

Provider Evidence Template 2012/13

Provider Name	Get Wise
Contact Name & Details (of person submitting evidence)	Vicki Atherton, SDPP
Date Submitted	Oct 2013

Type of Evidence (please tick one box only)					
Case study	<input type="checkbox"/>	Award / nomination	<input type="checkbox"/>	Provider success story	<input type="checkbox"/>
Press Article	<input type="checkbox"/>	DVD /CD	<input type="checkbox"/>	Other	<input type="checkbox"/>

What was the situation before / what was the nomination or award for?

I received a referral from one of our hubs, about a customer who wanted support with her Job centre appointment. She suffers from anxiety and panic attacks and unable to go to unfamiliar places without support.

What did you do or change that made a difference / got you a nomination or award? (what was your input into the situation)

When I contacted the customer, she advised that she has recently moved to surrey following a breakdown in a previous relationship and she had no friends or support network in the county. She advised she had an appointment at the job centre during the week and she was anxious about it and will need support at the appointment. I reassured her that we will be able to support her at the appointment and updated her about the recent benefit changed and what will be expected of her at the appointment during the week. With her permission, I also contacted the Hub for a request for information on local groups – she used to do arts and crafts and so my colleagues at the Hub sent her some info so that she could contact them

What difference has been made? (what outcomes were achieved as a result of your input)

At the job centre appointment with her disability advisor, she was able to gain her confidence and explain to the advisor what level of support she will like as she is new to the area. She was very pleased with the support she

got from us and in her feedback to us, she said 'my life has changed dramatically and next week I will attend the ESA job support appointment, my fear has gone! And not only back to myself, but also free to be better. Looking forward to joining a new pottery class'. This also shows that our service empowers people to be more independent in their lives.

Who did this affect? Eg: an individual, a family, a community, other?

Service user	<input checked="" type="checkbox"/>	Family	<input type="checkbox"/>	Carers	<input type="checkbox"/>	Community	<input type="checkbox"/>	Other	<input type="checkbox"/>
Professional (Health)	<input type="checkbox"/>	Professional (Social Care)	<input type="checkbox"/>	Professional (Other)	<input type="checkbox"/>	Provider Organisation	<input type="checkbox"/>		<input type="checkbox"/>

If Service users, please give client group:

PSD	<input checked="" type="checkbox"/>	MH	<input type="checkbox"/>	PLD	<input type="checkbox"/>	OP / Frail	<input type="checkbox"/>	Dementia	<input type="checkbox"/>
Drugs / Alcohol	<input type="checkbox"/>	Other	<input type="checkbox"/>						

Did you get any feedback? If so, what was it?

Notable Quote(s) in relation to evidence submitted

Information we collect could be used for the purpose of surveys or feedback primarily within the service. Any case studies published will be anonymised.

Consent to share information (please obtain this where possible from any individual/representative):

I am happy for this information and any quotes to be shared for the purpose of surveys and feedback on my opinions on how Adult Social Care Services has made a difference to me.

Date consent given:

Name:

I am willing to be contacted for further feedback / Interviews in the future (Please tick ✓): YES NO

Please email your completed form along with your performance forms to: sccmonitoring@surreycc.gov.uk

Office Use Only

Unique ID (allocated from Case Studies Database):

Input onto Case Studies Database: Yes No Date input onto Database:

Case Study turned into a story: Yes No File Name:

Category Allocation: Prevention Personalisation Plurality & Partnership
Protection Productivity People

Service Areas covered by case study

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