because someone with a lot of complex poverty-related issues isn't just an ordinary person without money – they're in a completely different place not only economically and socially but also emotionally. The model of the standard client is someone with reasonable understanding who has problems around the margins of their life, whereas for some of our clients, it's the whole of their lives which is the problem, and they need a high level of advice, and repeat advice*'. (p318)

4.59 In the context of debt advice a number of publications highlight how advice can **increase a client's confidence with managing money and improve their wellbeing**. The research base found an association between service user groups and the type of advice needed whilst recognising that there is no 'one size fits all' approach to advice and support for disadvantaged groups. Gillespie et al (2007) concluded that the following approaches were effective in supporting sustainable change in the situations of service users and increasing their confidence to access advice:

- Targeted approaches that take account of barriers, lack of awareness of rights and the needs of individuals in methods of communication, delivery and location of support.

- Allowing sufficient time for people to make choices and joint work with service user groups or support workers can help people with making informed decisions. Joint working with key workers or support workers can also raise mutual awareness and learning between services.

- Holistic and proactive approaches to advice, particularly for people with mental health problems or learning disabilities; informal approaches that build relationships are effective across groups.

- Leaflets, briefings and other written information that can support clients in making informed decisions, but they need to be accessible for individuals.

4.60 The research base reflects upon the issues that need to be addressed by IAG providers in order to achieve positive outcomes with clients from different cultures. Wigan and Talbot (2006) provide evidence that African-Caribbean clients tend to have a clearer acceptance of their right to make claims on the benefits system understood in terms of the previous contributions they have made through employment and taxation whereas religious and cultural factors may underpin a resistance to making claims in other cultures or groups (also see Barnard and Pettigrew, 2003).

4.61 Moreover, research published by Department for Business, Innovation and Skills (2011c) stresses that **vulnerable groups need more than just access to information but also help in interpreting it**. Williams (2009) reports that people tend to require information and support to access services at particular points in their lives although online channels rarely organise information in a way which recognises this 'life-course approach'.

4.62 Pollard and Britain (2007) found that IAG is generally more effective when experienced as part of a process or journey with **in-depth support effective in helping people recognise and value what they have achieved which in turn increases self-confidence and their propensity to access support again, and at an earlier stage prior to crisis point**.

4.63 Buck et al (2010) highlight the importance of social networks in encouraging and signposting people to advice or in some cases advice been sought direct from family members rather than seeking professional advice (Buck et al. 2008). For people without these networks, the role of others such as health professionals and social workers takes on a crucial importance.

4.64 The REA identified one report which specifically looked at the advice needs of lone parents. Moorhead et al (2004) highlight that one parent families are among the poorest families in Britain with lone parents often facing serious, persistent and worrying difficulties in their daily lives. However, the research states that **lone parents do not seek, or cannot find, the advice that they need and that their problems may last over a long period of time**. The research advocates for a holistic approach, which incorporates the family law context and the social welfare context, to ensure that advice provision meets the needs of lone parents, however they come to be lone parents, whatever the nature of their needs, and whenever the need arises. Relevant key findings from the research include:

- Lone parents have higher advice needs than other family types and their problems are wide ranging and long-standing.

- Sources of help are diverse and lone parents often use a large number. However large numbers of lone parents do not seek any help.

- Different problems give rise to different advice seeking behaviour.

- Many lone parents struggle to find the help they need. Once a source of help has been identified there are a number of further accessibility problems.

- Lone parents liked the accessibility, anonymity and speed of telephone helplines but the Internet is considerably less useful to lone parents than telephone and face-to-face advice.

4.65 The evidence of the effectiveness and key attributes of IAG delivery to the general public highlights issues which will also be of relevance for specific target groups. These include the value of face-to-face support in reaching and empowering socially excluded clients through, for example, outreach provision. The envisaged efficiencies derived from telephone support over the more resource intensive nature of face-to-face support are countered in arguments of effectiveness.

4.66 Specifically, face-to-face channels are strongly linked to the establishment of trusting relationships between advisers and clients, ameliorating barriers including literacy and language and enabling the adviser to empower people to cope better with future problems.

Summary – General Public

- Face-to-face channels are successful in reaching socially and financially excluded people.

- Face-to-face is effective in changing a client's advice seeking behaviour and can yield future cost savings as clients seek support before reaching crisis point.

- Face-to-face approaches which also devote adequate time to individuals in outreach and other venues are effective in achieving positive outcomes.

- Face-to-face channels can empower clients to take control of their problems and use self-help materials to achieve a more sustainable solution to their problems.

- Face-to-face approaches are crucial in developing a trusted relationship with clients.

- Question marks over the effectiveness of telephone channels.

- Practical and financial benefits of online support channels recognised.

- Important to tailor IAG specifically to meet needs of clients.

- Value in adopting a holistic view in providing on-going casework to resolve complex and inter-linked issues.

- Vulnerable groups need more than just access to information but also help in interpreting it.

Older People

4.67 The **wealth of evidence exploring the IAG needs of older people reflects the scale of the task facing the Older Persons' Commissioner in Wales**. It also indicates the increasing need to target resources at this growing cohort of the population in order to overcome their barriers to accessing and implementing IAG and maximise take up of entitlements and support to reduce the risk of social exclusion and poverty.

4.68 Horton (2009) offers 10 themes which underpin good practice in advocacy services which are relevant for IAG more widely.

- Building up trust. Effective citizen advocacy depends on the relationship between advocate and partner developing trust and understanding.

- Advocacy schemes need a scheme co-ordinator who ensures that volunteer advocates are trained, supported and well matched to the vulnerable older people with whom they will be working.

- Effective communication with health and social care professionals so that the role of the advocate is understood and accepted.

- Independence of advocate so that there is no conflict of interest.

- A one-to-one relationship in which the advocate represents their partner alone.

- Allegiance. Loyalty to the older person by the advocate.

- The advocate is unpaid. This links with the principle of avoiding conflicts of interest. The advocate has no obligation to an employer.

- A long-term relationship is seen as advantageous to both older person and advocate so that knowledge and understanding of the older person's needs develop.

- Citizen advocates should be drawn from the diverse backgrounds, ages and experience within a community.

- Training is seen as essential to good practice together with the setting of standards and monitoring of the service.

4.69 The themes provide lessons for policy and practice which should be assessed as part of any review of what works at a local and national level. Ritters and Davis (2008) also stress the role of capacity building and involving older people in service design in terms of IAG provision for older people:

- Involve older people in meaningful ways and ensure their views are fed into decisions on information, advice and advocacy.

- Enable change by building in dedicated officer time so that necessary development work in this area is not neglected.

- Partner with 'not the usual suspects' such as local transport providers to ensure that the whole system is looked at, not just one part in isolation. Continuous dialogue is key to the success of these partnerships.

- Consider what is known already about what older people and carers want and need.

- Establish a common dataset of up-to-date information that older people, carers and staff can access.

- Provide opportunities for frontline staff to learn from each other to support their critical role in giving information and advice to older people.

- Learn from other areas. Many local authority areas are facing similar issues connected with the ageing population.

- Agree on issues to be addressed by listening to older people and linking to opportunities provided by local and national policy.

Face-to-face

4.70 The **value of face-to-face IAG support for older people is reinforced in much of the evidence base**. Older people were also found to value advocacy as a support mechanism with Jones (2004) highlighting the benefits of older people feeling they are not alone when dealing with a problem and being **listened to by an impartial, independent person who is focused on their interests**.

4.71 The evidence base reports **under-developed information and advice services for older disabled people and carers, with particular issues linked to black and ethnic minority communities and lesbian, gay, bisexual and transgender groups** with a lack of awareness and insensitivity amongst some mainstream service providers (and older people) about the needs of people from disadvantaged groups. This issue is reflected in calls for specialist information and advice services for older people as per the Consultation Response by the LGBT Excellence Centre to the IAG Review (Welsh Government, 2013)[8].

Telephone Support

4.72 Whilst the research base highlights the demand for effective telephone-based IAG support, it also acknowledges that **this channel is a cause of frustration for service users and advisers**. Key criticisms include telephone-accessed support services that provide out-of-date information or don't provide an immediate response (e.g. automated lines). Research commissioned by Age UK (2012), looking at older people's experiences of using call centres for advice revealed that most people wanted to speak to a 'real' person as this reduced their stress when discussing sensitive issues.

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[8] Appendix 10

'Adverse experiences can erode the confidence of some individuals in both the organisations involved and also in their own capacity to resolve difficulties or emergencies if contact with a call centre is a failure. Taking one's custom elsewhere is not an option when the service is a statutory one and may not be practical or achievable in relation to private services'. (p.6)

4.73 Quinn et al (2003) also emphasises the importance of telephone advisers speaking clearly, being pleasant and well informed in order to deliver support that can reassure and empower clients.

4.74 More recent research by Age UK (2013b) highlights the importance of telephone advice provided for older people being supported by written confirmation or summaries ideally by letter or email. Online chat, text messages and online information were reported as having far less value.

Online Support

4.75 Online support for older people through websites is seen as a growth area for some IAG providers. However, there remains a degree of contradiction (see Age UK, 2011; Bryant, 2011) and/or a lack of evidence as to the barriers faced by older people to accessing online resources. Bryant (2011) identifies that **whilst an increasing number of older people are taking up ICT, a significant proportion are likely to remain unable to take advantage of new technologies, both now and in the future**. In addition, a recurring theme in the literature is the need and value (in terms of facilitating access and outcomes) to be derived from involving older people in the design, implementation and monitoring of information provision.

4.76 Both these issues have implications for resource allocation given the general direction of travel towards telephone helplines and web-based material. **The requirement for a balanced and/or mixed approach driven by customer service/customer insight is prominent in the evidence base**.

Self-help

4.77 The value of self-help IAG support is most apparent when complementing other, more intensive methods, which are employed to support older clients dealing with complex problems. **The value of self-help provision can often be realised between more intensive support sessions and is useful both in terms of reassuring older clients and reinforcing messages from face-to-face provision**.

4.78 A range of self-help options are identified in the research including radio and television. Although these can be valuable in disseminating information, key messages can easily be missed or may be inaccessible to people who have visual handicaps. Ritters and Davis (2008) reinforce the importance of older people getting self-help material in writing to enable them to refer to information resources when working to resolve their problems.

Facilitating Factors

4.79 The qualities of effective IAG provision for older people are wide ranging and reflect a need to review the degree to which individual services provide the personalised service valued by older people (Dunning, 2005).

> *'Because as soon as I found out they were able to help me, help me to understand better and that my problems could be solved, not worry so much burden on my shoulder that someone helping me. This gives me hope and they are very supportive, anyone who listens to me is so important.'*

> *'The advice and support, it is not just advice. That is a part of it but they give us moral and social help.'*

> *'I think self-confidence and hope, there is hope if we need any help there is someone who can help you and if I know anyone who needs any help I know that [agency name] can.'* (Advice Services Alliance, 2010. p5)

4.80 The **use of peers in providing IAG for older people** is highlighted in a small number of research reports (Kerr and Kerr, 2003). Older people are found to value this form of support with **the life skills of trusted** sources including family, friends, neighbours or a network or club seen as a useful resource (Age Concern, 2009). This does however raise issues linked to the training and funding for advocacy organisations that wish to use peer to peer models in order to meet the needs of older people who often do not want to 'trouble anyone' for help, are reluctant to claim their entitlement or are deterred by past experiences with overly complex advice systems.

4.81 The role of the adviser is seen as crucial to a range of IAG outcomes for older people. These range from a decline in worry as a result of dealing with a friendly, reliable and knowledgeable personal contact to a legitimisation to claim benefit entitlements for their need to claim (Mitton and Hull, 2006) although the labour intensive nature of this work is clear (Age Concern, 2008; Age UK, 2013). **A stand-alone information service is generally less effective than one that also provides advice, because many older people in particular will need support to fully understand and act on the information provided.**

Summary – Older People

- The value of face-to-face IAG support for older people is reinforced in much of the evidence base with older people valuing a personalised approach from a trusted source who is focused on their interests.

- The research highlights the underdeveloped information and advice services for older disabled people and carers from BME and/or lesbian, gay, bisexual and transgender groups.

- Telephone support channels are a cause of frustration for service users and advisers.

- A significant proportion of older people are likely to remain unable to take advantage of new technologies for the foreseeable future.

- The requirement for a balanced and/or mixed approach driven by customer service/customer insight is prominent in the evidence base.

- The value of self-help provision for older people can often be realised between more intensive support sessions.

- Older people value the role of peers in providing IAG support.

- Many older people will need support to fully understand and act on information, highlighting the role of the adviser in achieving positive outcomes.

Young People

4.82 Young people's advice-seeking experiences differ markedly from those of the general population with their attempts to obtain advice described by Kenrick (2009a: p.vi) as '*relatively haphazard and unsuccessful, resulting in poor outcomes*'. **Young people are less likely than the general population to obtain advice when they need it and amongst those that do, rarely do so from a recognised advice provider**. Young people are more likely than other age groups to take no action to resolve their problems or delay seeking help until their need is acute and more difficult to alleviate. As such, **young people who try but fail to get advice or who deal with their problems alone are far less likely to meet their objectives** and often feel that advice would have improved the outcome.

4.83 Some young people lack the key emotional and practical skills necessary for accessing advice and resolving their problems. Many young people have difficulties identifying that they have a problem that requires advice and knowing when to get help. Their ability to resolve their problems can be further hampered by poor verbal communication skills, difficulties dealing with the emotional impact that their problems have on their lives, a lack of confidence and lack of persistence.

Face-to-face

4.84 The overwhelming majority of young people, and particularly younger young people, approach people or organisations known to them. This reliance on familiarity leads many young people to approach non-expert sources of help, such as family and friends, in preference to professional advice agencies. Teachers and youth workers tend to be cited by young people as the most effective and approachable problem-solving adults after parents and carers. Youth workers are an important source of help, particularly for the more disadvantaged and disaffected young people.

4.85 Kane et al (2003) explore the provision of 'sensitive' information to young people in the setting of sexual health clinics. The research produced transferable learning based on consultation with young people that passive acceptance of information should not be taken to indicate tacit satisfaction and recommends that written information should be used in conjunction with face-to-face support. This has the advantage of enabling issues to be considered that do arise or are found difficult to absorb' in face-to-face consultations.

4.86 There is no doubt that the Internet and other new technologies offer opportunities for improving young people's access to advice. Overall, it is clear that the greater the range of modes of access available, the more accessible a given service will be to young people. However, **despite the proliferation of new technology amongst young people, a large majority choose to access advice and support for their social welfare problems either in person or by telephone.**

4.87 The available evidence raises a large number of issues for service providers with young people far more likely to access advice face-to-face than other age groups – a preference relating to trust and disadvantage.

Telephone Support

4.88 The evidence suggests that **remote mediums, such as email and telephone, are not as conducive to building the trust with an adviser which is necessary for young people to open up about their social welfare problems**. It is highly significant that disadvantaged young people, who experience the more severe problems, are considerably less likely to have access to telephones and the Internet than their better-off peers. The evidence base expresses concern that many young people cannot afford the cost of a potentially lengthy phone call. Those least likely to benefit from telephone advice services include young men and those with lower levels of education, language difficulties or lower incomes.

4.89 Whilst telephone advice is not appropriate for all young people, the telephone remains the most popular method of contacting advice services remotely. It is particularly valuable for those who face obstacles to accessing advice by other means, (e.g. due to distance, disability or mobility problems). However, it is worth noting that young people tend to say they would prefer face-to-face advice for more complex problems and that **successful helplines for young people tend to focus on sensitive personal, emotional and health issues rather than legal or practical issues**.

Online Support

4.90 Use of the Internet for seeking advice and information has increased rapidly over the last few years, but remains a minority activity. **The extent to which young people currently use online advice and information services remains limited although a small number of specialist services for young people are extremely successful.**

4.91 There are likely to be rapid developments in service delivery methods over the coming years as technology develops with social networking potentially offering new opportunities for advice providers. Currently, young people tend to reject Internet chat rooms as reliable sources of advice. However, tightly moderated message boards, delivered alongside self-help material, could become an effective way of providing peer support (Kenrick, 2009a).

Facilitating Factors

4.92 By resolving the problems that act as barriers to the achievement of stability, happiness, self-development and resilience, effective advice may often facilitate longer-term changes in young people's lives and increase the chances of long-term positive life outcomes. **There is little evidence currently available to prove that advice has a substantial long-term impact on individuals**. More research is needed into the longer-term impact of advice and the economic benefits of youth advice services. However, there are significant methodological challenges in conducting such studies (Kenrick, 2011).

4.93 Kenrick (2011) outlines a range of factors which can facilitate good outcomes for young people. Simply having someone to talk to can often be beneficial to young people. However, **an adviser who possesses the skills to engage with troubled young people, the expertise and capacity to provide technically proficient active assistance and the tenacity to pursue a case to a successful resolution is more likely to produce good results that can change clients' lives**.

4.94 The research also identifies a number of advice service characteristics and other factors that appear to be linked to the achievement of good outcomes, namely:

- The degree of trust that the young person has in the service.

- The quality of the one to one relationship between client and adviser.

- The extent to which the service is age appropriate, young person-focused and holistic.

- The degree of independence of the service.

- The availability of face-to-face advice.

- The depth and quality of the advice intervention.

- The timing of the intervention.

- Whether or not the problem was successfully resolved.

- The level of disadvantage suffered by the client.

Summary – Young People

- Young people's advice-seeking experiences differ markedly from those of the general population, rarely accessing IAG from a recognised advice provider.

- Young people who try but fail to get advice or who deal with their problems alone are far less likely to meet their objectives and often feel that advice would have improved the outcome.

- Passive acceptance of information should not be taken to indicate tacit satisfaction with written information valuable in supporting face-to-face support.

- Despite the proliferation of new technology amongst young people, a large majority choose to access advice and support for their social welfare problems either in person or by telephone.

- The evidence suggests that remote mediums, such as email and telephone, are not as conducive to building the trust with an adviser which is necessary for young people to open up about their social welfare problems.

- Successful helplines for young people tend to focus on sensitive personal, emotional and health issues rather than legal or practical issues.

- The extent to which young people currently use online advice and information services remains limited although a small number of specialist services for young people are extremely successful.

- There is little evidence currently available to prove that advice has a substantial long-term impact on young people.

- An adviser who possesses the skills to engage with troubled young people and the tenacity to pursue a case is more likely to produce positive outcomes.

People with Health and Social Care Needs

4.95 In their response to the Welsh Government's Advice Services Review (Welsh Government, 2013) Macmillan confirm that people affected by cancer often struggle to access generic benefits advice provision. Whilst there are access issues linked to the symptoms of cancer and side effects of treatment, there are also skills gaps amongst advisers linked to a **lack of understanding of cancer and its treatments that affects the quality of advice provided** in terms of missed opportunities to access financial help.

Face-to-face

4.96 Clients consulted as part of the evaluation (Williamson Consulting, 2009) of the Macmillan Welfare Advice Project based in Altnagelvin Hospital highlight the benefits of receiving advice from this outreach service. The outcomes centred on financial rewards from obtaining Macmillan grants and/or benefits entitlement which could be used to pay for expenses including travel, parking, heating and clothes etc. However, **the knowledge that these financial issues had been taken care of was found to also help to reduce stress**. Consultation revealed a large degree of additionality associated with project services. There are however cost issues with paying for the outreach service where cancer patients may not in fact attend due to their illness.

4.97 A report by the Patient Information Forum (2013) to support the investment case in high quality health information for patients and the public, found that **information is best understood as part of a broader process of communication with health professionals**. The research finds that the impact of consumer health information can be maximised by:

- Tailoring information to reflect an individual's particular needs and circumstances.

- High-quality information is essential to empowering users to make choices and take control of their health and wellbeing.

- Information must be converted into knowledge and understanding through effective communication with patients and facilitate behaviour change.

- Written information aids recall and understanding to supplement verbal communication.

- Information and support needs to change over time in relation to the 'patient journey'.

- Simpler materials, visual aids and alternative formats are needed to increase access and application of health information.

- Web-based solutions are not the only answer given the digital divide and preferences for hard copy formats.

- Patients need specialist support to help them access, understand and act upon reliable health information given the huge volume, complexity and poor quality of much health information.

- A collaborative, partnership-based approach works best.

- Information alone will only have a limited effect and needs to be supplemented by active encouragement, education and support – especially when targeting those with low levels of health literacy and engagement.

- Significant behaviour change will only be achieved by information in conjunction with active educational support to maintain and improve their own health.

4.98 An assessment of a welfare rights project based in an in-patient hospital unit highlights the short term impacts of a specialist post in terms of lessening the burden on nursing staff in the provision of IAG whilst accessing additional benefits or allowances for nearly 50% of clients. The project reiterates the wider impacts of welfare benefits on clients and their families in terms of reducing stress levels. However, research from Direct Impact Research Group and Minogue (2006) also highlights that **welfare benefit problems can take time to resolve and the project's existence in in-patient units did not fully meet the needs of patients returning to the community or those being treated in the community**.

4.99 Consistent with learning from the provision of advice to other vulnerable groups, research by Cullen (2004) confirms that **people with mental health problems need face-to-face advice that allows time to build a trusting relationship with the adviser**. The impact of early intervention enables providers to give clients the level of support and help they need to prevent their difficulties mounting to a point where they become so stressful they might cause a return to hospital, delay discharge or approach to a debt management company. CAB projects have developed a range of core features which break down barriers of distrust and overcome people's lack of confidence including:

- Face-to-face contact with clients to build trust.

- Continuity of adviser contact to retain trust and confidence.

- Holistic advice and support tackling many problems.

- Long and repeated interviews.

- Good access in terms of both location but also accessibility over the phone through, for example, a 24 hour telephone line.

- Workers with experience of benefit issues and mental health problems to advise and represent their clients.

Facilitating Factors

4.100 Information is necessary to enable control and to inform choice (Williams, 2009). Personalised information, explanation, advice and often advocacy are essential if resultant support and services are to be personalised. **Information needs to support the key decision factors of availability, affordability, suitability and quality and safety**.

4.101 Ipsos MORI's (2013) analysis of the take-up of professional and informal advice by disabled people reveals little variation by age, gender or household composition in terms of those seeking advice. However, people in employment (42%) were more likely to receive professional advice than those not in employment (28%) whilst those in a good financial situation are more likely to have received professional advice (37%) than those in a poor financial situation (27%). **The research therefore has implications for ensuring access to IAG for unemployed disabled people or those in a poor financial situation**.

Summary – People with Health and Social Care Needs

- There are skills gaps amongst advisers which contribute to a lack of understanding and unfulfilled outcomes for cancer patients.

- The knowledge that financial issues can be taken care of can have additional impacts linked to reduced stress levels.

- Information is best understood by those with health and social care needs as part of a broader process of communication with health professionals.

- People with mental health problems need face-to-face advice that allows time to build a trusting relationship with the adviser.

- Information needs to support the key decision factors of availability, affordability, suitability and quality and safety.

- The research highlights a need to ensure that unemployed disabled people or those in a poor financial position have access to IAG support.

5 Gaps in the Evidence Base

5.1 As outlined earlier in the report, this REA review acknowledges the absence of robust, quality evidence which refers to the effectiveness of IAG and specifically delivery methods that are effective in achieving positive outcomes for and changes in behaviours of clients.

5.2 The major omission from the evidence base is a critical mass of material outlining the outcomes and impacts of IAG support by delivery method. The longer term benefits of IAG provision can take many years to fully emerge, be related to a lengthy, multi-method IAG journey which is hard to disaggregate and often falls outside the scope of time limited evaluations that do not incorporate a longitudinal element.

5.3 Much of the research base fails to provide a robust analysis of the causal link or attribution between IAG and/or IAG delivery methods and the eventual outcomes which will be integral to analysis of effectiveness. This should incorporate factors such as the counterfactual position (i.e. to what degree – how quickly, to the same standard, to the same scale - would the outcome and impacts be achieved in the absence of the IAG support received?).

5.4 The evidence base does not incorporate a wealth of studies with learning from the delivery of IAG from outside the UK although a longer study period enabling a comprehensive call for evidence from outside in Europe and the USA will have yielded better results.

5.5 Acknowledging the limitations of the REA process, the gaps in evidence are reflected in the following calls for future research:

- There is a need for greater research around what works, and what does not work rather than small scale qualitative evidence that is not able to contribute to the evidence base around effectiveness.

- More research is needed into the longer-term impact of advice through longitudinal assessments and/or studies revisiting clients accessing services in the past in order to analyse impact.

- The efficiency and effectiveness of telephone-only contact for dealing with on-going complex problems (e.g. social welfare law cases) remains to be evaluated.

- Research to assess the supply-led provision of face-to-face support (i.e. in relation to debt advice accessed at crisis point) could inform the allocation of resources to less intensive channels without jeopardising outcomes.

- There is a need to understand what types of issues can be addressed using the telephone or online channels rather than face-to-face contact without negatively impacting upon outcomes.

- Research to update the evidence base as to the extent to which barriers remain to accessing and using online resources amongst key groups including older people and the implications for accessing a range of self-help support.

- Scoping of how the expected rapid developments in ICT resources can be tailored to the IAG needs of different clients.

- There is a current gap in the evidence base of the impact and effectiveness of more innovative approaches to facilitating access to online information including video-chats, self-help interactive tools and smart phone apps.

- Specific research to assess the effectiveness of 'client call back' features within telephone support services could inform provision for key groups including older people and those for whom cost represents a barrier to access and use.

- There is a current lack of information and advice services for older disabled people and carers, people from black and ethnic minority communities and lesbian, gay, bisexual and transgender groups.

- More research is needed into the longer-term impact of advice and the economic benefits of youth advice services.

6   Conclusion

6.1   This evidence review has attempted to assess the effectiveness of the different delivery mechanisms that providers of information, advice and guidance (IAG) offer to members of the public. It has maintained a focus on evidence relating to delivery mechanisms that are recognised as ensuring beneficial outcomes for clients and specifically those aspects evidenced as instrumental to prompting positive changes in the behaviours of clients.

6.2   However, the REA process has encountered a number of challenges, most notably the absence of a robust evidence base which met the inclusion and exclusion criteria agreed for the research. Whilst the majority of the studies fall short of evidencing a causal link between IAG delivery and outcomes for clients, there are a number of delivery characteristics which are recognised as crucial to the achievement of successful outcomes. These can provide guidance to policy makers and delivery agencies on approaches which are able to alleviate barriers to accessing IAG or hasten the identification of the root causes and therefore effective solutions to the often multifaceted problems faced by many clients.

Key aspects of IAG delivery

6.3   The distinction between information and the added value offered by advice, guidance and advocacy highlights the importance of the role of the adviser in coordinating the relative values and benefits to be gained from each element of the IAG journey as part of a trusted relationship with the client. Indeed, the combination of different delivery methods, exploiting technology and convenience, is recognised as providing the most effective package of support to meet the IAG needs of clients.

6.4 Face-to-face support is acknowledged as the predominant method of IAG delivery from which the most substantive outcomes can be achieved and especially when dealing with clients with clusters of problems. However, research has shown that there are occasions when clients either do not want a face-to-face discussion, or have no preference in delivery method and simply search for help from the first available organisation (particularly for clients at crisis point). There are clear lessons for the allocation of resources to ensure that face-to-face support is prioritised to those clients and cases which require the level of support offered by this route although more research is required to match service provision to advice seeking behaviour.

6.5 The REA has highlighted the challenges faced in rolling out a larger proportion of IAG delivery through telephone services – both advice lines and initial triage services that look to signpost clients to services which match their problem topic and complexity. There are well stated barriers to accessing and using telephone support including language, cost and distrust. In addition, the adviser has the disadvantage of not seeing non-verbal cues or environmental factors (i.e. home conditions on a home visit) which could inform the advice and guidance delivered.

6.6 There is also evidence to suggest that the outcomes associated with telephone support are less effective when compared to face-to-face and could also be more expensive in the longer term as problems are not tackled in the most appropriate way and/or clients are not empowered to try to address future problems earlier and on a self-help basis.

6.7 There are similar access and impact issues associated with online support and telephone support, although the growing use and advancement of the Internet provides examples of good practice that can be applied to a range of problems and clients.

What does success look like?

6.8 The absence of consistent standards or frameworks, against which providers of IAG and funders can assess the quality of the IAG provided and attribute the service to the achievement of outcomes and impacts has presented challenges for the REA process. There is a lack of consistent terminology and clear definitions of what a beneficial outcome actually represents for different clients and problems. The REA has however, identified a range of factors linked to the delivery and content of IAG provision which can improve advice quality.

6.9 It is also important to identify false impressions of the effectiveness of IAG provision in delivering positive outcomes and impacts for clients. Whilst advice may deliver valuable short term relief for the client (the 'phew effect') and associated client reported satisfaction levels, this does not provide a robust proxy for longer-term effectiveness in addressing the client's problems or influencing behaviours. Moreover, clients' perceptions of quality may not be the same as an IAG professional. **Crucially, the outcomes to be derived from IAG will be linked to the quality of the advice received - 'good advice gives good results' and the client's ability to take action.**

6.10 IAG success can also be observed in the form of more sustainable outcomes including the client feeling empowered as a result of the IAG support received and subsequently having the confidence to access self-help channels to address future problems. Advice providers can also help to shape the success of IAG provision by effectively reducing the instances of 'failure demand' linked to policy reform.

6.11 Assessments of outcomes and impacts should also incorporate analysis of the additionality offered by the service which cannot always be easily identified if the IAG is part of a longer journey characterised by numerous providers and delivery methods. The focus of many studies identified for the REA is on outputs (e.g. numbers of people accessing IAG) or relatively short term outcomes (e.g. welfare benefits accessed) rather than impacts.

Effectiveness of IAG by client group

6.12 The review has identified a range of evidence which relates to aspects of delivery mechanisms that are recognised as helping to meet the IAG needs of older people, young people, people with health and social care needs and the general public more widely. There are however very few examples of research material which categorically attribute delivery mechanisms to the achievement of positive outcomes for specific client groups. Examples include:

- The use of outreach provision and face-to-face support in order to provide the emotional and practical support required by clients with complex problems as part of a trusted relationship.

- Empowering clients to take control of their problems (earlier) with the support of self-help materials following initial interventions.

- Tailoring IAG to the needs of the client.

- Recognising the journey within IAG provision which encompasses a range of delivery mechanisms overtime.

- Involving clients in the design of IAG support.

- Recognising the importance of face-to-face support amongst older people including the role of peers who can utilise both contacts and life skills.

- Acknowledging the need for support amongst older people to fully understand and act upon information.

- The preferences for accessing IAG amongst younger people which are likely to incorporate people and organisations that are familiar and utilise face-to-face or telephone methods.

- There are a range of secondary health outcomes (e.g. reduced anxiety) that can be achieved amongst people with health and social care needs linked to other problems – most commonly amongst the evidence gathered being financial or welfare issues linked to cancer.

Gaps in the Evidence – Future Recommendations

6.13 There are a number of gaps in the evidence base which have restricted the scale of analysis and reporting possible in this report. This does however stress the importance gathering more robust evidence on the longer term outcomes and impacts of IAG support in order to assist in the process of efficiently allocating resources to meet the needs of distinct client cohorts.

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8   Appendix 1 – Rapid Evidence Assessment Approach

The Rapid Evidence Assessment (REA) approach provides an overview of existing research on a (constrained) topic and a synthesis of the evidence provided by these studies to answer the REA question.

The REA provides a balanced assessment of what is already known about a policy or practice issue, by using systematic review methods to search and critically appraise existing research. The REA aims to be rigorous and explicit in method, and thus systematic, but makes concessions to the breadth or depth of the process by limiting particular aspects of the systematic review process.

The key steps to undertaking the evidence review are provided below.

Steps to undertaking a Rapid Evidence Assessment

1. • Formulate the REA questions
2. • Design the Conceptual Framework
3. • Set inclusion and exclusion criteria
4. • Devise search strategy
5. • Begin searching
6. • Screening
7. • Quality assessment
8. • Full data extraction
9. • Synthesis of findings

Formulate the REA questions	This leads the direction of the review and therefore conclusions that follow. It is important to make clear any assumptions associated with for example, the conceptual framework for the review. It is important that any REA question: - Drives the process. - Is a statement that can be investigated not a subject area of interest. - Is clear and answerable. - Should need an answer and be worth asking. Two main types of questions used: 1. What works (impact)? 2. What do you need to make it work? (Non-impact, e.g. what do people need or want, attitudes, what do people think? etc.)
Conceptual framework?	A conceptual framework is a type of intermediate theory that can connect to all aspects of an inquiry. In the context of this REA the framework clarified the parameters of the evidence review, introduced the key concepts (e.g. effectiveness of different delivery methods, types and levels of service), explained the definitions used and highlighted any underlying assumptions associated with the research. The production of the framework assisted the research team in clarifying the REA parameters when engaging with key organisations and individuals that may be able to provide relevant secondary source data.
Set inclusion and exclusion criteria	The process of setting inclusion and exclusion criteria was included in the development of the conceptual framework and helped to guide the development of the search strategy for the REA. In the context of this research the criteria included the following: - *Geographical parameters (e.g. UK only, international).* - *Date of publication (e.g. 10 years).* - *Subsections of service types.* - *Scale of service / delivery organisation.* - *Definition of client types (e.g. relative disadvantage, income, education).* - *Language.*
Devise search strategy	The search strategy is governed by the inclusion and exclusion criteria and designed against the following areas: ***Identification of key organisations and networks*** Based on our knowledge of the IAG sector and the guidance and support of the Welsh Government, key organisations and networks were identified that could be approached as part of a '***call for evidence'***. Whilst the short study period did not allow for an extensive call for evidence (i.e. there is insufficient time for multiple reminders), this approach offered **sufficient added value in helping to shape the online search undertaken by the study team by identifying practical examples of good practice**. We approached each organisation/network through a standardised email to seek relevant research material and evidence that may not be

	publicly available (i.e. grey literature) or historical reports/publications which are no longer held on organisation websites.
	Identification of key publications
	In addition to the publications provided as part of the 'call for evidence' our team also searched key academic, government and sector publications (e.g. peer reviewed journal articles, government research) in order to identify relevant content. The conceptual framework helped to focus the search of the key publications/documents which would be identified using an appropriate online bibliographic service, Internet search engines and reference lists.
	Example academic journals and information management systems which were searched and reviewed included:
	• *Applied Social Sciences Index and Abstracts (ASSIA).*
	• *British Library Public Catalogue.*
	• *Cochrane Library.*
	• *Google Scholar.*
	• *Ingenta Connect.*
	• *Social Care Online.*
	• *Taylor & Francis Online.*
	• *Wiley Online Library.*
Begin searching	Using pre-determined databases and websites, and contacts begin searching using search terms and combinations. Articles identified in this initial search are recorded in a bespoke database. Included articles based on inclusion and exclusion criteria.
Screening (abstract)	All identified and received material was screened by a member of the research team in order to compare against the agreed inclusion and exclusion criteria. All received material was logged in a bespoke REA database which recorded whether the material had been accepted to the next stage of the review or, if rejected, the reason for the exclusion.
	The collation of the material within a database enabled our team to produce a robust bibliography as part of the process of providing the narrative report. The database is available for the Welsh Government to use as a future resource and is designed to enable users to search against key words or filter the publications using agreed data fields.
	The database fields are provided below:
	• *Document Number.*
	• *Title.*
	• *Author.*
	• *Publishers.*
	• *Year.*
	• *Month.*
	• *Source Type.*
	• *Geographical Scope.*
	• *Research Type.*
	• *Methodological Summary.*
	• *Content Summary.*
	• *Web Link URL.*

	• *Downloaded/available electronically (Y/N).*
	• *Entry made by.*
	• *Included (Y) or Excluded (N).*
	• *Reason for Exclusion.*
	• *Service Provider.*
	• *Type of Service.*
	• *Level of Service.*
	• *Client Group.*
Quality assessment	Once the research team screened the abstracts and selected the material considered in more detail, each publication was reviewed in order to draw out the evidence that will contribute to answering the agreed research question(s). A secondary screening process would be undertaken to exclude material that, following in-depth review, is considered too weak to be included.
	Where our research team considers that the report has some value but is methodologically weak, it would be included with appropriate caveats.
Full data extraction	Once a study has been assessed for relevance and quality, full data extraction for inclusion in the narrative report can take place.
Synthesis of findings	This will vary depending on research questions but requires consideration of all evidence extracted using narrative or thematic synthesis.
	Consideration needs to be given to integrating qualitative and quantitative studies into the evidence synthesis to 'tell the story' from the findings.

9   Appendix 2 – Conceptual Framework

Key Concepts

Definitions of the key concepts likely to be used in the REA process are outlined below. The key concept definitions aim to mirror those utilised in the Welsh Government's Advice Services Review (Welsh Government 2013).

Types of Service Provision

Generalist Advice - The IAG service provided is deemed to be 'Generalist Advice' when it does not meet the definition of Specialist Advice and either the adviser makes an emergency intervention for the client at the first contact; or the adviser carries out all of the following:

- Conducts one or more one-to-one interviews with the client, collecting appropriate information from the client as a basis for advice.

- Establishes client expectations and explaining what the Service can and cannot be provided.

- Furthers the diagnosis made at triage about the issue(s) presented by the client and identifying other related issues.

- Explains relevant options, consequences and limitations applicable to the particular circumstances of that client.

- Recommends a course of action to the client, giving an objective assessment of the likely most successful remedy if one is available.

- Provides information relevant to the person and their particular situation, including any entitlement calculations.

A generalist advice session may also involve the adviser doing the following:

- Assisting the client through: completing forms, making telephone calls, drafting and writing letters, negotiating on behalf of the client.

- Referring the client to a caseworker.

- Making referrals to other agencies where the service cannot provide the necessary advice.

Social Welfare Law - Social Welfare Law refers to those categories of law which govern entitlement to state benefits and housing; the management of personal and business debt; an employee's rights at work and access to redress for unfair treatment; and access to appropriate care and support for people with particular health problems.

Within the not-for-profit advice sector, advice is often given to members of the public on the following types or 'categories' of social welfare law:

- Welfare benefit.

- Debt.

- Housing.

- Employment.

- Community care.

Some advice services also give advice in issues such as education, family, consumer and general contract. Immigration and asylum law may also be considered as social welfare law.

Specialist debt advice – linked to financial difficulties resulting from a range of reasons including financial shocks, low incomes, poor money management and creditor behaviour.

Specialist welfare benefits advice – linked to the understanding, access and entitlement to welfare benefits.

Specialist housing advice – including issues linked to homelessness legislation, housing standards, energy efficiency, and adaptations and in relation to tenancy issues.

Specialist employment advice – includes individuals' rights at work including leave, flexible working and problems at work and health and safety issues. Within the wider scope of employment advice also includes support for those seeking employment or facing redundancy.

Specialist consumer advice – relates to the purchase or use of goods and services, and can range from information and advice on financial services and products, to considering the impact of rising fuel costs on people living in poverty, through to miss-selling and aggressive sales tactics.

Specialist discrimination advice - Discrimination advice relates to equality legislation and ensuring those within protected characteristic groups are not discriminated against within society, as well as ensuring broader coverage regarding the human rights convention.

Protected Characteristics

Age - Where this is referred to, it refers to a person belonging to a particular age or range of ages.

Disability - A person has a disability if s/he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.

Gender reassignment - The process of transitioning from one gender to another.

Marriage and civil partnership - Marriage is defined as a 'union between a man and a woman'. Same-sex couples can have their relationships legally recognised as 'civil partnerships'. Civil partners must be treated the same as married couples on a wide range of legal matters.

Pregnancy and maternity - Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

Race - Refers to the protected characteristic of race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.

Religion and belief - Religion has the meaning usually given to it but belief includes religious and philosophical beliefs including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition.

Sex - A man or a woman.

Sexual orientation - Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.

Levels of Service Provision

Low level provision - Information services (e.g. signposting, and providing information for the client to pursue such as leaflets or verbal information).

Medium level provision - Advice services (e.g. benefit eligibility check, help with form filling, contacting someone on behalf of the client, repayment arrangements, advice on rights).

High level provision - Specialist advice (e.g. due to a client's multiple and complex needs or in-depth pieces of work, specialist legal knowledge is required to resolve the issue).

Specialist Advice - Services where the adviser or services as a whole undertakes advice and casework at a level where very detailed knowledge of the law and case law is required. Usually, this means it is delivered by advisers who have the necessary levels of knowledge and expertise to undertake representation for clients through the court or tribunal. It may include:

Representation and litigation: Acting for and representing a client at court and tribunal hearings: e.g. preparing and presenting written and oral submissions at hearings at Employment Tribunals, Social Security Appeal Tribunals, County Court, High Court.

An application to a higher court or tribunal (for example, for judicial review), and instructing experts – such as barristers – for representation at hearings at the High Court, Court of Appeal, Employment Appeal Tribunal.

Negotiation with the other side to a dispute or with relevant third parties: e.g. negotiation with the employer and Acas in an employment matter; with a creditor in a complex debt matter.

Miscellaneous

Advice Services - services that diagnose the client's legal problem and any related legal matters; identify relevant legislation and decide how it applies to a client's particular circumstances, including identifying the implications and consequences of such action and grounds for taking action; providing information on matters relevant to the problem, such as advising on next steps; and identify dates by which action must be taken in order to secure a client's rights.

Advice with Casework - services that include all the elements of an advice service previously listed, and also involves taking action on behalf of the client to move the case on. It could include negotiating on behalf of the client with third parties on the telephone, by letter or face-to-face. It will involve the advice provider taking responsibility for follow-up work.

Advocacy - used within the advice sector to describe a level of service which the advice agency provides for its clients: i.e. negotiation with third parties and representation at tribunal and court proceedings. Agencies providing advice may often describe their activities as *"advocacy"* where they are supporting a client to access justice through taking action on their behalf in line with the definitions of 'advice', 'specialist advice' or 'specialist casework', e.g. representing a client at court or tribunal hearings.

Beneficial outcome – the positive changes, benefits, learning or other effects that happen as a result of the delivery of information, advice and guidance.

Clients - A customer or patron of a service or organisation, generally where the service provider is professional and is in a position of trust and confidence.

Direct discrimination - Less favourable treatment of a person compared with another person because of a protected characteristic. **Protected characteristics** are the grounds upon which discrimination is unlawful. The characteristics are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

Discriminating directly or indirectly - Discrimination because of a person's protected characteristic (direct); or discrimination that occurs when a provision, criteria or practice is applied that creates disproportionate disadvantage for a person with a protected characteristic as compared to those who do not share that characteristic (indirect).

Independent advice - An advice provider delivers independent advice where it is able to act fully independently in the client's sole interest.

Information Services - Services that give clients the information they need, for them to know and do more about their situation. It can include information about rights, policies and practices; and about national and local services and agencies. Responsibility for taking any further action rests with the client.

Justiciable problems - problems or issues that people experience that may have a legal remedy.

Legal advice - Within the not-for-profit sector, advice on matters of social welfare law is often given by advisers, paid or voluntary. These are not legally qualified people and may not consider that they are giving "legal" advice simply because they do not have detailed knowledge of, or training in, social welfare law or case law. However, any advice which involves interpreting how the law applies to a client's particular problem or set of circumstances *is* legal advice.

Not-for-profit advice sector - A not-for-profit organisation does not earn profits for its owners. All of the money earned by or donated to a not-for-profit organisation is used in pursuing its objectives. The majority of not-for-profit advice providers are community based charities, sometimes focusing solely on advice provision, but often providing an array of services of which advice is a key part.

Assumptions

The following underlying assumptions underpin the REA process.

- It will be possible to distinguish between the impact of delivery of information, advice and guidance and other activities when evidencing the impacts and outcomes for participants.

- The delivery of information, advice and guidance will be clearly defined.

- It will be possible to distinguish the quality of the research evidence.

10 Appendix 3 – Search Statistics

The scale of the screening process undertaken by the study team is highlighted by the analysis in Table A3.1 below which presents the initial, 'top level' search results based on the advice service areas under scrutiny. The search strategy was subsequently adapted with multiple search criteria required in order to focus down on the research questions (i.e. effective citizen's advice or impact of welfare benefits advice) although this was hindered to a degree through the general absence of delivery channels as key words, requiring time consuming full text searches.

Table A3.1 – Search Statistics

Search terms Database	Debt Advice	Welfare Benefits Advice	Housing Advice	Employment Advice	Community Care Advice	Citizen's Advice	Consumer Advice	Discrimination Advice
British Library Public Catalogue	4	1	22	16	1	194	6	0
Google Scholar	112,000	63,000	490,000	128,000	357,000	183,000	129,000	111,000
Ingenta Connect	37	33	176	511	272	63	404	72
Online Information Review	1	2	3	6	13	8	33	3
Taylor & Francis Online	15,082	20,987	22,143	43,945	49,616	37,692	29,807	18,823
Third Sector Knowledge Portal	4	0	10	2	0	10	2	0
Wiley Online Library	10,633	16,078	47,868	25,132	49,500	19,506	24,499	14,948