



scottishdevelopmentcentre
for mental health

Penumbra Youth Project Fife: Evaluation and Review

Final Report

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The Scottish Development Centre for Mental Health

The Scottish Development Centre (SDC) is an independent, not-for-profit organisation that aims to achieve better mental health and well-being for people in Scotland. We believe that everyone's mental health is important and that good mental health is everyone's business.

We work all over Scotland for and with all kinds of organisations. We also have good networks outside Scotland. Our clients and partners include voluntary organisations, businesses, health boards, local authorities, national bodies and networks. This breadth and scope means that SDC is ideally placed to bring a vision of the 'bigger picture' of mental health to inform everything we do.

We have an excellent record in seeking people's views about mental health and what affects mental health. We have experience in working with the general public, including children and young people as well as with those who have experience of mental health problems, to help people's voices be heard clearly and promote their participation in decision-making.

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CHAPTER ONE: INTRODUCTION

1.1 Penumbra Youth Project Fife

The Penumbra Youth Project in Fife (PYPF) is a community based and voluntary sector Project which provides support, advice and early/crisis intervention to vulnerable young people aged 12-21. It is linked to mainstream mental health services and funded through the Changing Children's Services Fund.

Project Aims

The Penumbra Youth Project has six aims:

- To provide recovery focused mental health and well-being services that support young people in transition, who may be experiencing complex difficulties
- To provide advice and support on a range of issues including mental illness, stress, isolation, suicidal and self-harming feelings or actions, family breakdown, homelessness, anxiety, abuse and other issues
- To improve resilience and coping skills amongst vulnerable young people to enable them to maintain mental well-being, prevent further mental illness and achieve successful independent living
- To reduce referral to specialist services by encouraging young people to develop the skills and confidence to deal with the difficulties they experience in their lives, thereby reducing stigma and easing the pressure on other services
- To continue to work with young people themselves to identify problems they are experiencing first hand, their views on services and what they feel would better meet their needs
- To support young people's mental health and well-being indirectly through continued awareness raising and promotion of mental health, and through offering informal support/advice to carers and professionals

The Project Manager is supported by an Assistant Project Manager, two Project Workers, two Youth Workers and an Administrator. The staff provide a wide range of interventions for children and young people aged between 12 and 21, living in Fife including:

- Person centred, recovery and solution focused one to one support at a range of locations
- Outreach support and Project promotion delivered on location in partnership with organisations that support young people throughout Fife
- Group work and workshops to assist young people to develop positive coping strategies

Additional services provided to the 16-21 age group include:

- Drop in services in Kirkcaldy
- Creative work such as writing, poetry, arts and crafts and animation
- Outdoor activities such as football and short term outdoor programmes

Wider policy context

The Project is relevant to a number of national policies which identify improving the mental health and well being of young people as a key priority:

- National Programme for Improving Mental Health and Well being
- Children and Young People's Mental Health: a Framework for Promotion, Prevention and Care
- Choose Life a National Strategy and Action Plan to Prevent Suicide

Locally, the Project is linked in to a number of strategic plans:

- Children's Services Plan 2005-2008
- A Healthier Future for Fife Joint Health Improvement Plan
- A Stronger Future for Fife – Fife's Community Plan (improving Health and Well being in Fife, Working Together to Improve Services

The Project 's aims reflect an intention to support the achievement of the broad objectives of local and national policies and strategies including:

- Raising awareness and promoting mental health and well being
- Eliminating stigma and discrimination
- Preventing suicide
- Promoting and supporting recovery
- Preventing mental health difficulties for vulnerable groups such as looked after children, children of homeless families, children with chronic illness
- Ensuring that all those children and young people who are mentally ill not only have adequate services but also have their mental health improvement needs attended to
- Importance of recognising the right of children and young people to be heard and to participate in the development of services
- Importance of mainstreaming mental health, involving communities, schools and families
- Integration of promotion, prevention and care
- To improve the mental health and emotional health and well being of young people in Fife throughout a collective effort between NHS Fife, Fife Council and the voluntary sector and other relevant organisations

CHAPTER TWO: THE EVALUATION

2.1 Aims of the Evaluation

Penumbra Youth Project Fife was last evaluated two years ago. The Project approached the Scottish Development Centre for Mental Health to conduct an independent evaluation to review their progress since that work was completed. The evaluation will complement internal evaluation and assessment data already collected by PYPF staff and will aim to provide an objective appraisal.

The main aims of the evaluation will be:

- to provide an independent appraisal of the extent to which PYPF has met its aims
- to explore the extent to which these aims are relevant to what young people identify as helpful
- to explore the extent to which these aims are relevant to the wider local and national policy contexts

The evaluation objectives will be to:

- Use, where available, internal evaluation and monitoring data to measure progress towards meeting key aims
- Collect further evaluation data from PYPF staff, the young people who use the Project, other related agencies and organisations and those with a strategic overview to explore the extent to which key aims are being met and their relevance to what young people feel is helpful

2.2 Methods

In order to meet the evaluation's aims and objectives, the following methodology was used:

- Online survey of referrers, partners and other relevant agencies
- Individual interviews with young people attending the service
- Workshop with PYPF staff team

This section describes each of these tasks in detail.

Online survey of referrers, partners and other relevant agencies

The PYPF Manager provided SDC with a list of the email addresses for all referrers who referred between Aug/Sep 06 and Aug/Sep 07 and agencies involved with the Project and any other important stakeholders. In August 2007, eighty three individuals were emailed and asked to participate in an online survey. A reminder was sent out in early September 2007. Email

versions of the survey were made available to those who could not access the online survey.

The survey consisted of a mix of quantitative questions (rating scales) and qualitative questions and additional room for comments. It covered the following areas:

- Ways in which respondents worked with PYPF
- Frequency of referrals to PYPF and reasons for referral
- Satisfaction with the referral process
- Accessibility of the referral process
- Views on alternative sources of support to PYPF, and extent to which PYPF provides something different to other local sources of support
- Views on the value, accessibility and helpfulness of PYPF team
- PYPF's contribution to the Children's Services Plan
- Suggestions of improvement that could be made to the PYPF and recommendations for the future.

A full copy of the questions asked in the online survey is available in Appendix 3.

Twenty one responses to the survey were received by SDC. No one sector dominated the responses, although the greatest number of responses were from education (7) followed by NHS (4). Three responses were received from the social Work sector, and another three from the voluntary sector. One response was received from community services / employability, another from a Domestic and Sexual Abuse Partnership, and another from a "strategic partnership". No responses were received from the police.

Individual interviews with young people attending the service

80 young people using the PYPF service were given information sheets and consent forms inviting them to participate in an interview or group discussion. However, this did not include those young people who had requested that the PYPF service should not send mail to their home addresses. All young people who wished to participate were asked to complete and return a consent form to SDC. Young people under the age of 16 were also asked to gain consent from a parent or carer.

The interviews took place in September 2007. A total of eight young people agreed to participate in individual face to face interviews; five of those were male, and three female; seven were aged 16 or over, and one was aged under 16. No young person expressed an interest in participating in a group interview. All one-to-one interviews took place on the PYPF premises, and support from PYPF staff was available if any of the young people required it.

The interviews covered the following issues:

- Perceptions on purpose of PYPF, and reasons for attending
- Ways in which the Project has met needs
- Effectiveness of the Project in terms of ensuring safety, confidentiality and positive relationships with staff and peers
- Suggestions for any changes to be made to the Project
- Views on when young people expect to leave the Project and why
- Other sources of support drawn on.

A full copy of the interview schedule is available in Appendix 3.

Workshop with PYPF staff team

All PYPF staff and management were invited to attend a half-day workshop facilitated by the SDC. The purpose of the workshop was to:

- Feedback early findings from the evaluation and any key issues arising
- Review the extent to which participants felt PYPF had made progress towards meeting their key objectives with a focus on where there has been success, what factors have contributed to this, what, if any have been the barriers/obstacles and how (if at all) these have been overcome

Five out of seven members of the team participated in the workshop. At the time of the workshop one member of staff was absent due to sickness, and another post was vacant.

CHAPTER THREE: FINDINGS

In this Chapter, we present findings from the online survey with referrers and other key partners, interviews with young people attending the Project, and staff workshop.

3.1 Views of referrers, partners and other relevant agencies

Sector of respondents

Twenty one responses were received to the online survey. Table 1 described the sectors respondents represented. From this table it can be seen that no one sector dominated the responses, although the greatest number of responses were received from Education (7) followed by NHS (4).

Table 1: Respondents by sector

	Number (n=21)	%
Education	7	33.3%
NHS	4	19.0%
Social Work	3	14.3%
Voluntary Sector	3	14.3%
Community Services (e.g. Youth Workers)	1	4.8%
Police	0	0.0%
Others	3	14.3%
No response	1	4.8%

Those respondents who indicated "other" listed the following as their sectors of work: Domestic and Sexual Abuse Partnership; Employability sector; strategic partnership. One of these respondents indicated that they represented two sectors: Employability and Community Services.

Ways of working with PYPF

Table 2 presents ways in which respondents indicated that they worked with the PYPF. Respondents could select more than one response; five respondents described three ways in which their Project worked with PYPF, eight respondents described two ways, and seven respondents described one way in which they worked with PYPF.

The most common way in which respondents had worked with PYPF was through seeking information and / or advice from the Project (13 responses), followed by referring young people to the Project (11 responses).

Table 2: Ways of working with PYPF

	Number (n=20)	%
Sought information / advice from PYPF	13	65%
Referred young people to PYPF	11	55%
Given information / advice to PYPF	5	25%
Haven't worked with PYPF	1	5%
Taken referrals from PYPF	0	0%
Other	8	40%

Those who selected "other" in response to this question, indicated that they worked with PYPF in the following ways:

- Organisations link together at a strategic level (2 responses)
- Respondent promotes PYPF through distributing materials (2 responses)
- PYPF represented on respondents' organisations working / planning group (2 responses)
- Provided funding to PYPF (1 response)
- Monitors PYPF (1 response).

Frequency of referrals to PYPF and reasons for referral

Respondents were asked to indicate the number of times they had referred young people to PYPF in that last 12 months (at the time of completion this would have been August / September 2006 – August / September 07). Table 3 provides an overview of the responses to this question:

Table 3: Frequency of referrals to PYPF in last 12 months

	Number (n=11)	%
Once	1	9%
2-5 times	7	64%
6-10 times	3	27%
Over 10 times	0	0%
TOTAL	11	100%

Of the eleven respondents who indicated that they had referred to PYPF in that previous twelve months, one indicated that they had referred once, seven stated that they had referred 2-5 times, and three had referred 6-10 times. No respondent had referred to PYPF over 10 times in the past twelve months.

Table 4 presents the distribution of referrals by sector. This indicates that Education were the most frequent referrers amongst respondents to the survey, followed by Social Work and the NHS. Whilst it should be

acknowledged that the numbers presented here are very small, referral statistics obtained from the Project indicate the same three external services as the most frequent referrers to the Project. Between August 2006 to September 2007 that the most common sources of referral to the Project overall were i(in descending order): self referrals; Social Work; Education and the NHS (further details of PYPF monitoring statistics are given in Appendix 1).

Table 4: Distribution of referrals by sector

	Once	2-5 times	6-10 times	TOTAL
Education	0	2	3	5
NHS	1	1	0	2
Voluntary Sector	0	1	0	1
Community Services	0	1	0	1
Social Work	0	2	0	2

Referring agencies described a range of reasons for referring to PYPF. Three respondents indicated that they were after dedicated 1-2-1 support for young people. Two respondents felt that the young people referred were needed specialist input at a level beyond that their service could provide, and one that the young person's needs was out with the remit of their Project. Specific issues respondents thought PYPF could provide support with included:

- confidence / self-esteem (4 responses)
- self harm (4 responses)
- social problems, e.g. social isolation (4 responses)
- mental health issues, e.g. anxiety (2 responses)
- suicidal behaviour (2 responses)
- anger (1 response)
- abuse (1 response)
- destructive behaviour (1 response)
- bullying (1 response)
- issues about home and school (1 response)

PYPF's monitoring statistics indicate that the most common areas where support was requested from the Project at point of referral were (in descending order): anger management; depression; relationship issues; and self harm (further details of PYPF monitoring statistics are given in Appendix 1).

Satisfaction with referral processes

'Penumbra provide a clear and consistent response to my referrals and always see people quickly'

Referring agencies were asked to rate their satisfaction with how PYPF had responded to their referrals, where 5 was the highest score, and 1 the lowest (see Table 5).

Table 5: Satisfaction with response to referrals and information on referrals

	1 (low)		2		3		4		5 (high)		Total
	n	%	n	%	n	%	n	%	n	%	
Response to referrals	0	0%	0	0%	1	9%	3	7%	7	44%	11
Information on referrals	0	0%	1	9%	1	9%	4	36%	5	45%	11

Ten out of the eleven respondents to this question marked the PYPF either 4 or 5, one respondent gave PYPF a score of 3 on this criteria, and no respondents gave a score of 1 or 2. This indicates that the majority of those referring agencies surveyed were very satisfied with PYPF’s response to their referral(s).

The reasons respondent gave for their answers were as follows:

- Referral(s) processed quickly and efficiently, including initial response and engagement with client (8 responses)
- Team supportive and helpful to referrers (3 responses)
- Appropriate “tone” adopted in correspondence (1 response)
- Clear and consistent responses (1 response)

One criticism made of the response given by PYPF to a referral was that their approach seemed “disjointed”, although it was acknowledged that a young person’s failure to attend an appointment may have contributed to this.

Information on referrals

‘Whilst being aware of confidentiality issues, I felt it would have been useful to have had some kind of feedback as to how the sessions were progressing with the young person’

Referring agencies were also asked to rate the information they received about referrals, using the same scale as before (see Table 5). Nine out of eleven respondents gave a score of either 4 or 5 in response to this question, one marked the Project 3 and another one gave the Project 2 on this criteria. No respondents marked the Project with the lowest score. Again the data suggests generally high satisfaction rates with the information they received from PYPF about referrals.

Positive comments about the information received included:

- Clear and straightforward information and process (2 responses)

- Information available as and when required (1 response)
- Staff willing to come to referring agency if requested (1 response)
- Information available in accessible formats, e.g. email (1 response)
- Information about referral plans matches actions taken (1 response)
- Queries responded to quickly (1 response)

The main drawback of the information given by PYPF about referrals was the lack of ongoing feedback available because of confidentiality issues (3 responses). When asked for any further views on this issue, there was some indication that referrers may not always receive consistent information; one respondent indicated that they received information about missed appointments, whereas another replied that they did not.

Four respondents suggested that they would like additional information to that which they currently received, for example when and where appointments were being held or when cases were closed. However, another three respondents were happy with the information they received, and the fact that it respected the young persons' confidentiality.

Accessibility of PYPF referral process

'Quick and efficient information with honest answers to the availability of what and when they can provide support'

All respondents to the survey, whether referrers or not, were given the opportunity to indicate their satisfaction with the accessibility of the PYPF referral process (see Table 6). Sixteen respondents answered this question, all of whom gave a score of 4 or 5 to PYPF for accessibility.

Table 6: Accessibility of referral process

	1 (low)		2		3		4		5 (high)		Total
	n	%	n	%	n	%	n	%	n	%	
Accessibility of referral process	0	0%	0	0%	0	0%	9	56%	7	44%	16

When asked to explain why they had given this answer, respondents replied as follows:

- Variety of referral mechanisms available, e.g. by telephone, email, drop in (6 responses)
- Quick process (4 responses)
- Easy process, e.g. simple forms (3 responses)
- Clear referral guidelines and support from team if required (2 responses)

- Positive / no negative feedback received from agencies signposted to PYPF (2 responses)
- Honest response about capacity to support (1 response)
- Broad eligibility criteria (1 response)
- Referral system of referring agency is effective (1 response)

The only negative comment received in response to the question about accessibility of the PYPF referral process was that one respondent felt the risk assessment was not always necessary.

Routes for accessing referral forms

Respondents were asked to indicate which, if any routes for accessing referral forms they were aware of, and which, if any, they had used. Seventeen respondents answered this question, the results of which are presented below in Table 7:

Table 7: Routes for accessing referral forms

	Aware of		Used		Total no. respondents	
	n	% of all resp.	n	% of all resp.	n	% of all resp.
Visiting Project office	10	59%	2	12%	12	71%
Telephone	10	59%	8	47%	16	94%
Fax	10	59%	3	18%	12	71%
Penumbra website	8	47%	6	35%	13	76%
Other	3	18%	2	12%	3	18%

The total number of respondents for each referral route gives the best indication of overall awareness of each referral route amongst respondents. From the responses given, it appears that the telephone was both the most commonly known about access route (16 respondents) and the most commonly used (8). This was followed by the website, with 13 respondents aware of this route and 6 having used it.

Awareness that forms could be accessed via the Project office and by fax was reasonably high (10 respondents each), but these routes appeared to be less well used than others (2 and 3 respondents respectively).

In addition to those routes stated, three respondents indicated that they were aware of and two had used other referral routes. These were listed as email, paper based forms, and via FORT.

Unclear aspects of referral routes

Respondents were asked whether there were any aspects of the referral routes which were unclear. Eighteen respondents answered this question: none said "yes", 13 said "no" and 4 indicated that they did not know.

Alternatives to PYPF

'the service is unique and accessible to young people.'

When asked to describe what, if anything, PYPF offered that was different to other services in the locality, eleven respondents were able to identify at least one quality that made PYPF stand out. These are summarised as follows:

- Quick response time (4 responses)
- Informal social activities employing social rather than health model of support (4 responses)
- Young person orientated (2 responses)
- Friendly and welcoming staff and atmosphere (2 responses)
- Flexibility (2 responses)
- Age range supported (2 responses)
- Holistic approach (1 response)
- No alternative service available locally (1 response)
- Preventative approach (1 response)

Respondents were asked what their referral choices would be if the Project did not exist. Seventeen individuals responded to this question, twelve of whom indicated that their referral options would be "very limited". Of these, eight did not feel able to suggest any alternatives at all. It was also suggested that alternatives were particularly scarce for younger age groups. NHS mental health services were suggested as an alternative by 7 respondents, although it was acknowledged that these services lacked capacity and had lengthy waiting times. Other individual suggestions included:

- Fife advocacy
- Woman's Aid,
- Education based support centres
- Social work
- Centre for Vulnerable Child
- School nurse
- Clued Up

It was recognised that none of these alternatives would be suitable for all PYPF clients.

Value, accessibility and helpfulness of PYPF team

'This is my first choice for referring to locally'

Respondents were asked to rate their perceptions of the value of PYPF to improving the mental health and well-being of the young people it supports (see Table 8). Seventeen respondents answered this question, of whom 16 gave a high rating of 4-5 to the team. Only one respondent gave a middle rating of 3, and no respondents rated the Project 1 or 2 in this regard.

Table 8: Value, accessibility and helpfulness of PYPF

	1 (low)		2		3		4		5 (high)		Total
	n	%	n	%	n	%	n	%	n	%	
Value of PYPF to improving mental health of young people	0	0%	0	0%	1	6%	5	29%	11	65%	17
Accessibility of the PYPF team	0	0%	0	0%	1	6%	3	19%	12	75%	16
Helpfulness of PYPF team	0	0%	1	6%	0	0%	6	35%	10	59%	17

When asked to explain why they had scored PYPF as they had, six respondents felt that the Project was of an informal and accessible nature which encouraged young people to feel at ease and able to talk. This was contrasted with some more formal statutory settings. Another six felt that the way in which PYPF tailored support to individual needs, offered choice and took on board the views of young people was key to its value.

Other explanations included:

- Invaluable source of support to young people (3 responses)
- Project has valuable input into local planning structures / links well with other organisations (2 responses)
- Timely support provided (2 responses)
- Positive information received by funders (1 response)
- Positive work undertaken to promote mental health and well-being across Fife (1 response)
- Positive outcomes observed in young people referred (1 response)
- Enthusiastic and committed staff (1 response)

Accessibility of the PYPF team

'Every phone call has been answered, every message returned, every meeting attended and every question answered'

In terms of views on the accessibility of the PYPF team, 15 respondents scored the team at 4 or 5, 1 gave the team a score of 3, and no respondents thought that the team warranted a low rating of 1 or 2 (see table 8).

The most common reason for why PYPF scored highly on accessibility was their responsiveness to queries and requests from external agencies. Five respondents felt that PYPF could be relied on to respond to any query or request, within a quick time period. Another four respondents felt that the team were helpful and approachable. Other observations relating to accessibility included:

- Professional, polite and respectful approach (2 responses)
- Flexibility of approach (1 response)
- Different ways to access, e.g. telephone, email, drop by office (1 response)
- Honest approach (1 response)
- No problems experienced (1 response)

Only one negative comment was received with regards to accessibility. One respondent indicated that a referral made to the Project appeared to have “gotten lost in administration”.

Helpfulness of team

'To my knowledge every organisation I have referred to Penumbra has found the support, advice and services provided by Penumbra as beneficial to them and their clients.'

Seventeen respondents rated PYPF for helpfulness, of which 16 gave them a high scoring of 4 or 5. The remaining respondent gave a low score of 2 on that criteria.

Eleven respondents gave additional comments to support their answer to this question. There was no overarching reason why respondents found the service helpful, rather a range of factors were suggested including:

- Provision of helpful information about what service offers and how to access it etc (3 responses)
- Staff team willing to input into sector wide discussions / work in partnership (2 responses)
- Responsiveness to queries (2 responses)
- Positive feedback received from other agencies referred to PYPF about support, services and advice (1 response)
- Flexible approach (1 response)
- Evidence of positive impact on young people (1 response)
- Open and honest (1 response)
- Friendly (1 response)

Two less positive comments were also received. One indicated that not all young people had been able to fully engage with the service, and the other suggested that there was greater potential for the team to explore other approaches to working with young people in addition to 1-2-1 support, such as group work.

PYPF's Contribution to the Children's Services Plan

'Penumbra are active in both contributing to the Children's Services Plan as well as delivering it.'

Respondents were asked whether they felt that PYPF contributed anything to the local Children's Services Plan. Seven respondents answered this question, all of whom indicated that the Project had contributed to the plan.

The Plan's objectives were listed as being to ensure that children and young people were 'Safe, Nurtured, Healthy, Achieving, Respected & Responsible and Included'. Two respondents thought that the Project contributed to all of these objectives, while another two felt that they had a particular role in contributing to and delivering on the "Healthy" objective. Within this objective was a stated priority to support the 'mental and emotional health and well-being of children and young people' in which PYPF was considered to have a valuable role to play. Their recovery-based model of working was highlighted as being particularly important in this respect. One respondent also felt that PYPF had an important role to play in raising awareness of mental health issues in children and young people, which was an issue they felt still went under recognised.

Improvements and suggestions for the future

'More of it'

When asked whether they had any suggestions for how the PYPF service could be improved, six respondents gave suggestions. Of these, four suggested that the service should be expanded to offer increased support to young people in other parts of Fife, such as Glenrothes and Cupar. One respondent felt it would be helpful if referrals could be accepted over the telephone. Another thought that more emphasis should be placed on disseminating information about the Projects' achievements and the outcomes experienced by young people using the Project. It was thought that this could help to encourage further referrals.

In terms of suggestions for the future, again the most common suggestion was that the service should be expanded across other parts of Fife, either with other branches or through greater outreach work (4 responses).

Three respondents suggested further work to engage with partners and other agencies would be beneficial. In particular, work to ensure that schools and colleges were aware of service, and training for staff around how to support young people in crisis were both recommended.

A further three respondents felt that more emphasis should be placed on internal quality assurance, monitoring and evaluation. In particular it was felt that the views of young people using the service should be routinely gathered and incorporated into any future plans about the service.

Respondents also recognised that any proposed expansion of the PYPF role or functions would require additional resources.

3.2 Views of young people attending the service

Access to PYPF

The young people interviewed for this evaluation had arrived at the Project through a range of routes. For six young people, the Project had been suggested to them by other services or organisations they were already linked in with, such as social work, hostels, college or CPNs. One young person had been encouraged to attend by a flatmate who also went to the Project, and the eighth had been given a leaflet about the Project.

The young people who had been referred to the Project by other agencies described some initial reluctance to attend. There appeared to be some stigma and misconceptions associated with the term “drop-in”, one young person linking it with homeless services and soup kitchens. The way in which referral agencies described service to young people may also have created a negative impression. Two young people indicated that they thought they were being referred as a form of punishment or retribution for past wrongs. Another young person expressed reluctance because they felt they were not ready to talk about their problems.

However, initial reluctance to attend was not universal. One young person had thought that the Project would provide a helpful opportunity for talking through issues, and another saw it as a preferred alternative to adult mental health services. Negative preconceptions about the Project also quickly dissipated for other young people on attending.

Building confidence and trust

It was clear that some of the young people interviewed had experienced various difficulties in negotiating life and social situations, which had resulted in outcomes such as getting into fights, feelings of isolation and not “belonging”, or low self confidence around other young people. Conversely the staff within the PYPF were thought to have created an atmosphere where

young people felt welcome, accepted and able to be themselves. The young people described the Project as a "safe haven" where they could escape from the pressures of the outside world. This was clearly extremely important for the young people who attended; one young person indicated that this was the first place in their lives where they had felt happy.

The welcoming, safe and inclusive atmosphere of the Project appeared to rely to a considerable extent on the personal qualities of the staff. Young people talked about the "bubbly" and "fun" natures of the staff, and commended the energy and commitment which they brought to their roles. They also indicated an appreciation of the independence of the staff, where staff were "honest" and there were no "hidden agendas".

These attributes contributed to young people being able to build up trusting relationships with the PYPF staff. Young people suggested that they could talk to staff about "anything", and felt "looked after" by staff in the Project. At the same time it was recognised that staff generally managed to achieve a balance of being close to young people, but without becoming emotionally involved.

However, whilst those interviewed were largely positive about the qualities of the staff team as a whole, one or two issues with individual members of staff were identified; one young person felt that a particular member of staff did not like them and another indicated that they had felt judged by a member of staff, when some passing comments had been made about them. Another young person expressed disappointment that a member of staff had broken confidentiality without discussing it with them first. These issues could have a negative affect on trust.

Nevertheless, even given these issues, most young people were keen to stress that any problems which had arisen with members of staff were small, had been or were in the process of being dealt with, and did not have a detrimental affect on their views of the value of the Project overall.

Ways in which PYPF works with young people

The young people interviewed described a range of issues they had experienced in their lives, including family problems, self harm, violence, repeated hospitalisations, problems with accommodation, drug and alcohol use, behavioural issues, and low confidence and self esteem. The length of time young people had attended the Project varied from six weeks up to four years. Five indicated that they had received one-to-one support from individual members of staff, and six attended the drop-in and / or group activities on a regular basis.

The young people described a flexible and strengths based approach to support adopted by the team. The interviews conveyed a focus on positive change applied by staff, rather than a reflection on things that had gone

wrong for the young people. The Project was described as giving young people positive coping suggestions, some of which had been taken on board. The team could also give practical assistance with issues such as benefits, and legal concerns and help with signposting to other agencies as appropriate.

The consistency of support given by the Project was also appreciated. Two young people indicated that they found it helpful to receive 1-2-1 support with the same member of staff, as opposed to negative experiences they had within statutory mental health services of being "passed around".

However, another young person felt that staff's personal views could enter into their professional roles from time to time, and suggested that they could be more impartial, particularly when giving information about mental health issues.

The principles of confidentiality and respect were thought to underpin the way PYPF operates. Young people were readily able to state the "what's said in here, stays in here" confidentiality rules which existed within the Project. Young people thought these were appropriate, and generally were abided by. Having a confidential space in which to talk was thought to be particularly important by one young person, who found relief in a situation where family issues could be safely discussed without any repercussions.

Young people appreciated the principle that if a member of staff needed to break confidentiality, where possible, the young person would be informed about it. However, two young people expressed uncertainty as to whether this rule applied within the staff team or not, and one described a negative experience where they felt confidentiality had been broken without their consent. It was clear that those interviewed appreciated information about why decisions about their care are being made, and how information about them will be used, and who will have access to it. This may be a procedure which would benefit from further discussion or clarification for attenders.

Linking with peers

Six of the young people interviewed appeared to be very regular attenders at the drop-in and / or group activities. At the drop-in the pool table appeared to be particularly popular, with young people enjoying the friendly competition with each other. Young people also described courses and group activities they had participated in, including anger management, physical exercise (yoga, football), craft activities, life skills, relationships and food hygiene. Other special events such as the Polish exchange, camping trips, quad biking and P Factor were also highlighted as positive opportunities provided through the Project.

Young people clearly felt that having access to the drop-in on a daily basis could provide structure and interest to their lives; it was variously described

as preventing boredom, “breaking up the day” and giving people a reason for leaving the house. The drop-ins also offered the opportunity to mix with other young people in a safe environment. The drop-in was described as promoting a non-judgemental atmosphere, where mutual respect amongst young people and staff was encouraged. Young people recognised that they had their differences, e.g. music tastes, but were generally able to find common ground. It was not always thought that young people attending the drop-in would mix with outside of the Project, because of different expectations and/ or judgements young people could make about each other. However, within the Project, different rules applied.

One young person observed that the “rules” of respect were followed within the Project as people came because they wanted to be there, rather than being forced to attend. However, some of the young people who attended clearly had difficulties in adjusting their behaviour to the Project’s principles. One young person, because of their behaviour, had been prevented from attending the drop-in for a period of time. Another indicated that they found it difficult to stick to some of the ground rules around behaviour. It may be that certain young people, because of the difficulties they bring with them, require extra support to enable them to adjust their behaviour to the Project’s principles. The project had developed a set of guidelines to explain the support provided by YYPF in such circumstances, although these guidelines were not mentioned by the young people interviewed who reported these difficulties (see Appendix 2 for details of the Project Guidelines).

It was also recognised that group activities were not appropriate for all young people. One young person felt that they would not get anything from mixing with other “likeminded” people, as they had already had many opportunities to do that in other settings. There was also a danger identified of young people sharing risk taking thoughts and behaviour with each other within the drop-in. One young person felt that additional information or guidance should be available from the team to help young people deal with and pass on these issues safely.

Young peoples’ views on outcomes from attending the Project

When young people were asked what they wanted to get out of attending the Project, social objectives appeared to be most common. Two young people indicated that they wanted to meet new people, and another two wanted to become more confident in social settings. Hopes relating to mental and emotional well-being were also described, with young people indicating that they wanted someone to talk through their problems with, as well as seeking help with particular issues such as self harm. Finally expectations relating to behaviour were expressed; two young people wanted help to stop them getting into trouble with the police, and to control violent behaviour.

It appeared through discussions with the young people, that most of these objectives had been met, at least in part. Four young people described improvements in their confidence levels through attending the Project. Young people described how they were more confident about being themselves, better able to express themselves, less "shy", and had improved their social skills. Other positive improvements included reported reductions in self harming behaviour, and less frequent contact with the police.

It was recognised however, that progress towards goals was not a straightforward linear process. Some young people did experience setbacks from time to time, and some of the longer term attenders had stopped and restarted attendance at the Project over the years. Some objectives still required further assistance, for example one young person talked about not yet feeling able to deal with their problems by themselves, and another had looked at stopping smoking but had been unable to achieve this at the time of interview.

Leaving the Project

None of the young people interviewed expressed any desire to leave the Project in the immediate future. Young people indicated that they wished to continue attending because of benefits had gained from Project, and for some, because of social comradeship they had attained through meeting with others.

It was explained that although the official age range of the Project was 16-21, if young people started attending the Project before the age of 21, they could stay until they were 25. This policy was clearly reassuring for some young people, who found it difficult to identify what circumstances would make them feel ready to leave.

Various indicators of readiness to leave described by those interviewed included; staff leaving, moving away from Kirkcaldy, or being able to deal with "every day life" without support. One young person recognised that progress had been made, and that they were "on the way" to achieving what they wanted to get out of coming to the Project.

There was also a difference articulated between needing to come to the Project, and wanting to come. One young person felt that they were now in a position to "give back" to the Project, having gotten what they needed out of it. This made the prospect of leaving sad, but no longer an "issue". These points raise questions about the extent to which PYPF works to move young people on from the Project, and ensure that dependency is minimised.

Input into PYPF and suggestions for improvement

Young people placed emphasis on the fact that if there was any aspect of the service they wanted to change, they had ample opportunities to tell staff about it; interviewees described the meetings of the Top Floor Clan as an avenue for feeding back issues and suggestions to the Project, Young people could also raise issues through noticeboards and on an individual level with staff. One young person emphasised that it was up to the young people to tell staff if there were any issues.

There were very few aspects of the Project that young people suggested required changing. The only recurring area where it was thought improvements could be made was the physical environment of the drop-in, which was variously described as "awffy plain" and full of "junk". Young people indicated that they would prefer the drop-in to have a more homely environment, and it was mentioned that plans were afoot to redecorate the drop-in involving the young people.

Other individual suggestions about changes to the Project included:

- Organised football matches with other teams
- Badminton and swimming activities
- Additional drop-ins in other parts of Fife

It was felt that most of the suggested changes to the Project had been taken up. If issues did arise, young people desired prompt and full information about how these issues would be dealt with, and who would be involved. A clearer complaints procedure was requested, and external help to support young people in making complaints if required.

Other sources of support

Not many additional sources of support were identified by the young people interviewed, although one young person admitted that they had not needed to look for other sources of support as the PYPF gave them all the help they required.

One young person, who accessed support from organisations in addition to PYPF, spoke favourably of PYPF's broad focus and supportive, relaxed atmosphere. Other sources of support described by young people included CPNs, GP, social workers and parents. It was also suggested however that family and friends could also be a cause of worry as well as support for young people.

3.3 Workshop with PYPF staff team

Five members of the PYPF staff team participated in a group workshop covering their views of areas of effective working, barriers and facilitators affecting the Project, and issues for sustainability and development.

Support provided by PYPF

The PYPF Annual Report 2006/2007 provides the following summary of activity data for the Project:

New referrals	177
1-2-1 appointments offered	426
1-2-1 appointments attended	257
Drop-in contacts	839
Outreach contacts	465
Group work contacts	276
Football contacts	195
Number attending special events	289
Awareness raising contacts	405

This information provides a helpful overview of the scope of each service provided by the Project and of the volume of activity. Although not presented here, the Project also collects data on the number of unique individuals using its services.

The team described the recovery orientated methods used to provide one-to-one support, which utilised solution focused techniques and encouraged young people to set goals and review progress. The team emphasized that people and not issues are the focus, and that an holistic approach to supporting young people is applied. Young people gauged progress on a scale, and support was adjusted to fit where young people were. The scales were considered to be beneficial for the young person and the worker. Staff recognised that young people could move up and down their own scales at different points in time because of a range of issues. However, the multiple, often changing issues that affected the young people's wellbeing, could make it difficult to use the scales as an indicator of outcome.

In addition to one-to-one support, group activities, including the drop-in and issue based games days, were provided for those young people who preferred them. It was suggested that most of the young people who receive one-to-one support do not currently access the groups, although staff feel that some would benefit from linking with their peers. Because of the limited numbers which can be supported by the one-to-one, there was also a desire expressed to move young people on from one-to-one to group based support where possible. It was thought that young people are more likely to engage

with the groups and drop-in if the workers can support them to attend to begin with.

The PYPF has a focus on supporting young people through transitions. This focus was originally specific to supporting young people through the looked after system. However, in recognition that young people face many different types of transitions, such as moving from children's to adults mental health services, from primary to secondary school, or internal emotional transitions, the remit of transition work within the Project had broadened. It was indicated that the Project still works with looked after and accommodated children and young people, but the target group for the Project has now widened to all children and young people aged between 12 and 21. It was thought that the fact that the Project was not a "one issue" service contributed to its success.

Referrals to and from PYPF

One barrier experienced by the Project was young people not turning up for appointments. It was felt by the team that this may be due to young peoples' anxiety about attending, and stigma associated with mental health support. Evidence from the young peoples' interviews would also indicate that the way in which referring agencies introduce the young person to the service can be key in encouraging or deterring attendance. In light of this issue, it was agreed that the following action should be taken by the Project:

- Discussion with referral agencies to emphasise that the referral experience for the young person starts with the referrer
- Providing the referrer with a list of key messages about the Project to share with young people being referred
- Involving young people who use the service in developing these key messages
- Providing one-to-one discussion at the referral stage where possible.

A further area for improvement identified by the team was a lower than expected rate of referrals to date from mental health services. It was recognised that there was greater potential for PYPF to support Child and Adolescent Mental Health Services (CAMHS), for example by taking on inappropriate referrals to CAMHS, or by promoting the Project as an option for young people leaving CAMHS at 18.

Strengthening existing links with other services such as CAMHS was an ongoing priority for the team. Good progress had already been made on this front, despite the challenge involved for a small staff team. Steps taken to build relationships with other organisations included sending out information, tea and toast sessions and open days, production of annual review, website and leaflet. It may however be useful for the team to explore reasons why the level of referrals from CAMHS was lower than expected and discuss with them opportunities to develop further links with these services.

It was the view of the team that one success of the Project has been minimising referrals to specialist services, as it rarely has to refer any child or young person on to other services. Young people generally move on from the service when they have resolved their issues; the general pattern is that young people will move from one-to-one to the drop-in and then leave when ready. Young people can attend the drop-in until they are 25, although it was indicated that few stay until this age. It was also recognised that there were few referral options open to young people after the age of 25.

Sustainability and development

It was recognised by the team that improvements and further developments to the Project were important, but that the main focus for the team was maintenance of their core service. This service was felt to be "solid", and well developed.

There was potential for extending the Project's work into schools across Fife, but limited staff capacity was thought to make this difficult. There was also potential to extend the Kirkcaldy model into other parts of Fife, with offices in locations such as Dunfermline and Cupar. However, any such developments would require increased resources.

CHAPTER FOUR: ASSESSING EFFECTIVENESS

The findings from this evaluation provide evidence to indicate that PYPF has made progress towards achieving its objectives. This evidence can be summarised as follows:

To provide recovery focused mental health and well-being services that support young people in transition, who may be experiencing complex difficulties

The PYPF team indicated they adopted a broad approach to defining young peoples' transitions. However, the young people interviewed were not generally explicit about any transitions they were currently experiencing. Rather young people interviewed described what they had hoped to change in their lives as a result of their time at PYPF; this covered a range of social, mental health and behavioural goals.

The PYPF team indicated that they applied a recovery focused model of support, which helped young people to rate progress towards achieving individually defined goals. Evidence from both the professional survey and young person interviews indicates that the PYPF has been effective in providing support for young people to meet their needs.

To provide advice and support on a range of issues including mental illness, stress, isolation, suicidal and self-harming feelings or actions, family breakdown, homelessness, anxiety, abuse and other issues

The young people interviewed described a range of issues they had experienced in their lives, including family problems, self harm, violence, repeated hospitalisations, problems with accommodation, drug and alcohol use, behavioural issues and low self esteem. External agencies who took part in the online survey identified a similar group of issues with which they felt the Project could support young people.

Those young people who received one-to-one support indicated that they appreciated having someone with whom they could talk about difficult and complex issues that concerned them, sometimes for the first time. Practical support, such as help with benefits issues, was thought to be helpful, alongside support to discuss mental health, emotional and relationship issues.

To improve resilience and coping skills amongst vulnerable young people to enable them to maintain mental well-being, prevent further mental illness and achieve successful independent living

The most commonly described issues experienced by those interviewed related to social concerns and difficulties mixing with other young people. It was felt that the group activities and drop-in provided positive experiences of

relating to other young people in a safe and supportive environment. This had helped young people to increase their confidence levels, and express themselves more fully both within the drop-in and in the "outside world" and find new ways of behaving and relating to others. Young people also talked about different coping strategies which they had taken on board, and which had helped them to keep out of trouble with the police.

To reduce referral to specialist services by encouraging young people to develop the skills and confidence to deal with the difficulties they experience in their lives, thereby reducing stigma and easing the pressure on other services

The PYPF team indicated that they rarely needed to refer young people to specialist services. It was felt by the team that most young people using the service received the support they required from the service, a suggestion that was confirmed by the young people interviewed. The Project was able to provide support to young people up to the age of 25. Although it was the experience of the team that most young people moved on before they reached 25, there was a gap identified around providing support to people over the age of 25 in Fife.

With a relatively small team there was also limited support available through PYPF across Fife. The team described how young people were generally moved through the Project from one-to-one support to the drop-in and group activities. It was not clear whether young people could stay indefinitely within the drop-ins until the age of 25, and how arrangements for the drop-in affected capacity overall.

To continue to work with young people themselves to identify problems they are experiencing first hand, their views on services and what they feel would better meet their needs

The young people interviewed indicated that they felt there were adequate opportunities available to them to comment on the service, and suggest any changes and that their comments were acted on. It was also felt that the approachable nature of the staff enabled young people to speak freely.

Few suggested changes were identified by the young people, primarily related to cosmetic changes to the drop-in. However, there was some indication that further information about how staff apply the confidentiality policy may be of benefit, particularly if and when decisions are taken to break it.

To support young people's mental health and well-being indirectly through continued awareness raising and promotion of mental health, and through offering informal support/advice to carers and professionals

The professionals who responded to the online survey indicated that they considered PYPF to be an extremely helpful, reliable and supportive service, both to them and the young people they referred. Respondents indicated that they felt the PYPF team to be responsive to enquiries, and flexible in their approach. They also suggested that the team were willing to take part and input into sector wide discussions and local strategies relating to children and young peoples' mental health. In this way the Project was considered to be making a positive contribution to the local Children's Services Plan. However, the PYPF team themselves identified that although strategic links with the CAMHS service were thought to be strong (through Penumbra involvement on CAMHS and Well Being Strategy Group for example), operational links could be further developed, building on the good working relationships already established.

CHAPTER FIVE: CONCLUSIONS AND RECOMMENDATIONS

Relevance to wider policy context

The evaluation of the work of the PYPF suggests that the aims, activities and achievements of the Project are relevant to many of the objectives of current policy set out in the introduction. The Project provides a valuable example of work with young people who are experiencing mental health issues that are affecting their ability to relate to others and to lead full and satisfying lives. The Project's approach embraces the tenets of mental health promotion: enhancing control, increasing resilience, facilitating participation and promoting inclusion. The Project has developed a culture of working with young people that respects their right to be involved and to have a voice. The methods used in the Project are consistent with the principles of recovery by respecting the individuality of each young person and supporting them to resolve issues and to work towards their hopes and aspirations. The young people interviewed described how their self belief had increased as a result of their contact with the Project despite the difficult challenges they faced in their lives.

The recent discussion paper 'Towards a Mentally Flourishing Scotland' (Scottish Government, 2007) proposes an agenda for the coming three years that encompasses the promotion of mental health, the prevention of mental health problems and support for those who experience poor mental health. This paper signals the need to focus increased attention and action on inequalities in mental health to achieve improved outcomes for those groups of people whose personal, social and material circumstances mean they are less likely to have good mental health. It was evident that the young people who used the Project had often had experiences associated with exclusion and marginalisation that contribute to poor mental health and the Project could therefore be seen as an important intervention in addressing inequalities.

Finally, the Project was regarded as a useful resource to raise awareness and promote understanding of the mental health issues affecting children and young people locally and its contribution to planning and development was acknowledged by partner agencies.

Recommendations

The scope of this evaluation was small in scale, and the views of those interviewed cannot be assumed to represent all professionals, or young people in contact with the PYPF. Nevertheless a number of significant themes have emerged from the findings, which may be useful when planning future developments supporting young people in Fife.

Supporting young people

- Evidence from this evaluation suggests that the PYPF has implemented an effective model for supporting young people. Their understanding and non-judgemental approach appears to be appropriate, appreciated and effective in building the trust and confidence of young people and helping them to make positive changes in their lives. It is recommended that the principles of the PYPF approach should be promoted within other children and young peoples' services across Fife.
- There may be scope for further clarification around confidentiality policies and procedures within the Project. For example, young people expressed uncertainty about how information was shared between team members. It was also recommended that policies around how young people should deal with other young people's declarations of risk taking thoughts or behaviours should be discussed and developed within the team.
- Young people valued the ongoing support and social engagement offered by the drop-in and group activities. There was potential for young people to attend the drop-ins until the age of 25, and many of the young people interviewed anticipated continuing to attend for the foreseeable future. This accessibility needs to be balanced with a limited capacity to support young people. It may therefore be worth considering implementing systems of review, to ensure that young people are continuing to benefit and gain from attendance at the drop-ins and are encouraged to move on where appropriate.
- Recognising the limited size of the Project, both referral agencies and young people recommended the expansion of the PYPF across Fife to include additional drop-ins capacity, and outreach into specific settings, such as schools and colleges. Any expansion of this nature would require that additional funding be made available.
- The PYPF Annual Review provides a useful overview of the range and scope of activities undertaken by the Project on a yearly basis. However, external agencies indicated that additional monitoring and evaluation information would also be of benefit, to indicate the outcomes achieved by young people who attended the Project.

Supporting other agencies

- PYPF is one of many agencies supporting young people in Fife, and its role in supporting other agencies, and contributing to strategic agendas was recognised and valued by other agencies. However, it was acknowledged by the Project that a relatively small staff team meant that there was limited capacity to get involved in all the external activities with which

there was potential to do so. It was also recognised that referring relationships with CAMHS had not developed to the extent which had been anticipated and therefore future work to explore and develop referral procedures with CAMHS services would be of benefit.

- Some of the young people interviewed indicated that the way the Project had been described to them by referrers had acted as a barrier to their attendance. The PYPF team identified a possible route of action to address this issue, including working with young people to produce a list of key messages about the Project to give to referring agencies. It is recommended that this action plan is implemented by the team.
- Different agencies indicated different experiences with regards to information about missed appointments and the closure of cases. It may therefore be helpful for PYPF to ensure that referring agencies are clear about what information they are entitled to receive, and ensure agencies receive timely information where ever possible.

APPENDIX 1: PYPF INTERNAL STATISTICS

Referral Statistics, August 2006 – September 2007

Referrer	No. Referrals
Self	49
Social Work	44
Education	41
NHS	20
Housing	12
Parent	8
Voluntary Agency	7
Criminal Justice	4
Mental Health Nurse	3
GP	2
Police	1
Integrated Community Schools	1
Opportunity Centre	1
Self Harm Service	1

Areas of support requested, August 2006 – September 2007

Areas of Work Requested	No. Requests
Anger Management	99
Depression	73
Relationship Issues	71
Self Harm	62
Anxiety	55
Suicidal Thoughts/Actions	47
Bullying	34
Bereavement	33
Panic Attacks	21
Hearing Voices	8

APPENDIX 2: PENUMBRA YOUTH PROJECT GUIDELINES

This statement applies to all young people, volunteers and staff.

We do not judge people on their

- Colour
- Background
- Upbringing
- Sexual preference
- Gender
- Who they live with

We do not judge people on what they do outside Penumbra so long as that doesn't hurt somebody else

We do not make jokes that are based on race, disability, sexual preference or religion

We do not verbally abuse anyone

We respect confidentiality and privacy. Personal information about people who use Penumbra does not go outside the Project

We respect each other as individuals, but acknowledge that people may naturally disagree with each other, and may challenge each other's point of view

We believe everyone should listen to each other. No one should be forced to talk, and people who talk a lot should be aware of the rights of other people who are quieter

We show consideration to each other, with regards to behaviour that may make others feel uncomfortable, inferior or less valued than before. This includes phrases, words, expressions, statements, signs, gestures, physical intimacy, and behaviour which could be seen as bullying or aggressive.

We do not come into the Project, or attend a one to one appointment outside the Project under the influence of drugs or alcohol. If staff believe that a young person is under the influence, they will be given emergency support only.

Staff:

Penumbra Youth Project staff cannot have physical contact with young people, and cannot accept gifts from young people. If you especially want to give a gift, donations to the Project are always gratefully accepted.

We do expect everyone to make every effort to respect these guidelines. If a young person fails to follow the guidelines, the following will happen:

A member of staff will speak to you on a one to one basis, explain why the behaviour is not appropriate/acceptable, and request that it stops. Additional support may be offered.

If you continue to behave in a way that is not acceptable after discussion with a member of staff, the situation will be discussed in a team meeting, where staff will decide on further action. Further action will include:

- monitor situation/behaviour
- you may continue to access the drop-in/group on the condition that you accept additional one to one support
- you are informed that you cannot attend the drop-in/group for a specified period of time, and also may be asked to accept additional one to one support
- you are informed that you cannot attend the drop-in/group at all, and will be offered one to one support only
- you are informed that you can no longer access Penumbra Youth Project

The above guidelines apply to any situation where you are associated with the Youth Project, including inside/outside the building, on the minibus or public transport, on an outing, activity or trip.

These guidelines have been prepared in consultation with young people supported by the Youth Project. Thanks to everyone involved.

I confirm that I have had the above guidelines explained to me by a member of staff, and have had the opportunity to ask any questions.

Signed: _____ (Young Person) Date:
Signed: _____ (Worker) Date:

APPENDIX 3: TOOLS

Questionnaire for referrers, partners and other relevant agencies

1. What sector do you work in?
2. In what way(s) does your organisation work with vulnerable young people aged 12-21?
3. In what ways have you linked in with Penumbra Youth Project

Sought information / advice from PYP
Given information / advice to PYP
Referred young people to PYP
Taken referrals from PYP
Other, please describe
None

4. If you have referred young people to the Penumbra Youth Project, how often have you done so within the last 12 months?

Once
2-5 times
6-10 times
Over 10 times

5. What were your reasons for referring to the Project?
6. How satisfied are you with the way Penumbra Youth Project Fife has responded to referrals from your organisation? 1-5 rating scales (5 being very, 1 being not at all)

Please explain why you gave the last answer

7. How satisfied are you with the way Penumbra Youth Project Fife has provided information on referral and support 1-5 rating scales (5 being very, 1 being not at all)

Please explain why you gave the last answer

8. Please describe your views, if you have any, on the information you receive from the Penumbra Youth Project about referrals? (e.g. informing referrers of information meeting dates, and missed appointments and closing of files)
9. How accessible is the Penumbra Youth Project Fife's referral procedure? 1-5 rating scales (5 being very, 1 being not at all)

Please explain why you gave the last answer

10. Which of the following routes for accessing referral forms are you aware of / have used?

Aware of / Used
Visiting Project office
Telephone
Fax
Penumbra Website
Other, please describe

11. Are there any areas of the Penumbra Youth Project Fife's referral procedure that are unclear?
Yes, No, Don't know

If yes, please explain

12. In your opinion, what (if any) value does the Project add to improving the mental health and well-being of the young people it supports? 1-5 rating scales (5 being considerable value, 1 being no value at all)

Please explain why you gave the last answer

13. Generally, how accessible have you found the Penumbra Youth Project Fife team? 1-5 rating scales (5 being very, 1 being not at all)

Please explain why you gave the last answer

14. Generally, how helpful have you found the Penumbra Youth Project Fife team? 1-5 rating scales (5 being very, 1 being not at all)

Please explain why you gave the last answer

15. If the Project did not exist, what would be your referral choices?

16. What, if anything, does the PYPF services offer that is different from other local services?

17. What value (if any) does the Penumbra Youth Project Fife contribute to the local Children's Services Plan?

18. What (if any) improvement could be made to the current service(s) provided by the Penumbra Youth Project in Fife?

19. In what ways should/could the Penumbra Youth Project in Fife develop in the future?

Young People's Interview Schedule

1. How did you find out about the PYPF?
2. What do you see as the purpose of PYPF? E.g. in terms of:
 - a. issues addressed
 - b. Interventions offered
3. Why did you want to attend the Project? What sorts of help and support were you hoping to gain?
4. In what ways has the Project met your needs? E.g. in terms of:
 - a. Understanding reasons behind behaviour?
 - b. General quality of life?
 - c. Enhancing protective factors and capacity for resilience e.g. alternative coping strategies?
 - d. Reducing risk factors e.g. social isolation, poor self esteem?
5. How effective is the Project in terms of ensuring the following:
 - a. Safety within the Project
 - b. Non-judgmental environment
 - c. Confidentiality
 - d. Relationships with staff
 - e. Relationships with peers
6. What, if any, changes would you make to the Project to improve its effectiveness at meeting the needs of young people?
7. How long have you been attending the Project? When do people expect to leave and why, what further support might they require?
8. What other sources of support do you draw on outside PYPF?