



Locked Down Not Locked Out

A research report produced by
Parkhead CAB

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Acronyms

AA	Attendance Allowance
CAB	Citizens Advice Bureau
CAS	Citizens Advice Scotland
CASTLE	CABx electronic case recording system
DWP	Department of Work and Pensions
PIP	Personal Independence Payment
ESA	Employment Support Allowance
SCAH	Scottish Citizens Advice Helpline

Note

CAS Network statistics

Citizens Advice Scotland (CAS) is the umbrella body for the network of Scottish Citizens Advice Bureaux. Citizens Advice Scotland provides services to enable its bureaux members to provide advice and information to the public. CAS does not deliver services directly to the public. When CAS network statistics are quoted these are the figures submitted to Citizens Advice Scotland by member bureaux through the electronic case recording system known as CASTLE.

Executive summary

The objectives of the research

The objectives of the research are to understand what the experience of channel shift in the pandemic can tell us about how CABx can best fulfill their aim of providing free, confidential, independent and impartial advice and information and to provide an evidence base for thinking about the balance to be struck between remote and face-to-face provision within the design of future services.

Methodology

All the research was carried out during the period of lockdown or the weeks after initial easing of restrictions.

The research adopted a qualitative method interviewing a total of 44 clients.

- 20 were clients new to the service and who accessed the service using the telephone.
- The remaining 24 clients were people who had visited a CAB service in the past, including some who had done so for a separate issue, some whose case had started pre lockdown and continued post lockdown, and some who were classified as 'vulnerable' and who might have experienced difficulty in using remote services.
- The remote users included clients from all over Scotland who had been supported by Parkhead CAB as part of its delivery of the Scottish Citizens Advice Helpline, while interviewees in the other group were mostly Parkhead clients.

Interviews were also carried out with:

- 3 CAB managers/chief executives, one accompanied by a deputy manager. Two interviews were with urban CABx, one with a rural/ island CAB.
- Four frontline advisers, two working for Parkhead CAB, two for a CAB serving an urban/ rural mixed area.

In addition, email feedback on key lockdown related issues was collated from front line advisers working in a rural/ island CAB.

Statistical data for Parkhead and Citizens Advice Scotland provided triangulation.

Main findings and recommendations

The impact of lockdown on the channels for accessing CAB services

Lockdown has seen an enormous shift in the channel through which clients access CAB services. Most of this shift has been to the use of the telephone, two and a half times greater as a proportion of CAS network¹ clients than pre Covid, but there has also been a significant increase across the CAS network in advice accessed via e mail/ SMS or webchat. Parkhead CAB has seen a very significant rise in the numbers of

¹ Citizens Advice Scotland CAS is the umbrella body for the network of Scottish Citizens Advice Bureaux. Citizens Advice Scotland provides services to enable its bureaux members to provide advice and information to the public. CAS does not deliver services directly to the public. When CAS network statistics are quoted these are the figures submitted to Citizens Advice Scotland by member bureaux through the electronic case recording system known as CASTLE.

people using the telephone, little increase in the small numbers using e mail/ web chat/ SMS.

The impact of channel shift during lockdown on the characteristics of people accessing the service, and the issues with which they are seeking help

There has been a significant change in the characteristics of people accessing CAB services since lockdown.

Clients are:

- More likely to be of working age, and amongst those of working age, more likely to be younger.
- More likely to be in employment.
- Based on Parkhead CAB figures, less likely to be disabled/ have a long term health condition.

In terms of issues:

- Clients are much less likely to be accessing the service seeking help with debt issues and immigration and asylum issues.
- Clients are much more likely to be accessing the service seeking help with employment issues.

It is not possible from the statistics alone to assess the impact of the post lockdown channel shift on either the characteristics of clients, or on the issues with which they are seeking help.

The evidence on client characteristics is consistent with older people and disabled people/ people with long term health problems being put off accessing the service because they cannot get face to face appointments. There is evidence from interviews with 'vulnerable' clients which supports this explanation. Similarly, interviews with staff suggest both some possible reluctance from these client groups to access services remotely because of lack of digital equipment and skills and or phone credit, and that the suspension of outreach services, and difficulties clients have had accessing other support agencies which are CAB referral partners, will have reduced access.

External changes are the clearest explanation for some of the shift in issues with which clients present. Most simply, the Government's furlough scheme and Covid driven economic turmoil has increased demand for advice about employment issues, whilst requirements for increased use of forbearance have reduced demand for debt advice. Growth in the former has been greater than the decline in the latter, and that growth seems to at least partly explain the shift to more clients being of younger working age.

Lockdown has meant changes in the benefit system. The growth in unemployment has increased the number of people who may need help to access Universal Credit. In contrast, there will have been downward pressure on demand resulting from suspension of the use of sanctions, as were appeals (initially) and face-to-face assessments in relation to disability related benefits. Reductions in the proportion of disabled people accessing the service might at least in part be explained by their experiencing less need for support with claiming disability related benefits.

The impact of channel shift on the experience of initial engagement between clients and advisers

Telephone clients who had newly engaged with the service, and those who had re-engaged with the CAB having received support from them in the past, spoke very positively about the experience of initial engagement with the CAB, including the quality of staff they engaged with, and the speed of response to their initial contact, which stood in contrast to experiences with other organisations.

The waiting time for a call to be answered or a call back varied, however, the most important factor for clients was that the CAB honoured its promise to 'call back'. Where people had concerns about accessing services, for example lacking confidence or experiencing a degree of shyness, these issues appear to have been overcome. Existing clients and vulnerable clients expressed a strong preference for face-to-face interviews in their initial contact with bureaux. Nervousness in talking about problems or discussion of personal issues were barriers to access which they felt were overcome by a face-to-face interview. Vulnerable clients also mentioned lack of digital skills and technology, overcoming language and literacy difficulties and health issues when expressing a preference for face-to-face contact.

Advisers were less positive about initial engagement on the telephone, although they felt that they had generally managed to establish a rapport with clients. Challenges related to rapport included not being able to read clients' body language, and getting the right tone in conversation.

Some challenges were reported determining the right point to ask for clients' data, dealing with clients concerns around data, and providing support to an increasing number of clients requesting anonymity. Some advisers had particular concerns about the experience of initial engagement of vulnerable clients, often mentioning people with mental health problems, or people without English as a first language.

The impact of channel shift on the delivery of a holistic service, casework support and sustaining client engagement

Clients reported that they had had a positive experience of accessing holistic support from the CAB. This was true of clients who had accessed the service via the telephone and those who had a face-to-face interview. Many clients faced complex issues which had been dealt with effectively by advisers treating them as individuals not numbers.

Many clients who had a preference for initial contact to be face to face, were happy for follow up to be conducted over the telephone because that initial contact had established a relationship with the bureau.

Staff had more concerns about the challenges of diagnosing clients' needs remotely, particularly in relation to vulnerable clients. Challenges mentioned were:

- Establishing a rapport with clients.
- Not being able to use visual clues about clients' situation and state of mind.
- Not being able to use silence as effectively to give clients the opportunity to talk.
- Establishing an appropriate tone and probing about the issues faced in a non intrusive fashion.
- Needing to avoid being directive in questioning.

Staff reported challenges in delivering case work support remotely, in particular form filling work relating to disability benefits. Effective remote delivery of support with PIP applications, which cannot be carried out online, was seen as potentially difficult

without clients having access to additional help in their home, with barriers to completion including literacy, stamina and personal embarrassment.

The signing of mandates and handling and sharing official documents were seen as more difficult. A number of basic tasks were also seen as taking advisers longer, although one adviser was concerned that she was carrying out one task, the completion of PIP forms, more quickly and was therefore at risk of missing essential detail.

Client interviews did not give a sense that these delivery challenges had been too detrimental to their experience, and both client and adviser interviews gave a sense of the creativity that had been deployed to deal with them.

Client disengagement was not widely identified as a problem by advisers. This might in part reflect some sense that some clients who would be more at risk of disengagement have not engaged in the first place, but it is a positive finding. Some concerns were expressed about the challenges of keeping clients engaged where they have mental health problems or chaotic lifestyles in the context of it being more challenging to establish a rapport with them.

The impact of channel shift impacted on client satisfaction or client outcomes

No evidence was found in the research that the channel shift post lockdown has impacted negatively on either client satisfaction or client outcomes. Satisfaction amongst interviewees in all groups was at notably high levels, and positive outcomes were clearly set out by clients, both on their immediate issues, and on their broader health and wellbeing.

While some clients said that the assistance received had empowered them to 'cope better in the future' others expressed the need for CAB help with future problems. All clients said they would recommend the CAB service to others.

Feedback from vulnerable clients suggested that they particularly valued the advocacy function of CABx, but staff acknowledged that speaking on behalf of clients is more difficult when advisers and the clients are not in physical contact.

Lessons from lockdown for the future delivery of CAB services

The delivery of services through remote channels under lockdown has lessons for the future delivery of CAB services which might be used to shape them for years to come. Our discussion of these lessons is set out below in three main recommendations relating to the balance between remote and face to face advice delivery, and necessary conditions for their effective integration, and two further supporting recommendations focus on the practicalities of supporting remote delivery.

Recommendations

Main Recommendation 1

The delivery of advice through remote channels, particularly telephone, advice should become a core part of bureau activity across the CAS network.

Telephone advice in lockdown has helped expand the demographics that CABx reach, and may offer advantages for particular groups, including those who are working and those who have caring responsibilities and people with mobility issues. Many of those newly reached have either a preference to continue to access the service in that way, or are happy to do so.

Main Recommendation 2

The main channel for service delivery by CABx should remain face-to-face advice, and clients with a preference for accessing face to face services must be able to do so.

Face-to-face, including outreach work, will remain the most appropriate channel for the delivery of some core advice tasks, and the most appropriate and preferred means of engagement for many clients, particularly those most vulnerable.

Main Recommendation 3

Expansion of remote delivery channels as part of the core work of CABx should be a fully funded complement to existing face-to-face work, based on CABx' careful consideration of how they can most effectively integrate telephone advice into their work.

In a context in which increased demand is very likely, both driven by the economic fallout of Covid and the enhanced capacity to access new clients provided by remote advice, sufficient funding must be provided to ensure that remote advice does not 'crowd out' face-to-face advice inappropriately. A computerised system for booking appointments in local bureaux for clients who use the SCAH will need to be set up to accommodate the expansion of the telephone services and to ensure that clients who need face-to-face consultations can be accommodated.

Remote delivery of advice may offer opportunities to ease the access issues CABx often face around delivering drop in services, and offer the opportunity to give clients quicker initial appointments where appropriate. Planning service delivery should be based on the assumption that an increasing proportion of clients will experience of engagement with advisers through a mix of face-to-face and remote contact.

Supporting Recommendation 4

Advisers delivering remote advice should receive appropriate training.

It is clear that the delivery of advice over the telephone involves advisers using a different set of skills from those required to provide face to face advice. It is also clear that some of the successful delivery of telephone advice by clients has been based on the deployment of highly experienced paid advisers, and less commonly, volunteers.

Advisers delivering remotely should have access to comprehensive training focused on building up their relevant specific skills, particularly in relation to establishing a rapport and opening up holistic discussion. CABx should also give careful consideration to the need for advisers to deliver through a variety of channels; there is a clear sense that many advisers will not want to deliver advice remotely full time.

Supporting Recommendation 5

CABx should support some degree of home working for advisers, but maintain an office presence even for the delivery of remote advice.

Aspects of working during lockdown have afforded some advisers the opportunity for better work life balance, often by reducing commuting time, and CABx should be open to offering more flexible working patterns in the future.

However, the formal professional support, the sharing of knowledge, on the job training and case discussion, and the collegiality provided by delivery in an office environment, mean that even for those delivering phone advice, CABx should base work planning on the assumption that remote client contact will be delivered from advisers who are office based.

1. Aims of the research

1.1 Background: the rationale

Parkhead Citizens Advice Bureau is a well-established organisation which has served the East End of Glasgow for some 30 years. At the onset of the Covid 19 pandemic, in common with its 58 sister CABx spread throughout Scotland, it realised that it would have to make large changes if it was to continue to serve its clients.

Since the early days of CABx during the latter part of the second world war, bureaux have in the main operated from offices situated in the communities that they serve. Those strong community links and a focus on the issues and problems of the people living in those local communities are fundamental to the rationale and existence of CABx who, as independent charities, are linked by their membership of the Citizens Advice Scotland (CAS) network.

As times have moved on CABx have grasped new technology and the benefits it can bring in terms of offering accurate, up to date and comprehensive information supporting fulfillment of the first aim of the service; to ensure that clients are aware of their rights and able to benefit from their entitlements. Technology has also been important in professionalising the operations of bureaux, for instance, in provision of online information, and in enabling electronic case recording and the gathering and collation of the data underpinning fulfillment of the second aim of CABx; to advocate and lobby for legislative and policy change based on the evidence of clients.

However, face-to-face interviews remain at the core of CABx ability to offer a holistic service in which; problems are fully diagnosed; information is delivered at the level needed by the client; and the client is supported, if necessary through case work, to seek a full resolution of all their issues.

The onset of Covid 19 meant that it was no longer possible for bureaux to offer a face-to-face service. Throughout Scotland CABx offices closed and bureaux staff, in co-operation with CAS, rapidly scaled up their capacity to deliver advice to their local communities by telephone and to a much lesser extent by email and web-chat. In addition, CAS in co-operation with local bureaux launched the Scottish Citizens Advice Helpline, SCAH, a free phone number staffed by locally based CABx staff able to answer calls from any part of Scotland.

While the pressure and presence of Covid 19 demanded immediate action, CABx have also been aware for some time of pressure from funders to 'channel shift', that is to offer more information and advice on-line and to make greater use of the telephone and other digital means of communication to address advice needs. In the context of austerity, such pressures have often had underlying financial motives: the assumption being that provision of online information and advice delivered by telephone might prove to be cheaper and less staff intensive. The push to 'channel shift' is not confined to CABx, but reflects shifts across public services, as claimants of Universal Credit and numerous other benefits will testify. For some government departments and private companies it has become the new norm to offer a largely digital service.

CABx have championed channel choice, but have also expressed concerns that any shift from face to face advice may disadvantage specific groups of clients, especially the most vulnerable. In response they have campaigned to raise awareness of the digital divide and point out the drawbacks of channel shift for particular groups of clients.

CAS research has highlighted high levels of digital exclusion amongst clients. In a 2017 survey one third had difficulty in using a computer, 16% said they did not know how to use a computer at all and 18% said they had never used the internet. Common barriers to use of digital services included the costs of phone, data and broadband². It is also the case that in many parts of remote Scotland, broadband is extremely weak or non-existent.

The onset of the pandemic and the necessity of moving to offering a remote service by telephone, email or webchat therefore raised a number of questions some of which this piece of research tries to address.

1.2 Research objective, aims and questions

The objective of the research is to understand what the experience of channel shift in the pandemic can tell us about how CABx can best fulfill their aim of providing free, confidential, independent and impartial advice and information, providing an evidence base for thinking about the balance to be struck between remote and face-to-face provision within the design of future services.

The research set out three broad aims:

- To compare and contrast the experience of clients accessing 'remote' (telephone/email/ webchat) and face-to-face support from the CABx.
- To compare and contrast the experience of advisers delivering remote advice with previous experience of delivering face-to-face advice.
- To identify any challenges specific to the delivery of remote advice.

To further focus the investigation key research questions were identified as set out below.

Key research questions

- What has the impact of lockdown been on the channels for accessing CAB services?
- How has the channel shift during lockdown impacted on the characteristics of people accessing the service, and the issues with which they are seeking help?
- What impact has this channel shift had on the experience of initial engagement between clients and advisers?
- What impact has this channel shift had on the delivery of a holistic service, casework support and sustaining client engagement?
- Has this channel shift impacted on client satisfaction or client outcomes?
- What lessons does the lockdown channel shift have for the future delivery of CAB services?

Applicability of Findings

The report's statistical analysis explores the experience of one CAB, Parkhead, and the CAS network as a whole. Interviews with advisers and managers explored the experiences of staff from both rural and urban CABx. Client sampling was designed to capture the diversity of experiences amongst clients supported by Parkhead CAB based in an area of economic disadvantage, but included clients living across Scotland. The findings in this report will have resonance across the CAS network.

² (https://www.cas.org.uk/system/files/publications/cas_disconnected_report.pdf).

2: Methodology

2.1 A qualitative approach

The research adopted a predominantly qualitative approach in order to investigate in depth clients' experience of the different types of service they accessed and its impact, and to gain insights from the perspectives of advisers and managers about the benefits and draw backs of providing remote and face-to-face services.

Whilst a qualitative approach does not offer findings with statistical validity, its benefit is to provide a platform for the voices of clients, advisers and managers. The detailed findings described later in this report are robust and offer detailed insights into client experience of various delivery channels that identify important lessons for the design and operation of multi channel CAB service in the future.

2.2 Client recruitment and interviews

In depth telephone interviews were conducted with 44 clients, recruited from four specific groups, set out below. (The interview schedules used with each group can be found in the appendix.)

Group 1: 20 clients who had only accessed the CAB service by using the telephone were interviewed. This included clients from across Scotland: urban Glasgow, Edinburgh and Dundee as well as rural areas in Aberdeenshire, Invernesshire and the Borders.

Group 2 9 Parkhead CAB clients who had accessed the service before the start of lock down on 23 March 2020 but whose cases were ongoing. These clients had experience of using the face-to-face service prior to lockdown but had also needed to access advice via the phone subsequently.

Group 3 5 clients who used the telephone to access the CAB about a new issue but at a previous time had used a face-to-face service in a CAB. Again, these clients came from different parts of Scotland, both rural and urban areas.

Group 4 10 clients who were classified as 'vulnerable'. The definition used for this classification included clients who have a disability, suffer severe ill health (either mental or physical) or whose first language is not English. The large majority of these clients had not accessed remote services, and might have been expected to have difficulties in doing so. Most, but not all, of these were Parkhead CAB clients.

The timing of the research was crucial. During the pandemic clients had no option but to use the phone; the clients who used the phone or other digital means of communicating with an adviser provided ready access to a group that had no other experience of CAB service provision. As soon as Parkhead CAB shut its doors and moved over to offering a remote service, new clients were asked whether they would be willing to be interviewed. At the same time, the bureau continued to deal with existing clients, progressing their cases over the phone or by email, thereby providing access to a second group of interviewees, those that had experience of both face-to-face and remote provision.

2.3 Interviewees: advisers and managers

Interviews were carried out with:

- 3 CAB managers/chief executives, one accompanied by a deputy manager. Two interviews were with urban CABs, one with a rural/ island CAB.
- Four frontline advisers, two working for Parkhead CAB, two for a CAB serving an urban/ rural mixed area.

In addition, email feedback on key lockdown related issues was collated from front line advisers working in a rural/ island CAB.

The interview schedules used can be found in the appendix.

2.4 Analysis of the interviews

An approach common in qualitative work was used, employing a matrix and categorising responses against the headings used in the interview schedule in order to provide general conclusions and identify outlying responses.

2.5 Statistical analysis

To provide a backdrop to the interviews and a form of triangulation of results, statistics for Parkhead and for all bureaux in Scotland were accessed. Two four month contrasting time periods were used:

- The first, a pre-Covid period, used figures from 1/11/2019 – 29/2/2020.
- The second time period, from 1/4/2020 to 31/7/2020 represented a four month time period in which bureaux only offered remote services because of lockdown.

The statistics provide information with which to compare and contrast the results of the interviews including data on: methods of client contact; age of clients; disability and health status of clients; employment status and the key issues of advice and information requested.

Our judgement is that the presence of the Christmas/ New Year period in the first period was balanced by the set up time for new service channels during the lockdown period, and that the statistics therefore can support comparison of absolute client numbers as well as shifts in proportions.

3: Analysis of Pre and Post Covid Client/ Service Statistics

This section looks at how Covid-19 has impacted on the work of CABx, looking at changes between the pre and post lockdown period in relation to:

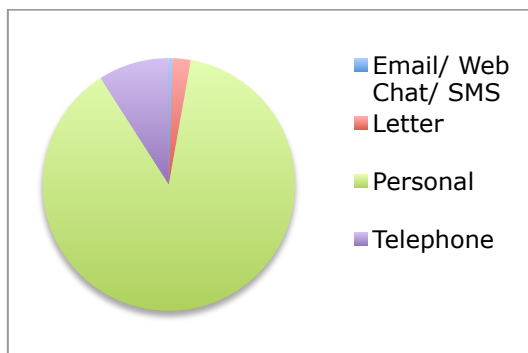
- Access to the service/ method of contact.
- Client base.
- Issues covered.

3.1 Access to service/method of contact

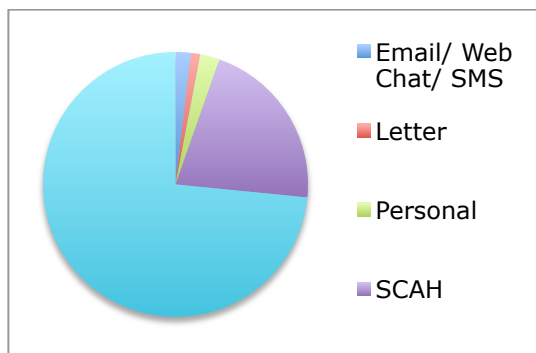
Parkhead CAB Pre and Post Covid

	Pre Covid Numbers	Pre Covid Percent	Post Covid Numbers	Post Covid Percent	Post Covid Numbers Local Only	Post Covid Percent Local Only
Email/ Web Chat/ SMS	7	0.5%	22	1.9%	22	2.37%
Letter	33	2.3%	13	1.1%	13	1.40%
Personal	1265	88.2%	28	2.4%	27	2.91%
Telephone	130	9.1%	1,104 857 direct telephone 247 SCAH	94.6% 73.4% direct telephone 21.2% SCAH	865 836 direct telephone, 29 SCAH	93.3% 90.2% direct telephone, 3.1% SCAH
Total	1,435	927	1,167		927	

Parkhead Pre Covid



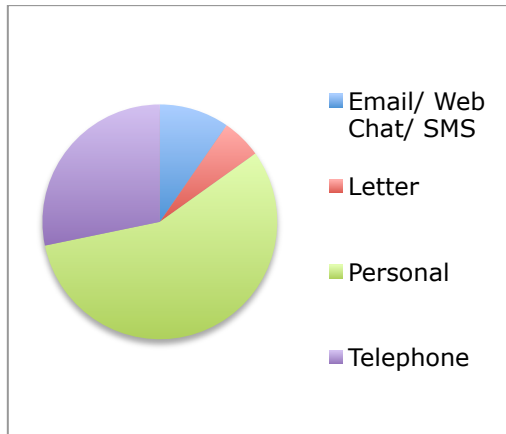
Parkhead Post Covid



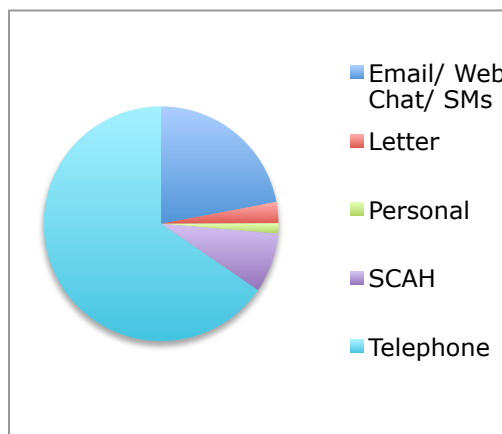
CAS Network

	Pre Covid Numbers	Pre Covid Percent	Post Covid Numbers	Post Covid Percent
Email/ Web SMS	14,569	9.6%	31,690	22.0%
Letter	8,286	5.5%	4,185	2.9%
Personal	85,631	56.6%	2,060	1.4%
Telephone	42,703	28.2%	106,044 94,212 telephone 11,832 SCAH	73.7% 65.4% telephone 8.2% SCAH
Total	151,189		143,979	

CAS Network Pre Covid



CAS Network Post Covid



Key Points

- Total client numbers are down for both the CAS network and Parkhead CAB in the immediate Covid 19 period. This would be consistent with a reduction in demand for CAB services, and/ or with some clients in need of advice not accessing services. That letter trend will be less visible if some clients who have not previously accessed CAB services have recently done so.
- The statistics on access routes to the service show the transformation after lockdown.
- The increase in the use of telephone advice was significant for CAS clients, from 28.2% to 73.7%, as it was in relation to advice through email/ webchat/ SMS, a proportion that more than doubled.
- For Parkhead CAB, telephone access increased from 9.1 to 94.6% of clients.
- Parkhead CAB has been doing more work with the Scottish Citizens Advice Helpline than the network average.

3.2 Age profile

Age Profile Parkhead CAB Clients

Age Group	Number Pre Covid	Percent Pre Covid	Number Post Covid	Percent Post Covid	Post Covid Percent Local Only
Working Age	613	80.8%	517	78.5%	75.4%
16-17	3	0.4%	2	0.3%	0.5%
18-24	41	5.4%	36	5.5%	4.1%
25-34	106	14%	119	18.1%	14.6%
35-44	149	19.6%	116	17.6%	16%
45-59	243	32%	192	29.1%	30.4%
60-64	71	9.4%	52	7.9%	9.8%
Retirement Age	81	10.7%	80	12.1%	13.2%
65-79	69	9.1%	66	10%	10.5%
80+	12	1.6%	14	2.1%	2.7%
No answer/ Prefer Not	65	8.6%	62	9.4%	11.4%
Sub Total	759		659		

Age Profile CAS Network Clients

Age Group	Number Pre Covid	Percentage of Age Known Pre Covid	Number Post Covid	Percentage of Age Known Post Covid
15 and under	37	0.1%	24	0.0%
Working Age	54,904	83.6%	46,408	87.4%
16-17	313	0.5%	233	0.4%
18-24	4,111	6.3%	4,125	7.8%
25-34	10,480	16.0%	10,251	19.3%
35-44	12,106	18.4%	10,082	19.0%
45-59	20,915	31.9%	16,482	31.0%
60-64	6,979	10.6%	5,235	9.9%
Retirement Age	10,709	16.3%	6,690	12.6%
65-79	8,628	13.1%	5,476	10.3%
80+	2,081	3.2%	1,214	2.3%
Total Age Known	65,650	100.0%	53,122	100.0%
Not Stating Age/ Age Unknown	6,903	9.51%	15,459	22.54%

Key Points

- There appear to have been significant issues across the CAS network in recording the age of clients. Parkhead CAB has experienced fewer of these issues than the network as a whole, or has managed them more effectively.
- The proportion of working age people has increased amongst CAS network clients:
 - Absolute numbers of 18-24 years accessing the service have risen, and the numbers of 25-34 years olds barely fallen, even in the context of falling overall client numbers and data collection issues, with the proportion of both rising significantly.
 - The proportion of clients in the 35-44 age group has slightly risen.
 - There have been slight falls in the proportion of clients in the 45-59 and 60-64 age groups.
- The proportion of working age people accessing the Parkhead CAB service since lockdown has trickled down slightly, and their numbers have fallen by 15%. This decrease is amplified when looking at clients from the Parkhead area only.
- The steadiness of the proportion of all Parkhead clients of working age masks a shift within that part of the client base towards people of younger working age:
 - Absolute numbers of 25-34 year olds accessing the service have risen, and the proportion of that age group has gone from 14% to 18%.
 - The proportion and number of every age sub group amongst adults of working age over 35 has fallen, particularly significantly amongst the 60-64 age group.
- These trends are not visible when looking at clients from Parkhead CAB only, suggesting that they are being driven by Parkhead CAB's engagement with the SCAH helpline.
- The proportion of CAS network clients of retirement age was about 1 in 6, higher than that for Parkhead CAB. It has fallen back to about 1 in 8, around 4 percentage points down since lockdown.
- This would be consistent with the CAS network experiencing challenges engaging with older people since lockdown.

- The proportion of Parkhead CAB clients of retirement age was quite small prior to lockdown, and has increased slightly since, absolute numbers of older people accessing the service holding steady in a situation in which overall client numbers have decreased.
- This would be consistent with Parkhead CAB having sustained the access of older people who have previously used the service/ groups of older people, perhaps those better connected to services in general.

3.3 Disability

Parkhead CAB: Prevalence of Self Reported Disability Amongst Clients

	Percent All Clients Pre Covid	Percent All Clients Post Covid	Percent Clients where Disability Status Known Pre Covid	Percent Clients where Disability Status Known Post Covid	Percent Clients where Disability Status Known Post Covid-Local Only
Disability	53.1%	45.4%	61.9%	53.6%	63.5%
No disability	32.8%	39.3%	38.1%	46.4%	36.5%
No answer	14.2%	15.3%			

Key Points

- Parkhead CAB has been fairly successful in continuing to record self reported disability amongst clients.
- Amongst all Parkhead CAB clients:
 - There has been a significant shift in the proportion of all clients who have a disability, which has decreased, although those clients are still in a majority.
 - Amongst clients whose disability is known, the percentage point gap between clients with a disability and those without has fallen to 7.2% from 23.8%.
- This would be consistent with there being issues around service access for disabled people during the pandemic, and/ or with less demand from disabled people for help with issues such as disability related benefits/ and/or the DWP putting reviews on hold during the lockdown period.
- This pattern does not hold for clients from the Parkhead area only, where the proportion of clients with a disability has increased slightly.

3.4 Employment

Parkhead CAB: Employment Profile of Clients

	Percent All Clients Pre covid	Percent All Clients Post covid	Percent Clients Status Known Pre Covid	Percent Clients Status Known Post Covid	Percent Clients Status Known Post Covid Local Only
Employed/ Student	24.1%	37.2%	29.9%	43.3%	35.3%
Not Working	48.6%	40.2%	60.2%	46.8%	52.9%
Retired	8.0%	8.5%	9.9%	9.9%	11.4%
No answer/other	19.3%	14.1%			

CAS Network: Employment Profile of Clients

	Proportion All Clients Pre covid	Proportion All Clients Post covid	Proportion Clients Emp. Status Known Pre Covid	Proportion Clients Emp Status Known Post Covid
Employed/ Student	26%	24.5%	36.6%	45.5%
Not Working	33.9%	23.0%	47.7%	42.7%
Retired	10.9%	6.4%	15.4%	11.9%
No answer/ other	29.0%	46.0%		

Key Points

- Parkhead CAB has maintained, and even improved its existing much higher level of recording clients employment status than the broader CAS network, where recording has reduced dramatically.
- Both the CAS network and Parkhead CAB have seen significant shifts in the proportion of clients who are unemployed and employed.
- The CAS network has seen the proportion of clients who are employed overtake the proportion of clients who are out of work;
 - The proportion who are employed has risen from 36.6% to 45.5% of those whose employment status is known.
 - The proportion who are unemployed has fallen from 47.7% to 42.7%.
- Amongst all Parkhead clients, the proportion of clients who are unemployed fall from 60.2% to 46.8%, and the proportion of clients who are in work has nearly overtaken it, rising from 29.9% to 43.3% of those whose work status is known.
- The rise in proportion of clients in work amongst those from the local area only has been less dramatic.

3.5 Issues facing clients

Parkhead CAB

	Number Pre Covid	Percent Pre Covid	Number Post Covid	Percent Post Covid	Percent Post Covid Local Only
Benefits	1291	52.8%	1129	53.7%	56.9%
Debt	409	16.7%	144	6.8%	7.1%
Housing	147	6.0%	111	5.3%	5.2%
Legal Proceedings	134	5.5%	82	3.9%	3.8%
Utilities and communications	98	4.0%	87	4.1%	3.9%
Tax	75	3.1%	95	4.5%	4.6%
Employment	57	2.3%	224	10.6%	7.9%
Finance and Charitable Support	56	2.3%	61	2.9%	2.5%
Immigration, Asylum and Nationality	53	2.2%	26	1.2%	1.3%
Travel/ transport/ holidays	33	1.4%	35	1.7%	1.7%
Consumer	31	1.3%	40	1.9%	1.9%
Relationship	24	1.0%	33	1.6%	1.1%
Health and community care	21	0.9%	19	0.9%	1.2%
NHS Concern or Complaint	9	0.4%	2	0.1%	0.1%
Education	5	0.2%	12	0.6%	0.5%
Discrimination	1	0.0%	4	0.2%	0.2%
	2444		2104 (1,511) Local		

CAS Network

	Number Pre covid	Percentage Pre Covid	Number Post Covid	Percentage Post Covid
Benefits	95,700	46.9%	91,987	44.5%
Debt	28,931	14.2%	20,251	9.8%
Finance and Charitable Support	11,834	5.8%	11,729	5.7%
Legal Proceedings	9,273	4.5%	7,698	3.7%
Housing	9,133	4.5%	9,881	4.8%
Utilities and communications	8,608	4.2%	5,325	2.6%
Employment	8,573	4.2%	26,630	12.9%
Tax	7,190	3.5%	8,627	4.2%
Immigration, Asylum and Nationality	6,552	3.2%	3,370	1.6%
NHS Concern or Complaint	4,337	2.1%	3,403	1.6%
Relationship	4,164	2.0%	4,509	2.2%
Travel, transport and holidays	3,282	1.6%	3,569	1.7%
Consumer	2,962	1.5%	3,961	1.9%
Health and community care	2,606	1.3%	4,417	2.1%
Education	563	0.3%	962	0.5%
Discrimination	230	0.1%	309	0.1%
	203,938		206,628	

Key Points

- Although the number of clients fell between the two periods, the CAS network saw the number of issues dealt with rise, a rise in the issues per client.
- Parkhead CAB saw both its number of clients and the number of issues with which it was dealing fall by very similar proportions, suggesting no change in the number of issues per client.
- There was little change at either level in the proportion of the total of the most common issues dealt with by CABx, those relating to benefits.
- The most dramatic shift was seen in the employment issues dealt with:
 - Across the CAS network these more than trebled in both number and proportion, and now constitute more than 1 in 8 of the issues dealt with by the CABx.
 - For Parkhead CAB, the absolute number of employment issues nearly quadrupled within a reduction in total numbers, to constitute over 1 in 10 (less for local clients only) issues from previously being less than 1 in 40.
- Debt forbearance measures under the Covid response may be having an impact on people seeking help from CABx:
 - There was a significant fall in debt issues across the CAS network, from nearly 29,000 to just over 20,000 cases, from 1 in 7 to 1 in 10 issues dealt with.
 - Parkhead CAB saw an even larger fall in the absolute number of debt issues, more than halving from 409 to 144, and going from 1 in 6 issues dealt with to 1 in 16 (1 in 14 for local clients only).
- There were significant falls in relation to immigration, asylum and nationality issues being dealt with, perhaps reflecting reduced migration flows, reduced activity from the Home Office or language difficulties in accessing the service by phone.
 - This was the most significant proportionate change for the wider CAS network, numbers nearly halving, and the proportion of such issues going from 3.2% to 1.6%.
 - For Parkhead CAB, the proportion of immigration, asylum and nationality cases fell from 2.2% to 1.2% (1.3% for local clients only).
- There were notable falls for both Parkhead CAB and the broader network, in the proportion of people seeking help with legal proceedings, almost certainly reflecting the suspension of such proceedings due to Covid.

4: Experience of New CAB Clients

Interviews were conducted with 20 new clients who had accessed the service by telephone. The clients fell into three groups:

- Clients local to Parkhead;
- Those in Glasgow who contacted Parkhead CAB via the Glasgow Advice and Information Network helpline and
- Clients from all over Scotland who received advice from the bureau because they had telephoned the Scottish Citizens Advice Helpline. These clients came from both rural and urban areas.

Compared with bureaux nationally Parkhead makes limited use of email/SMS or webchat. The interviews therefore focused on remote access by telephone.

Interviews explored:

- Why the client sought CAB help
- Access to the service; route in, triggers for engagement and barriers to the service.
- Clients' experience of the first contact with a CAB adviser
- Clients' experience of follow up work
- Clients' feelings about the service and its impact on themselves and their family
- Comparisons with other remote advice services
- Levels of satisfaction with the service and any preferences for remote or face-to-face

4.1 Client characteristics/ issues affecting

The group 1 clients, the 20 new CAB users interviewed, in the main exhibited similar characteristics to those of clients set out in the previous section being younger, and with over half of the group owner occupiers. The group did not appear to be typical pre-Covid CABx clients.

Benefits were the main issue on which advice was sought with a rise in questions about employment and housing when compared with the pre-lockdown period. Of the 20, four sought advice exclusively about employment, two with housing issues and 14 needed help with benefits but the majority of these were related to issues to do with redundancy or furloughing.

4.2 Access to the service

Just under half the group said they had always known about the CAB and a further half said that the CAB had been suggested by a friend or relative, although most of the interviews took place before the July/August 2020 round of advertising for the Scottish Citizens Advice Helpline which may reflect the lack of mention of TV adverts. A couple of interviewees mentioned other people who had referred them to the CAB, including one employer and a nurse.

Clients had often accessed the service after using the internet to identify the relevant telephone number. Several said that they wished they had phoned the CAB earlier because they had wasted time searching the internet or trying to phone other agencies.

Over one third said that they had telephoned after looking up information on the internet, mentioning that they found different internet sites to be confusing and sometimes offering conflicting information.

Similarly some clients reported that internet searches had not answered their specific question or that they wished for reassurance that they had interpreted the information correctly.

For example, one client commenting on a Government website said he had looked up benefits but was not confident and worried he may end up claiming the wrong thing and be asked to pay it back. He had phoned the CAB because they would *"have a better idea than he did"*. Another commented: *"CAB makes you feel more secure...some stuff can be extremely daunting"*.

None of the interviewees mentioned using the telephone as a barrier in terms of accessing the service.

However, two interviewees had accessed telephone support despite their preferences for other channels. Both specifically mentioned dyslexia as being problematic in understanding written information and in writing and this meant that they would have preferred a face-to-face interview but recognized that during the Covid pandemic this was not an option.

In contrast, a couple of interviewees offered that on previous occasions they had tried to use the CAB but had been put off by lengthy queues at their local CAB and therefore had been happy on this occasion to use the telephone.

4.3 Engaging with the CAB: the first contact

The interviewees had different experiences regarding waiting times for their calls to be answered. While some mentioned phoning and leaving a message to be phoned back, others talked about waiting times ranging from around 5 – 20 minutes.

One client recalled that he initially waited for 20 minutes for the SCAH to answer but that he felt this was reasonable as he knew people were busy. Having taken some information, the adviser said she would phone him back and he had been *"astonished"* that the call back came in 12 minutes. Another client contacting the SCAH said that she waited about 10 minutes for her call to be answered but this was acceptable because there was a system that told you your place in the queue.

Overwhelmingly, even if the client mentioned waiting for a day or even two for a call back, the most important thing for clients was that the CAB had phoned back. Several expressed real surprise at this, reflecting that this was not the case with other agencies. A client who had left a message on an answer machine said: *"they got straight back, it was after 5 but they got straight back"*. Another client was told he would receive a call back within a day and was *"extremely surprised when I did."* The adverse comparisons with other agencies that failed to return calls suggests that CABx are considered reliable and trusted.

Although none of the interviewees said that having to use the phone had prevented them accessing the service, a number of comments demonstrated that some clients are nervous when speaking about personal issues. One client explained that:

"I felt a little awkward talking about medical issues and it took me a few minutes before I started feeling comfortable but my confidence built as the conversation went on."

It was clear from the responses that CAB advisers are able to establish relationships with clients very quickly, despite the interviews being carried out by phone. Interviewees spoke about feeling comfortable, the adviser being 'easy to talk to', helpful and supportive:

" I spoke to a fantastic young lady who was friendly and very knowledgeable."

" It was like chatting to a friend."

Other comments made by the interviewees about the first interview with the CAB were overwhelmingly positive. Specifically and frequently mentioned were that the advisers listened carefully, were friendly and sympathetic, asked relevant questions, were professional and good at explaining rules and regulations for the individual circumstances and provided reassurance to the client that their own reading of information was accurate:

"When feeling vulnerable it is very, very important having someone listening to you that cares."

"I knew I was speaking to someone who could help me."

"The adviser immediately reassured me: 'you're not the only one I immediately felt he was on my side.'"

Several respondents mentioned that the advisers were knowledgeable. Clients also appreciated when advisers indicated that they would research or check information and get back to them. This was seen as extremely helpful in ensuring that answers were tailored to the individual.

"Much better than 'it might be or could be'...She didn't mind checking at all."

"I got more information than I asked for – but not in a pushy kind of way."

The advisers' ability to deliver complex information at the right level and pace was also commented on:

"He (the adviser) was good at reading people and understanding how to give them information – his way of explaining things was brilliant."

"The information was all broken down – it helped me to understand my father's financial situation better."

4.4 Practical support and follow up

The vast majority of the group 1 clients had called about a single issue (17 out of 20). Excluding initial calls or returned calls to speak to an advisor, in 11 of the 20 cases the clients' issues were dealt with in one interview. Nine cases were more complex and required more than one or several calls.

A typical simpler case involved a recently unemployed client, who described how his advisor gathered information about his circumstances and was able to deal with his issues in a 'prompt' manner. She then helped him to make decisions about which benefits to apply for but also carried out a benefits check using his family details. This

case was dealt with in one phone call, and the client had felt able to make his own applications that he subsequently reported had been successful.

Other cases were more complex and required more than one phone call. As well as researching answers to a client's enquiry and telephoning back with answers, this included tasks like making phone calls to the DWP or council tax offices on behalf of the client, arranging for calls back when forms had been received from the DWP, texting information about the amount of redundancy payment due using SMS because the client was dyslexic, working on the phone with clients to advise them how to complete forms and checking for eligibility and informing clients about their right to claim other benefits.

Examples of such cases included a recently unemployed client who rang to seek help with his UC application. He had been trying unsuccessfully to claim UC for some three weeks but had experienced great difficulties because of his lack of IT skills. The bureau took up his case and after making calls on his behalf to the DWP, were able to telephone him back to reassure him that his telephone claim had been accepted and advise him when the first payment would be made. Another client receiving help with her UC application and a PIP form to be completed for her partner estimated that she had received 10 phone calls from the CAB in relation to her case.

Across cases, even when a client spoke to an advisor on only one occasion there was evidence of a holistic approach following the CAB model of seeking to understand and address all the needs of the client.

In particular, there was evidence that questions were asked by advisers to check for eligibility for benefits other than those mentioned in the initial enquiry. For example:

- A client who wished to apply for AA reported that the adviser also checked whether he might be entitled to other benefits.
- A client who phoned about a reduction in her council tax was informed about her eligibility for a child allowance.
- A UC client who was worried about being able to afford his rent was given information about the Discretionary Housing Benefit and about claiming a Council Tax reduction.
- A client phoning on behalf of her son who has mental health problems was told by the adviser that he was ineligible for ESA and would have to claim UC. The adviser spoke to the son to check whether he was eligible for any other benefits.
- A client who enquired about his redundancy pay was encouraged to make an application for PIP.
- A client on furlough wanted to know whether he was legally obliged to take annual leave, given the information he felt able to speak to his employer.

None of the interviewees spoke about being sign-posted elsewhere or being given inadequate answers.

In more complex cases, it was sometimes one adviser who dealt with the client throughout. Even when a client received calls from different advisers, informants commented that they "didn't mind" because the adviser knew "their story". This contrasts with the complaints about other agencies where clients have been passed onto different people and asked repeatedly to tell their story.

4.5 Impact and outcomes

As most of the enquiries were about benefits, redundancy payments and entitlements to furlough, the resolution of some cases had resulted in immediate financial benefits for the clients. Other clients were still waiting for results.

Equally widely reported were less tangible outcomes relating to impacts on clients' health and well being. Most frequently clients described feeling less stressed or worried as a result of having received advice and better able to cope with their situation. They spoke about: "being able to form a plan of action"; "peace of mind", "a sense of relief" and "one less thing to worry about".

"I was struggling financially and with my partner's mental health... it could have got out of hand and it all felt too much."

"I was reassured he's getting the financial benefits he is entitled to... I would have struggled to do it myself and I would have worried that I was doing the right thing."

"It was all a bit of a relief ... without CAB I would have been lost. I wouldn't have got the redundancy money and I couldn't have filled in the form."

Significantly, over half of the people interviewed said that they felt more confident in being able to take up and pursue their own solutions in the future. One client spoke about now being able to tackle her employer about unpaid wages because she knew her legal rights. Another, given information about AA, felt better able to manage her father's finances. A single mother looking after a son with learning difficulties, having sought clarification of information about Council Tax exemptions, felt: "A lot more confident about dealing with the issue myself." Given information about which benefits to apply for and how to go about it, a recently unemployed client described himself as: "relieved and empowered to pursue the correct avenue".

4.6 Preference for using the telephone or a face-to-face interview

Group 1 clients had only accessed the service using the telephone but were asked questions about their experience of other remote services, and about whether they would have preferred a face-to-face interview.

Overall the majority of interviewees were happy to use the phone and felt that remote access had not lessened the quality of service they received.

Reasons for preferring the telephone service included:

- Ease of access because they lived in a rural area or has a mobility problem.
- Quickness of access.
- A desire for anonymity when living in a small town.
- Not needing to queue.
- Time saving and ease of access because the client was working or had caring responsibilities.
- Lack of a waiting time or in some cases a stated definite window for call back.
- Having poor IT skills and lack of a computer or wi fi.
- Being able to access the service from the comfort of the client's own home.

Many respondents made positive comparisons with other remote services they had tried to access. Particular dislikes identified from their experience with other agencies were: being passed from person to person, having to deal with answering machines or automated responses, being fobbed off with half answers or inadequate information, talking to service staff that 'don't listen' or are unsympathetic, 'waffle and having to press different numbers' and being cut off or not called back when promised. One drawback of the SCAH noted was the inability to offer localized information. However, overall the positive experience of phoning the CAB was described by one interviewee: "I spoke to a real human being – quite a novelty these days."

Despite the positive views on using a remote service, doing so had caused difficulties for some. In particular where complex forms had to be completed, this had proved difficult on the phone. The clients with dyslexia mentioned above were unable to write and therefore had to have relatives or friends to assist them in order to be able to make notes on how to complete forms. One or two interviewees acknowledged that a face-to-face interview would have been preferable, if the issues were complex or involved paperwork.

One of those, who was advised by his doctor to apply for the higher rate of PIP, described the difficulties he had and the help he received from the CAB.

"When that form came through, I'm 63, I thought there is no way that I could manage... It was all done very professionally... they went through all the questions. It took about an hour."

While this client was happy to use the phone service because of the Covid pandemic, he felt the process might have been more easily completed in the CAB office.

One client, who had previously been a CAB volunteer, commented that she thought the phone service was good because she wanted a particular piece of information and confirmation of some issues but that she worried about complex cases and the advisers being able to understand all a client's issues as in a face-to-face interview they "*spread out like a spider's web.*" This comment is echoed by the views of the managers described in section 6.

4.7 Satisfaction with the service

All interviewees, without exception, expressed satisfaction with the service and said that they would use the service again and recommend it to others.

Comments included:

"It (CAB) would be my first point of call"

"I'm glad I phoned and didn't just sit and worry about it... I feel a lot more confident about dealing with the issue myself."

"There was nothing else they could have done... very happy with the overall result."

"The service was done as well as I could have hoped for".

"I'm glad I phoned and I'd gladly phone again if I had other issues."

4.8 Summary of main findings

- Several clients had been prompted into contacting the CAB because they had needed reassurance about information gained through websites.
- Most people had been told about the CAB by a relative or friend.
- Having to use the telephone was not, in the main, a barrier to accessing the service, although some would have preferred a face-to-face interview for personal reasons. Others noted that complex issues or enquiries involving paperwork would be better dealt with face-to-face.
- Some mentioned waiting times in the CAB office as presenting a barrier on previous occasions they had tried to access the service.
- Although some had had to wait for their call to be answered, the most important factor for clients was that the CAB honored promises to call back.
- Clients' experience of their first interview with advisers were extremely positive.
- Although most clients made contact about a single issue, half of all cases required follow up, suggesting advisers adopted a holistic approach to helping clients and taking on casework.
- The financial benefit to clients had been very important, as had the resultant reduction in stress and worry; clients felt this had improved their health and wellbeing.
- Overall clients were very satisfied with the service and did not think that use of the phone had diminished the quality of service.

5: Experience of Ongoing/ Previous Clients/ Vulnerable Clients

Three slightly different interview schedules were used with each of the targeted groups in order to tailor the questions to their experience of bureaux face-to-face use.

Interviews explored:

- Why the client sought CAB help
- Access to the service; route in, triggers for engagement and barriers to the service.
- Clients' experience of the first contact with a CAB adviser
- Clients' experience of follow up work
- Clients' feelings about the service and its impact on themselves and their family
- Comparisons with other remote advice services
- Levels of satisfaction with the service and any preferences for remote or face-to-face

5.1 Client characteristics/ issues affecting

This section deals with the views and experiences of clients in groups 2,3 and 4; that is clients, all of whom have experienced face-to-face and remote delivery of service. Group 2 were the group of Parkhead's ongoing clients whose cases had opened prior to lockdown and all had attended a face-to-face interview. Group 3 were people who used the telephone to access the service on this occasion but who had prior experience of face-to-face service delivery; these clients were drawn from different parts of Scotland. Finally group 4 clients were those classified as vulnerable due to physical or mental ill health or disability, or those for whom English is a second language. Most, but not all, group 4 clients came from the Parkhead area.

These groups of clients exhibited different personal characteristics from those in group 1. One third of the 24 clients fell in the over 45 age bracket, one third were unemployed and one fifth were retired. Most significantly, in 20 of the cases either the client or a family member had poor physical or mental health or a disability. Taking this wider definition of vulnerability (a client or family member with a health issue) the study interviewed more than 10 'vulnerable' people. In terms of housing, 12 clients lived in rented accommodation, 9 were owner occupiers, 2 lived in caravans and one was homeless and living temporarily with a relative.

Benefits were the main issues on which advice was sought (31 of the 44 issues identified) followed by debt (6), employment (3) consumer (2) and immigration (2). The number of issues exceeded the number of clients because most cases involved multiple rather than single issues. Many were quite complex, requiring significant case work by CAB advisers, for example, completion of PIP and ESA forms and requests for mandatory reconsiderations and appeals that were actioned before lockdown. Overall the clients in these three groups were much more typical of the pre-Covid clients of CABx.

5.2 Access to the service

Often contact with the CAB by clients in these groups had been precipitated by an event for instance, communications from the DWP about benefits being stopped or being up for renewal, last warning debt letters, a notice of redundancy or in some cases lack of any means of financial support.

The most common referral to a CAB was via a friend or relative but there was also evidence of referrals by other agencies, usually health professionals and it was clear, particularly amongst group 4 clients, that some had a long standing relationship with a bureau; in some cases amounting to 5-10 years. These interviewees often named the advisers they usually spoke to.

Many of the clients interviewed in these groups wished that they had gone to the CAB earlier than they actually had.

When asked about the barriers to accessing the service and questioned about why they had not visited a CAB earlier, interviewees put forward a number of different reasons. Some said that they had had no understanding of what CABx did or how they were able to help, while others commented that they had tried but failed to resolve their issues with another agency, most usually the DWP, by themselves. Another group mentioned issues to do with the CAB itself, for example, the queues and length of waiting time at a drop-in service or to be given an appointment. Other clients mentioned mobility issues in travelling to the CAB and two clients for whom English was not their first language mentioned that some people would have language difficulties in both face-to-face and telephone interviews.

However, a much larger number of people spoke about their fears: being overwhelmed by 'the paperwork' and not knowing what to do, nervousness in discussing personal issues with strangers and reluctance to admit that they could not deal with the issues themselves:

- A client who became unemployed because of his mental health issues described himself as: not knowing how to claim benefits and facing a situation of mounting debts when he finally went to a drop in session. He admitted that: *"basically I had locked myself away for two months"* and commented *"once you speak to them its all ok"*.
- Another client described how she was initially apprehensive and nervous before the appointment, believing that she was not entitled to anything while other interviewees mentioned feeling awkward about explaining personal details. One mentioned taking a week to "get her head around" deciding to contact the CAB.
- One client explained that she hadn't sought help because she was trying to put a brave face on her situation and pretend it wasn't happening: *"I was embarrassed to say that I was claiming – I felt I wasn't the same person"*.

These comments provide a direct contrast to the group 1 clients, the telephone only users, none of whom expressed a difficulty in initially picking up the phone to CAB.

5.3 Engaging with the CAB: the first contact

The questions for interviewees in this section focused on the initial contact with an adviser in a face-to-face interview. It is important to note that the majority of group 2 clients had had more than one face-to-face interview and 9 out of 10 clients in group 4 (vulnerable clients) had had several face-to-face interviews with a couple of clients mentioning 7-10 and one 15 interviews.

The experience of clients at their first face-to-face interview was reported extremely positively by all clients. Advisers were described by clients as being 'very approachable', putting them at ease, making people feel 'comfortable', showing understanding, sympathy and realising why people might be upset. The following client comments are illustrative. One client described himself as *"feeling much better for having a chat"* while another said the adviser *"showed genuine concern to my issues"*.

Clients, the first quoted below who had initially been very reluctant to approach the CAB reported that:

" I didn't feel like a number...he helped me in my situation ... the help was individualized for me ... I was known for me."

"they made me feel that I wasn't just a stupid old woman."

The ability of advisers to explain the process of claiming for benefits and take the client through a step by step approach was mentioned by several interviewees and clients acknowledged why advisers asked many direct but relevant questions. One interviewee commented:

"they asked lots of questions but I didn't mind because they were interested in me."

Lengthy, complex forms, for example for PIP or ESA, are not easily understood and the role of the adviser in explaining what the DWP wants to know was commented on several times. One client termed the adviser *"brilliant and knowledgeable"*. Another expressed astonishment that an adviser dealing with his application for Pension Credit told him exactly how much he would get and that the information proved correct.

On the negative side, comments were made about the queues for drop in sessions, and there was one remark made about an adviser who was described as looking *'quite harassed'* when the client attended a drop in session that was particularly busy and during which there had also been a dispute amongst clients in the waiting room as to whose turn it was next to see an adviser.

The clients in group 3 had all had contact with the CAB by telephone in addition to an earlier period when they had used a face-to-face service. The experience of these clients mirrored that of the group 1 clients described earlier. Telephone advisers were said to be sympathetic, understanding and easy to talk to. Within this small group there was evidence that their prior use of CAB led them to trust the organisation and therefore consulting by telephone was not seen as problematic.

5.4 Follow up and practical support

All the interviewees in groups 2 and 4 had experienced follow-up of their cases by telephone during the lockdown period. Clients described a range of practical support that the bureaux had offered including:

- Completion or assistance with applications for a variety of benefits including ESA, PIP, AA.
- Emailing forms to clients who had personal or third party access to email.
- Applications for mandatory reconsiderations.
- Telephoning creditors on behalf of a client.
- Writing letters and making phone calls on behalf of a client.
- Making debt repayment plans.
- Making applications for discretionary payments, for example, discretionary housing allowance, the Scottish Welfare Fund and Utility Hardship Fund.
- Representing clients at telephone tribunals.

Where clients had contact with more than one adviser, they were understanding that they could not always see or talk to the same person but also grateful that they did not have to "tell their story all over again".

Turning to the experience of these clients in using the telephone, although some clients expressed a preference for face-to-face interviews, most did not mind having to use the telephone for follow up because they already have an established relationship with the CAB:

"Using the phone is easier once you know who you are dealing with ... then you know who you are talking to".

"You're not just talking to a phone but someone you have met... You can put a face to it".

This conclusion appeared to hold good whether the client had dealt with one or several advisers. One interviewee summed this up as being happy to use the telephone because he had already been in the office and knew he would be speaking to friendly people. Clients generally felt comfortable with phone use because they had trust in the organisation and its advisers. This evidence came through strongly in reviewing the data from both group 2 and group 4 clients.

The organisation of follow up and consistency in progression of cases was noted by many clients who were surprised by the CAB diligence in keeping contact. There were examples of advisers calling clients to find out the results of mandatory reconsiderations and if necessary to lodge appeals, phoning to check that other agencies such as the Council or utility companies had contacted the client and calling to enquire the result of benefit applications or reassure clients that action on their case was being progressed.

Interviewees were both surprised and pleased that the service continued during lockdown:

"I am expecting a call from M (adviser) tomorrow ... once you speak to them its all OK".

"[reflecting on the CAB diligence in phoning back when agreed]Even if you miss their call back – they call again".

However, there were complications and difficulties reported in progressing cases on the phone. These were both logistical and personal.

Clients reported that the completion of forms on the phone could be extremely difficult, especially when they had dyslexia or difficulties in reading and writing. Several clients reported that completing a PIP form or an application for ESA sometimes required the assistance of a third person to take notes. Others noted problems in getting hold of forms and completing them within the required timeframe.

A number of clients with debt and consumer cases suggested that it was good that they had already been to the bureau with paperwork relevant to their case as they could then continue to speak with the adviser on the phone. One interviewee reported that giving a mandate to the bureau to act on his behalf in a negotiation with Scottish Power had taken several phone calls to resolve.

Interviewees also revealed a number of personal obstacles to phone use. One client described how her medical condition and the drugs she had to take meant that she was particularly drowsy in the afternoons and therefore calls to progress her case had to be conducted in the morning. Another client commented that on the phone he is easily flustered and finds it difficult to remember things. A woman suffering from depression remarked that she is often unable to speak on the telephone whereas a face-to-face interview is less intimidating.

5.6 Impact and outcomes

For many of the interviewees outcomes achieved had been financially beneficial. Claims for benefits, enhanced levels of benefits such as higher rate PIP, successful mandatory reconsiderations and appeals had delivered a substantial monetary impact for clients, which for many interviewees had been crucial in maintaining themselves and their households. Passport benefits, such as eligibility for blue badges and car allowances had also been hugely important in enabling people with disabilities, and severe mental or physical health problems to maintain their independence.

There were some cases where the interviewee described the help given by the CAB as particularly crucial. One recalled that on a previous occasion intervention by the bureau meant that she had heat and food over a holiday period. In her words the CAB had "*enabled her to survive*".

In common with the group 1 interviewees, many respondents noted that the help they received had had an additional impact on their health and well being. This was particularly significant given the very high level of health issues among the existing and vulnerable clients and their families.

Comments frequently focused on clients' sense of relief and reduced worry and stress. One client described how the additional money gained through successful PIP applications and mandatory reconsideration had been important to family finances and had also improved family relationships, relieved stress and worry and given her back her independence. She spoke of being in control of the issues she has to deal with and being able to "*do normal things again*".

Another summarised:

"I sleep fine ... I don't worry... I am a lot happier knowing they are there to help – if I've got a problem I know I can sort it".

An interviewee that had with the help of the bureau resolved the debt issues that he had avoided for some time said:

"It really helped knowing someone had my back so I could face up to things... I realised that the best thing to do is to speak to people. It's not as bad as you think it's going to be".

Another client who had experienced debt issues was sure that the help he had received had had an impact on his health and that of his family because they were no longer stressed and worried about arrears. Likewise a client with mobility problems pointed out that the additional money he had allowed him to buy good food and look after himself better, and that if he was less worried about bills that would also have an impact on his health.

Feeling more 'in control' was also a common theme of interviewees. Improved knowledge about the system and eligibility for benefits, knowing what to do or how to go about resolving an issue was empowering for some clients who subsequently felt better able to cope in the future. One interviewee spoke about being less subject to panic attacks when he has to confront authority because he was now sure of his entitlements;

"I am not the same worried person when I walk out...it's a weight off my shoulders and I'm more happy".

However, about two thirds of the clients in groups 2,3 and 4 felt that they would still need the assistance of CAB if they encountered future problems, sometimes this was the feeling that they would need reassurance that they were 'doing the right thing' whereas in other cases the clients felt that they 'couldn't cope alone'.

5.7 Preference for using the telephone or a face-to-face interview

Across all the groups that had experienced both face-to-face and telephone engagement, there was a strong preference for at least an initial face-to-face interview, although as mentioned above many were happy that their case was progressed over the phone once they had visited the office and established a relationship with the bureau.

However there were also a few examples of people who indicated that telephone use had impacted on the service. One client, for example, had not completed an application within the specified time limit because although the adviser had talked her through it on the phone, she had felt unable to write sufficiently well to fill in the answers. The views of interviewees expressing their preference for a face-to-face or telephone interviews are paraphrased below.

Preferences for face to face engagement were based variously on:

- Being able to speak one to one.
- Finding it easier to speak to a real person.
- The value of eye contact.
- Finding it difficult to talk about personal issues over the phone.
- Not finding it easy to complete forms herself post lockdown.
- The adviser not being able to see the client's disability.
- Lacking computer and digital skills.
- Forgetting things when using the phone.
- It being easier to demonstrate that they weren't lying about their health issues.
- Finding it easier to prepare for a face-to-face interview.
- Feeling on edge using the phone.
- Sharing paperwork more easily.
- It being easier for people without English as a first language to engage face to face, being able to use their hands when they don't have the words.
- Being wary of talking to someone on a withheld number because of scams.
- Getting individual attention – sitting down with someone who can help you.
- Being able to establish trust with people you can see.

Some clients expressed preferences for remote services based on:

- A desire for anonymity – living in a small town everyone knows everyone's business.
- Not having a complex issue.
- Not having to wait or queue.
- Not feeling rushed on the phone.

Some clients had no clear preference, suggesting that:

- Cases that require paperwork can be better done face-to-face, whilst simple issues can be dealt with over the phone.
- They were equally happy with the service received by both methods.

5.8 Satisfaction with the service

In common with the group 1 clients interviewed, all respondents expressed satisfaction with the service and said that they would recommend the service to others.

When asked to make comparisons with other face-to-face or remote services, CABx were universally seen as more friendly, more attuned to the needs of the client and able to deliver the advice and information needed. Frequent complaints about non-CABx remote and face-to-face services were: being passed from person to person (on the phone and in offices), just being told to look online, not being offered relevant information (the client had enquired about heating bills and was told to turn the heating down), feelings of being judged, and being given wrong information. In one case the wrong information would have meant the client was much worse off financially had the bureau not stepped in.

Below are a few of the very positive comments illustrating levels of satisfaction with the service.

"A great service –really there to help people."

"I think its brilliant – I don't know where I would have been without it."

" A weight lifted from my shoulders."

"I was blown off my feet the way they treated me – it made such a difference for me."

I trust [adviser] and Parkhead CAB I have received more help from [adviser] than anyone I have received help from in the last 25 years... I can now see a little more light at the end of the tunnel."

5.9 Vulnerable clients

Many vulnerable clients interviewed were older, and it was evident from interviews that those from older age groups are less comfortable with the use of modern technology than younger clients.

While vulnerable clients almost always owned mobile phones, accessing the internet or using email required different skills, which many interviewees in this category felt they lacked. One respondent explained: *"I'm not used to going online, I have no computer, just my phone."* Others also mentioned lack of equipment and skills.

It was also evident that the vulnerable clients welcomed the reassurance that a face-to-face interview could offer through meeting with the adviser. Many expressed their lack of confidence in dealing on the phone with bureaucracies and the confidence that they gained through meeting with a CAB adviser. One interviewee described how he felt he couldn't cope on his own because he panics when he has to speak to big companies like Scottish Power, and that being able to go to the bureau to check that he has understood things properly and gain their support in negotiating with other institutions was crucial.

It was clear from the interviews with vulnerable clients that face-to-face interviews had been important in establishing a relationship of trust between client and the CAB and that this was crucial in enabling the organisation to advocate for the client. Sometimes it was one adviser that the interviewee named as fulfilling the advocacy role but other interviewees spoke of their case being handled by more than one adviser, suggesting faith in the organisation and its ability to advocate on behalf of the client.

Vulnerable clients often reported receiving help with form completion, often a key task assisting clients with disabilities, poor physical or mental health or people whose language is not English, and critical to successful applications. Vulnerable clients reported not always understanding the intent of certain questions, or why they are being asked very personal details.

A client who had recently suffered a stroke explained how she *"thought just because I could do a lot of things I wouldn't be entitled"*, but that her adviser had suggested she keep a diary to help her think about things to help her complete the application. In this case lockdown had prevented the bureau assisting with the actual completion of the form, and it had to be done over the phone, which the client had found extremely difficult because she could not write well. Two other clients with dyslexia experienced similar problems.

Another client applying for PIP detailed how she would *"probably have said how I felt on that day"* rather than make an assessment of the limits that her condition imposes. She went on to say that: *"without the CAB there would have been a massive financial and psychological impact"* and applauded the CAB service on its holistic approach saying: *"they tell you about all your entitlements not just the thing you ask about"*. As an ex-Macmillan nurse, this interviewee commented on the importance of a face-to-face interview in establishing the problems of the client and therefore being able to adopt a holistic approach: *"With face-to-face you can tell if someone is happy or telling you the full story – on the phone you can't see that"*.

Establishing a relationship in which the client feels able to speak openly to the adviser appeared to be more easily achieved in a face-to-face situation. One disabled client described how she preferred a face-to-face interview because *"they could see she wasn't lying about her health issues"*. She also spoke about not minding to talk to the adviser about intimate issues such as her bladder and bowel problems because she had met the adviser and knew him well.

Vulnerable interviewees often clearly expressed the view that they would have experienced significant challenges had they not accessed support from the CAB. One particularly vulnerable client mentioned being desperate when she went to the bureau because she and her husband had had no money and described the help received as a 'lifeline'. Another pointed out at the point he came to the bureau he had no idea how to deal with his debt issues, he had used up all his savings on staying alive. Commenting about a PIP application, a disabled client said: *"I would have filled it all in wrong and been financially much worse off"*.

Many clients simply stated that they would have been baffled by the bureaucracy they faced in the benefit system, and would have felt unable to cope without the knowledge and expertise offered by bureaux, which had prevented potential crises and/ or maintained their independence.

5.10 Summary of key findings

- Most interviewees in groups 2 and 4 wished they had contacted the CAB sooner.
- Barriers to early access included: nervousness and fear of confronting the issue or discussing personal matters. For some a warning letter or a threat to benefit had prompted contact with the CAB.
- The cases of existing and vulnerable clients, in the main, involved more than one issue and follow up case work by the bureau.
- Interviewees were happy with use of the phone for follow up because they already had an established relationship of trust with the bureau.
- Difficulties in use of the phone for follow up frequently involved paperwork or form filling and were both personal (e.g. inability of the client to write) and logistical (e.g. difficulty in getting mandates, forms signed).
- CAB help brought financial benefits but interviewees also reported positive impacts on their health and wellbeing. Some said they felt better able to cope with future issues.
- All interviewees expressed satisfaction with the service.
- Vulnerable clients all expressed a strong preference for a face-to-face service citing lack of digital skills and equipment and health issues as preventing them making full use of remote services.
- Vulnerable clients frequently expressed their inability to cope without the assistance of the CAB.
- CAB help was crucial in helping interviewees to maintain their independence.
- The advocacy function of CAB advisers is very important in preventing crisis.

6: Perspectives of CAB managers and advisers

Interviews were carried out with:

- 3 CAB managers/ chief executives, one accompanied by a deputy manager. Two interviews were with urban CABx, one with a rural/ island CAB.
- Four frontline advisers, two working for Parkhead CAB, two for a CAB serving an urban/ rural mixed area.

In addition, feedback on key lockdown related issues was collated from front line advisers working in a rural/ island CAB.

Interviews explored a range of issues:

- The changes that had been carried out to ensure safe delivery of advice, setting the context for the rest of the discussion.
- Shifts in the client base, with a particular focus on whether channel shift has increased access to the service for some groups and reduced it for others, and shifts in the issues with which clients are presenting.
- The impact of channel shift on the experience of initial engagement with clients.
- The impact of channel shift on the delivery of casework.
- The personal and management challenges that have been involved in the delivery of services under channel shift and lockdown.
- Perspectives on what has been learnt about the future of advice services from the experience of channel shift during lockdown.

6.1 Context

The changes that the Covid-19 lockdown has brought to working patterns have been dramatic for all those interviewed:

- Offices have shut, with no face-to-face access or face-to-face delivery.
- Advice is now delivered by telephone, webchat or e mail, with some CABx having to make significant investment in resources to enable their staff to deliver in this way.
- The closing of outreach surgeries, whether seeking to engage people facing specific issues, for example around mental health, based in hospitals or health centres, or targeting particular communities that would otherwise be underserved, for example in rural areas, or different urban communities.

Many frontline interviewees have:

- Shifted from specialist to generalist work, reflecting the ending of outreach work and/ or the need to backfill the work done in their bureaux by specialist volunteers.
- Moved away from roles supporting volunteers where volunteers have not been involved in delivery.

Some bureaux have continued to involve volunteers in the delivery of their services, some have not. Some interviewees have also had a focus on contacting existing clients to check up on the progress of the issues they are dealing with.

Advisers and managers were careful to stress that the use of telephone and other remote channels was not wholly new to them. Rural CABx have often made these channels available to clients for initial contact and appointments, and ongoing phone contact with clients as cases progress is standard practice and a core part of delivery across the network.

6.2 Changing client base/ changing issues

Most bureaux had suffered an immediate drop in access to the service in the early stages of the post lockdown period as messages about their availability took time to percolate outwards, but had seen numbers bounce back as more people became aware that they were still 'in business'.

Fewer clients

Interviewees and advisers felt that a number of different groups of people were accessing their services in lower numbers.

Some made the general points that many clients would simply be unaware that the CAB services were still there and open, and that they would expect that more vulnerable clients would be less likely to receive messages to that effect. It was feared that the loss of the ability for clients to simply pop into the CAB office to get advice or information about something that had been worrying them meant a number of people were being missed.

Advisers were concerned that groups of clients who had previously been at least partially reliant on referral through other services, whether councils, health services or charities, would be missed if their engagement with those referring organisations had been affected. Similarly, they felt that those who had been engaged through outreach work, for example in health centres, at foodbanks, and at libraries were not accessing services. People with mental health problems or facing destitution were felt to be particularly at risk.

It was feared that clients who were less confident, who were anxious or who find it difficult to establish trust with people, or to access services without being accompanied, again often people with mental health problems or older people, might not take the first step to make contact with the service. One adviser expressed concern about the consequences of those without the support of informal networks being unable to access advice and information.

It was suggested that contact had been lost with some existing clients with whom bureaux had been engaging over a period of time, for example debt clients being supported to engage with repayment plans. One manager felt that in some ways, with new groups accessing the services in greater numbers, 'traditional' CAB clients risked being 'pushed aside.' His bureau had responded by trying to progress cases with existing clients, and following up with clients with whom they had been in contact prior to lockdown.

It was suggested that potential clients may face practical barriers to accessing online/ phone services:

- Advisers working in rural areas identified potential issues around phone signals and broadband access.
- Interviewees from across areas expressed concern about clients who were not digitally included, because of poverty or age, or who did not have the phone credit required to make contact.

More clients

Bureaux reported engaging with many clients who had not come to them before. These clients were reported to be likely to be:

- Younger.
- In employment.
- Less likely to have health issues.

- Students.

In contrast with some of the concerns expressed above, one manager suggested that referrals from their local foodbank had increased in response to economic turmoil.

In contrast to this, the rural CAB manager suggested that in his area there were specific cultural barriers facing the sort of clients newly accessing services elsewhere, with local beliefs in self reliance and pride in independence meaning that people might not want to claim support or be seen to accept charity. This was something he reported had been noted by all the charities working local to him in the anti poverty field.

Changing Issues

Mixed trends were reported in relation to demand for help with benefit issues. It was suggested that there had been a definite drop in demand in relation to disability related benefits despite initial awards being made without medicals access and with appeals and assessments suspended. One adviser reported not having done an ESA case since lockdown when that work had previously been his bread and butter. Similarly, the suspension of sanctions was reported to have triggered a reduction in demand. However, alongside this a significant increase in people seeking help with benefits because they had lost their job was reported.

Some advisers suggested that the balance of these trends meant that there had been fewer clients seeking help with benefit issues overall, others disagreed or had had a different experience. Advisers agreed that any downward trends would not last, as systems kick back into gear, for example with the reinstating of sanctions.

Advisers reported dealing with fewer debt issues, with the forbearance measures being required of creditors meaning that clients are avoiding immediate issues, and do not have debts at the forefront of their minds. One adviser described himself as doing more early, preventative work on debt, and more later stage work, but less 'in the middle'. He suggested that debt issues were likely to be 'the coming storm.'

Interviewees consistently reported increases in the number of employment related issues they were dealing with, for example around furlough, redundancy and holiday entitlement. It was suggested that sometimes this work could involve case work, sometimes people were just checking that things were being done right.

Despite eviction suspensions, some interviewees also reported increases in housing cases, including issues being experienced with landlords, particularly by students.

One manager reported an increase in Pensionwise enquiries as people consider what to do with their pension to supplement reduced incomes.

It was suggested that there had been a rise in consumer issues work, with people seeking to know their rights in relation to the cancellation of travel and holidays. One advisor suggested that she was still getting the same 'random' range of consumer things that she had always had.

One adviser spoke about the variety that he had rediscovered in his work, which he described as being more weird and wonderful than the specialist work he had done previously.

It was also suggested that more clients were coming to bureaux with single issues. The debate about whether this reflected genuine shifts in demand or challenges in identifying multiple issues facing clients is discussed below.

6.3 Experience of engagement

The overarching impression given by interviewees was of facing significant challenges in the process of engaging with clients that they were attempting to deal with as best they could.

Establishing a rapport

Universally, interviewees felt that establishing a rapport with clients, and engaging effectively with them, had become more difficult post lockdown because of the shift to remote working, and not being able to deliver face-to-face, the former seen as lacking 'the human element' in a number of different ways.

Interviewees consistently focused on issues around body language impacting on their ability to engage with people. Reading the body language of clients is seen as essential to assessing a clients' level of comfort, emotional state and level of engagement with, and understanding of, the advice provided.

One adviser pointed out that body language is not just something observed by advisers when delivering face to face, but is something they can actively use in creating a less formal and more relaxed situation for clients at a first interview.

Interviewees suggested that effective remote engagement required greater care, with advisers needing to pay very close attention to their tone, language and use of expressions. It was seen as important for advisers to adopt a less formal tone when delivering over the phone.

It was suggested that remote delivery requires a new set of skills that are not straightforward, and therefore appropriate training.

Some practical challenges were noted.

- Advisers suggested that engagement might not be immediate with clients, and might involve a degree of telephone skills. It was suggested that sometimes initial contact was less formal than the arrangement of an appointment, with clients being reached as and when they and the adviser were free.
- When delivering a service from, and receiving a service at, home, it was suggested there was a constant possibility of interruptions at both ends.

Data issues

Issues were noted in relation to drawing out and recording clients' basic data over the phone, and in providing reassurance about the use of data. Not simply being able to ask clients to complete a form covering their personal issues whilst in reception waiting to see them was keenly felt by some advisers.

Many interviewees had found it difficult to, or decided not to, cover issues around GDPR at the start of their engagement with a client, feeling that this might put them off. Some had suggested that it was difficult to go back and cover those issues at the end and had continued to handle this at the start. Some clients required reassurance that calls were confidential.

Some clients may request anonymity and therefore not wish to provide the range of data that may be requested from them. Two interviewees highlighted an increase in

the number of people requesting to receive the service anonymously, which they said they would accede to, but which would limit what they could do for clients. Interviewees also suggested that clients often did not understand why they were being asked for personal information, or feared that they were being scammed in some way.

Diagnosing clients' issues

Interviewees felt that diagnosis of clients' issues was more difficult over the phone, and that it was harder to open up a discussion over the phone about broader issues that clients might be facing when their initial request had ostensibly been about a single issue. This challenge was felt to kick in from the point of triage onwards although it was qualified by an acknowledgement from some that they already used the telephone for triage, and that they had skilled workers focused on this. This underpinned the concern from many that the service being offered to clients was less holistic than it had been.

Those difficulties were seen as partly underpinned by the lack of visual clues that would be gleaned during face-to-face interaction. Advisers felt it was much easier to identify that clients might have mental health problems or barriers to communication when engaging face-to-face.

Such difficulties might involve issues around body language, but also a range of other clues/ information about clients' lives, for example, not being able to see that they have a hearing aid, use walking aids, have a visual impairment, or on a home visit, that they have had aids and adaptations in place. These factors also impacted on form completion.

Interviewees also referred to the challenges of establishing appropriate pitch and tone to encourage clients to speak about their issues, and of probing gently, and the lack of ability to communicate encouragement or support non-verbally, through nods and smiles.

It was also suggested that advisers:

- Can become more directive over the phone, which can discourage people from revealing all their issues. For some interviewees, phone delivery means a loss of the face-to-face chat which can open up broader discussions.
- Delivering over the phone might feel under pressure to move on due to awareness of other clients waiting.

One manager also reflected that these difficulties partly related to the different nature of silence during a phone call. In face-to-face interviews an adviser may allow a silence to give a client chance to speak, over the phone it is more difficult to do this, given that silence might imply disengagement.

Two advisers acknowledged the challenges involved in achieving a rapport in the new way of working, but felt that their skills and experience enabled them to do this. One based this on his previous experience of working with a call centre, the other on her two decades of experience delivering advice work. Both acknowledged that others might find things more difficult, particularly volunteers. One adviser suggested that clients had tended to be impressed with the range of support that the CAB had to offer, and were therefore open to talking.

Staff more generally felt that those who had been delivering phone advice were amongst their most skilled staff. Critically, staff also felt that they had been given

sufficient time to deliver the service, they had not felt themselves under pressure to 'process' clients quickly, perhaps in contrast to commercial counterparts.

Impact on particular groups

The range of concerns set out above, particularly those about the impact of body language not being visible, were seen as bearing most heavily in relation to people with mental health problems, learning disabilities, or health conditions. Those clients who generally place a greater premium on establishing trust with a service, may need more reassurance and are more likely to lack confidence in communication.

One adviser specialising in work with people with mental health problems spoke of the difficulty that many of his clients have expressing themselves. He highlighted the particularly difficult work needed to establish relationship of trust with people with conditions like schizophrenia, which can be associated with paranoia. Such people need more support to open up about their problems. He reported that lockdown had made it more difficult to involve the referrer (such as a community psychiatric nurse) in initial appointments, something which he felt often helps break the ice with a client and encourages them to talk.

It was also suggested that debt clients were particularly likely to need to build a rapport with services, as they have to share personal stories about difficult financial circumstances.

There could be specific challenges re-contacting particularly vulnerable clients, for example, advisers might not be sure if they could phone someone experiencing domestic violence without putting them at risk.

Response to these challenges

Managers talked about steps they had taken to support advisers to engage with clients and ensure clients to have a smooth experience of service access:

- Drawing up a script to guide advisers.
- Establishing a first contact protocol involving taking personal details and a note of key issues, and then asking a client for a memorable word to be used by an adviser when calling them back.
- The deployment of triage workers to handle all calls and then allocate to advisers according to specialism.
- If a specialist adviser is not appointed, using the time between triage and re-contact to research the case, to ensure a speedy response for the client and that the client is not asked to repeat their story.

6.4 Delivering casework

One of the interviewees summed up the prevailing perspective on the delivery of tasks through remote channels and the impact of lockdown:

"Things have either got worse, or they have stayed the same, they haven't got better. They are as normal as they can be, but that still doesn't mean that they are normal."

Again, this was a source of concern, even though interviewees felt they were coping as best they could, some were concerned that being only able to deliver over the phone was putting their reputation and the CAB brand at risk.

Ongoing impact of issues with rapport

Some of the concerns about engagement with clients were reflected in interviewees' concerns about the delivery of ongoing casework support. In particular it was suggested that:

- It was not possible to deliver as holistic a service as had been provided previously, with empathy and understanding more difficult to communicate, and because delivering holistically becomes more difficult when you are reliant on clients who often do not have any idea that they might have an entitlement to a benefit, or that they have an issue that the CAB can help with.
- Support with accessing disability benefits requires clients to talk about personal and potentially sensitive issues which is much easier in situations in which they have already established a relationship with advisers, which in turn is much easier in a face-to-face situation.
- There would be a temptation to deliver in a box ticking way, which might not open up broader conversations.
- Difficulties establishing a rapport with some vulnerable clients could continue through into challenges facing ongoing engagement, with an enhanced risk of disengagement when working with clients with mental health problems, or clients with chaotic lifestyles who sometimes don't pick up their phone, even when agreed, or who don't call back or who may change their number.

One interviewee expressed concerns focused on issues connected with the delivery of service on a national basis, which interviewees worried would mean a lack of understanding of local situations, and perhaps of local cultures.

Practical issues

Interviewees consistently focused on the challenges of form filling when delivering advice over the phone. The possibility of doing so effectively was seen as dependent on the capacity of clients with potential issues around the ability to write, literacy (including dyslexia) and the impact of mental health problems. Some clients are happy to be 'talked through' completion of a form, others are not. Other clients are happy to be advised on completion by email, others are not. One interviewee suggested that some clients had decided to hold back on claims until they were able to receive face-to-face advice. Attendance Allowance forms were seen as easier than PIP to complete remotely because they can be done online.

It was also pointed out that some clients applying for disability related benefits may lack the stamina to undertake a long session completing a form, and one interviewee noted that she helped clients complete the forms over a series of calls.

Interviewees had tried different fixes including advisers completing forms before posting them out to be checked or signed, or a third party, including family members, supporting the client at their end whilst the advice is given.

Handling official documents was seen as more difficult in a number of ways:

- Clients were not always able to use e mail, and photocopies can be expensive.
- New systems to drop off mandates and forms have been designed, but have still been subject to delay due to hygiene requirements that they be left for 72 hours.

Dealing with mandates electronically was seen as difficult, although 'DocuSign' was mentioned as a potential solution. Creative work was also being done around emailing photographs of documents by both clients and advisers.

Interviewees also mentioned more general challenges going through documents, with more onus being placed on clients to read and understand everything, and problems arising later if they had not.

Interviewees felt that a number of key tasks were taking longer because of delivery over the phone:

- Writing up notes after a call.
- Getting contact details such as chasing up email addresses.
- Dealing with emails when clients send too much information.
- Chasing clients up when they don't answer calls.
- Checking on issues raised, with colleagues not on duty or able to provide 'second tier' advice.

Conversely, one adviser reported that she was taking less time to complete PIP forms, which made her concerned that she was covering less detail.

Responding to situations in which clients are facing some sort of crisis was seen as more difficult, partly because of the absence of volunteers able to cover those or other issues, and because clients cannot have calls made on their behalf so easily without them present and involved and able to make a necessary contribution.

Two interviewees spoke in broadly negative terms about benefit tribunals being delivered over the phone, although they accepted that this was necessary under certain circumstances. They suggested that clients had found the experience strange and difficult, one adviser felt that clients must have felt as if they were communicating with disembodied voices.

One interviewee noted a number of practical issues delivering over the phone from home:

- The dropping out of her or her clients' internet and phone connection, with the need to take numbers to ensure call back.
- Other technology issues at either end.
- Possible interruptions from other household members at either end/ other people in the house overhearing/ compromising confidentiality.
- The need to check that clients' mobiles are charged, and that they are comfortable talking where they are.

Positive changes

Some interviewees highlighted aspects of work that they felt had gone well since lockdown. For some money advice clients new arrangements had given them the opportunity to text requesting contact, thereby supporting their access to ongoing engagement even when they lacked call credit. Phone contact was also felt to have reduced the temptation to cram too much into face-to-face money advice appointments based on the fear of not seeing clients again, instead there was a new acceptance from the start that issues would be dealt with in 'manageable chunks.'

6.5: Personal and management challenges

Interviews explored management and adviser perspectives on the personal and management challenges involved in delivering remote services during lockdown.

Loss of professional support and collegiality

The informal and formal support provided by colleagues was perhaps the major loss reported by interviewees, despite efforts to mitigate it.

This could be seen in professional terms. Interviewees reported that advisers were missing the opportunity to:

- Learn from colleagues and keep up to date on relevant changes.
- Learn informally from overhearing colleagues' cases
- Exchange information about clients and cases.
- Get alternative perspectives on cases.
- Tap into colleagues' expertise, it also being slower, and less convenient for clients to have to research issues yourself.

This could also be seen in emotional terms/ in term of collegiality. Interviewees reported that advisers were missing:

- Psychological support and the ability to unpack/ unburden when dealing with difficult or upsetting cases, including when focusing on work with people with mental health problems.
- The simple collegiality of their bureau; some had found working from home very isolating, compounded by particular issues for those living alone.

One interview included the story of a client who left a phone tribunal because he felt too much under pressure, and then phoned the CAB and said that he wished to kill himself. Dealing with this case had been extremely stressful for the staff member involved, exacerbated by the physical lack of colleagues around him.

Interviewees reported that remote work had felt more intense and that they had needed to take a few more breaks. One had had some concerns about whether he was being as productive, an issue on which he had been reassured by his manager.

It was also suggested that many volunteers get involved for social as well as altruistic reasons and miss the human element and interaction provided in the office.

Attempts to mitigate these losses had been at least partially successful. One interviewee spoke particularly positively about the support she had received from managers and colleagues during lockdown. This had included support to deal with bereavement. She also spoke positively about attempts organised to keep colleagues in contact with each other, including regular quiz nights and zoom sessions.

Work life balance

There were different views on the impact of lockdown on work life balance. Most interviewees had at least welcomed the opportunity to avoid a daily commute, or had found other personal benefits to working from home. However, it was also suggested that working from home could actually reduce work life balance as it made separation between work and home more difficult. Interviewees also mentioned feeling a degree of 'cabin fever' when working from home.

Management challenges

Managers identified a number of challenges involved in remote working:

- Not being able to get a feel for how colleagues are doing through normal social interaction.
- Not being able to give support to colleagues as effectively.
- Not being able to involve volunteers in delivery in the same way, either taking the decision not to have any volunteers delivering remote advice, or to only have some volunteers, which left gaps to be filled.
- Practical issues around not being able to allocate advisers as easily.

Managers had tried different ways to keep in contact with and support colleagues, and felt that their colleagues had been very professional in coping with the situation. Case checking and quality assurance had remained possible through CASTLE, and managers reported daily and weekly catch up sessions. However, they felt that WhatsApp groups and other efforts were no substitute for constant interaction and immediate availability of colleagues, nor for face-to-face supervision.

Job satisfaction

Interviews also explored whether advisers had felt any changes in the satisfaction that they had found in their job. There were different views, although there was universal agreement that the work remained satisfying.

Some felt that not being able to continue their work which involved building close ongoing relationships with clients was a loss to them. Some reported that positive feedback still came from clients who might phone in to thank them, but that they felt the lack of clients popping in to say thank you, and missed the motivation of seeing clients' happy faces. One interviewee had appreciated her shift to doing more actual advice work rather than supporting volunteers, and the increased time that this had meant with clients. Several interviewees were looking forward to getting back to doing the outreach work they had been doing before.

6.6: Future of advice/ lessons Learned

Without exception interviewees felt that CAB services would be different in the future.

Increased phone advice

Interviewees felt that their key learning from the period was that not all issues, and not all groups of people need face-to-face advice, and many clients may have a preference for accessing advice over the phone.

It was agreed that CABx would and should therefore deliver more telephone advice. This was seen as helping bureaux to access new clients, and potentially offering an efficient way of dealing with more clients. It was suggested that telephone advice and telephone triage might help manage the challenges many bureaux continue to face dealing with high levels of demand at drop in sessions, and might assist them to deal with waiting lists.

Critically, it was also seen as helping some harder to reach groups access services, for example, people with young children who might find it difficult to bring them in to the office, where they have to wait, bored, and often cause a distraction to the client when they can be occupied better if the parent is at home. People who were housebound were also seen as possible beneficiaries of telephone services.

Some interviewees felt that volunteers would be as involved in the delivery of telephone advice as paid staff, for example as a complement to their face-to-face drop in work.

Delivering phone advice locally was seen as preferable to having an entire focus on a national helpline, with a local telephone service having the knowledge to provide information about local services, for example, local foodbanks and other charities.

A multi channel future

There was universal agreement that enhanced involvement in telephone provision should only be as part of a multi channel effort to reach a greater spread of clients, and as a complement to face-to-face services. All interviewees felt that stepping back

from face-to-face work would diminish the quality of the service offered because it would reduce access for too many vulnerable people including those with no digital skills; poor English; communication difficulties; mental health issues. In the words of one interviewee:

"We must ensure that CAB does not morph into a service accessible only to literate and tech-savvy individuals."

It was felt that face-to-face advice would continue to be the preference for large numbers of clients, and that this choice should be respected. That preference was shared by a number of interviewees, even if they sometimes were only to meet clients face-to-face on one occasion. Again in the words of one interviewee:

"I think technology is great and has its place but nothing replaces human contact in my book. Many of our clients feel the same."

It was also felt that outreach work would continue to be an essential part of the work of CABx, whether maintaining access to services in other urban or rural communities, or reaching more vulnerable people through other services in locations with which they are familiar and where they are comfortable. A further comment was that outreach enhances relationships with other stakeholders and raises the profile of CABx in the community.

It was suggested that work with referring agencies, and robust referral routes into the service would continue to be essential for more vulnerable clients, with work needed to bolster their capacity to identify their clients/ patients/ service users who might benefit from advice.

Similarly, it was felt that some people struggling to travel should still have access to home visits as well as telephone based services.

The expectation and hope from many interviewees was that clients who could be dealt with over the phone, or those with a preference for phone engagement would access the service through that channel, whilst those who were vulnerable would continue to access face-to-face services.

Key practical learning points

A number of lessons had been learnt about delivering telephone advice:

- It was agreed that the delivery of telephone advice involved a different skill set to delivering face to face support, and would require specific training for advisers, in particular focusing on conducting diagnostic interviews and ways of checking clients have understood information in the absence of visual clues.
- It was agreed that it would not be desirable for advisers to deliver telephone advice all the time. Advisers were felt to need variety; rotas involving one day on telephone, one on face-to-face and one on email/ webchat were suggested as appropriate.
- It was felt to be essential that telephone and face-to-face advice were better linked and integrated.
- It was suggested by some that it was not appropriate or easy to ask for personal details at the start of delivering advice on the phone.
- It was reported that new client groups had often researched their issues online and had very detailed specific questions, which demand higher levels of information in response.

- It was felt that telephone advice does not offer short cuts in delivering follow up work.
- It was felt that more research should be done to establish which types of enquiries need face-to-face.

Working from home

There was no appetite at all for advisers to continue to work for the majority of their time from home, with the emotional and practical aspects of the support available in an office seen as critical. However, some interviewees did feel that some working from home, and flexible working would be appropriate and would benefit them, for example when carrying out tasks such as writing up cases.

The future of tribunals

It was argued that telephone tribunals should not in any way become the norm, and that those undergoing tribunals need to be seen face-to-face by decision makers to really understand their situation. If the emphasis continues to be on appeals and assessments being done on the phone by the DWP, it would be essential to retain to a face-to-face appeal, which enables the appellant's arguments to be put more strongly and their situation to be grasped more clearly.

6.7 Summary of key findings

- Lockdown triggered a cessation of face to face advice and outreach work and a refocus of provision on remote advice, particularly telephone advice.
- After an initial drop off in client numbers, there was a rise in demand for services.
- Staff welcomed success in reaching out to new client groups, younger and more likely to be in employment, but had concerns that clients previously reached by outreach work, clients who had been able to just drop by, and clients who were less confident or needing support to access services, were being missed.
- There had been more work on employment and possibly housing issues, with less relating to debt, and a mixed picture in relation to benefits.
- Staff have worked hard to deal with challenges relating to:
 - Establishing a rapport with clients in the absence of body language and other visual clues, and in conversations in which tone can be difficult to establish.
 - Diagnosing clients' issues.
 - Practical aspects of advice work including form filling, dealing with official documentation and the signing of mandates.
- These challenges have been most acute dealing with people with mental health problems, other health conditions, and disabilities.
- The loss of emotional and professional support gained from working in offices has been keenly felt by advisers, and perhaps a small loss in job satisfaction, but there have been benefits to some in terms of work life balance.
- Staff share a belief that the future will involve delivery of more phone advice, and have learnt a number of key lessons about what should underpin that future channel expansion.

7. Conclusions and Recommendations

This section sets out the answers to the research questions listed in the introduction. It concludes by making a set of recommendations to be considered as CABx develop their post Covid services, based on the lessons that can be drawn from this research.

What has the impact of lockdown been on the channels for accessing CAB services

Lockdown has seen an enormous shift in the channel through which clients access CAB services. Most of this shift has been to the use of the telephone, two and a half times greater as a proportion of CAS network clients than pre Covid, but there has also been a significant increase across the CAS network in advice accessed via e mail/ SMS or webchat. Parkhead CAB has seen a very significant rise in the numbers of people using the telephone, little increase in the small numbers using e mail/ web chat/ SMS.

How has the channel shift during lockdown impacted on the characteristics of people accessing the service, and the issues with which they are seeking help?

There has been a significant change in the characteristics of people accessing CAB services since lockdown.

Clients are:

- More likely to be of working age, and amongst those of working age, more likely to be younger.
- More likely to be in employment.
- Based on Parkhead CAB figures, less likely to be disabled/ have a long term health condition.

In terms of issues:

- Clients are much less likely to be accessing the service seeking help with debt issues and immigration and asylum issues.
- Clients are much more likely to be accessing the service seeking help with employment issues.

It is not possible from the statistics alone to assess the impact of the post lockdown channel shift on either the characteristics of clients, or on the issues with which they are seeking help.

The evidence on client characteristics is consistent with older people and disabled people/ people with long term health problems being put off accessing the service because they cannot get face to face appointments. There is evidence from interviews with 'vulnerable' clients which supports this explanation. Similarly, interviews with staff suggest both some possible reluctance from these client groups to access services remotely, because of lack of digital equipment and skills and/or phone credit, and that the suspension of outreach services, and difficulties clients have had accessing other support agencies which are CAB referral partners, will have reduced access.

External changes are the clearest explanation for some of the shift in issues with which clients present. Most simply, the Government's furlough scheme and Covid driven economic turmoil has increased demand for advice about employment issues, whilst requirements for increased use of forbearance have reduced demand for debt advice. Growth in the former has been greater than the decline in the latter, and that

growth seems to at least partly explain the shift to more clients being of younger working age.

Lockdown has meant changes in the benefit system. The growth in unemployment has increased the number of people who may need help to access Universal Credit. In contrast, there will have been downward pressure on demand resulting from suspension of the use of sanctions, as were appeals (initially) and face-to-face assessments in relation to disability related benefits. Reductions in the proportion of disabled people accessing the service might at least in part be explained by their experiencing less need for support with claiming disability related benefits.

What impact has this channel shift had on the experience of initial engagement between clients and advisers?

Telephone clients who had newly engaged with the service, and those who had re-engaged with the CAB having received support from them in the past, spoke very positively about the experience of initial engagement with the CAB, including the quality of staff they engaged with, and the speed of response to their initial contact, which stood in contrast to experiences with other organisations.

The waiting time for a call to be answered or a call back varied, however, the most important factor for clients was that the CAB honoured its promise to 'call back'. Where people had concerns about accessing services, for example lacking confidence or experiencing a degree of shyness, these issues appear to have been overcome. Existing clients and vulnerable clients expressed a strong preference for face-to-face interviews in their initial contact with bureaux. Nervousness in talking about problems or discussion of personal issues were barriers to access which they felt were overcome by a face-to-face interview. Vulnerable clients also mentioned lack of digital skills and technology, overcoming language and literacy difficulties and health issues when expressing a preference for face-to-face contact.

Advisers were less positive about initial engagement on the telephone, although they felt that they had generally managed to establish a rapport with clients. Challenges related to rapport included not being able to read clients' body language, and getting the right tone in conversation.

Some challenges were reported determining the right point to ask for clients' data, dealing with clients concerns around data, and providing support to an increasing number of clients requesting anonymity. Some advisers had particular concerns about the experience of initial engagement of vulnerable clients, often mentioning people with mental health problems, or people without English as a first language.

What impact has this channel shift had on the delivery of a holistic service, casework support and sustaining client engagement?

Clients reported that they had had a positive experience of accessing holistic support from the CAB. This was true of clients who had accessed the service via the telephone and those who had a face-to-face interview. Many clients faced complex issues which had been dealt with effectively by advisers treating them as individuals not numbers.

Many clients who had a preference for initial contact to be face to face, were happy for follow up to be conducted over the telephone because that initial contact had established a relationship with the bureau.

Staff had more concerns about the challenges of diagnosing clients' needs remotely, particularly in relation to vulnerable clients. Challenges mentioned were:

- Establishing a rapport with clients.
- Not being able to use visual clues about clients' situation and state of mind.
- Not being able to use silence as effectively to give clients the opportunity to talk.
- Establishing an appropriate tone and probing about the issues faced in a non intrusive fashion.
- Needing to avoid being directive in questioning.

Staff reported challenges in delivering case work support remotely, in particular form filling work relating to disability benefits. Effective remote delivery of support with PIP applications, which cannot be carried out online, was seen as potentially difficult without clients having access to additional help in their home, with barriers to completion including literacy, stamina and personal embarrassment.

The signing of mandates and handling and sharing official documents were seen as more difficult. A number of basic tasks were also seen as taking advisers longer, although one adviser was concerned that she was carrying out one task, the completion of PIP forms, more quickly and was therefore at risk of missing essential detail.

Client interviews did not give a sense that these delivery challenges had been too detrimental to their experience, and both client and adviser interviews gave a sense of the creativity that had been deployed to deal with them.

Client disengagement was not widely identified as a problem by advisers. This might in part reflect some sense that some clients who would be more at risk of disengagement have not engaged in the first place, but it is a positive finding. Some concerns were expressed about the challenges of keeping clients engaged where they have mental health problems or chaotic lifestyles in the context of it being more challenging to establish a rapport with them.

Has this channel shift impacted on client satisfaction or client outcomes?

No evidence was found in the research that the channel shift post lockdown has impacted negatively on either client satisfaction or client outcomes. Satisfaction amongst interviewees in all groups was at notably high levels, and positive outcomes were clearly set out by clients, both on their immediate issues, and on their broader health and wellbeing.

While some clients said that the assistance received had empowered them to 'cope better in the future' others expressed the need for CAB help with future problems. All clients said they would recommend the CAB service to others.

Feedback from vulnerable clients suggested that they particularly valued the advocacy function of CABx, but staff acknowledged that speaking on behalf of clients is more difficult when advisers and the clients are not in physical contact.

What lessons does the lockdown channel shift have for the future delivery of CAB services?

The delivery of services through remote channels under lockdown has lessons for the future delivery of CAB services which might be used to shape them for years to come. Our discussion of these lessons is set out below in three main recommendations relating to the balance between remote and face to face advice delivery, and necessary conditions for their effective integration, and two further supporting recommendations focus on the practicalities of supporting remote delivery.

Recommendations

Main Recommendation 1

The delivery of advice through remote channels, particularly telephone, advice should become a core part of bureau activity across the CAS network.

Telephone advice in lockdown has helped expand the demographics that CABx reach, and may offer advantages for particular groups, including those who are working, those who have caring responsibilities, and people with mobility issues. Many of those newly reached have either a preference to continue to access the service in that way, or are happy to do so.

Main Recommendation 2

The main channel for service delivery by CABx should remain face to face advice, and clients with a preference for accessing face-to-face services must be able to do so.

Face to face, including outreach work, will remain the most appropriate channel for the delivery of some core advice tasks, and the most appropriate and preferred means of engagement for many clients, particularly those most vulnerable.

Main Recommendation 3

Expansion of remote delivery channels as part of the core work of CABx should be a fully funded complement to existing face-to-face work, based on CABx' careful consideration of how they can most effectively integrate telephone advice into their work.

In a context in which increased demand is very likely, both driven by the economic fallout of Covid and the enhanced capacity to access new clients provided by remote advice, sufficient funding must be provided to ensure that remote advice does not 'crowd out' face to face advice inappropriately.

Remote delivery of advice may offer opportunities to ease the access issues CABx often face around delivering drop in services, and offer the opportunity to give clients quicker initial appointments where appropriate. Planning service delivery should be based on the assumption that an increasing proportion of clients will experience engagement with advisers through a mix of face to face and remote contact.

Supporting Recommendation 4

Advisers delivering remote advice should receive appropriate training.

It is clear that the delivery of advice over the telephone involves advisers using a different set of skills from those required to provide face to face advice. It is also clear that some of the successful delivery of telephone advice by clients has been based on the deployment of highly experienced paid advisers, and less commonly, volunteers.

Advisers delivering remotely should have access to comprehensive training focused on building up their relevant specific skills, particularly in relation to establishing a rapport and opening up holistic discussion. CABx should also give careful consideration to the need for advisers to deliver through a variety of channels; there is a clear sense that many advisers will not want to deliver advice remotely full time.

Supporting Recommendation 5

CABx should support some degree of home working for advisers, but maintain an office presence even for the delivery of remote advice.

Aspects of working during lockdown have afforded some advisers the opportunity for better work life balance, often by reducing commuting time, and CABx should be open to offering more flexible working patterns in the future.

However, the formal professional support, the sharing of knowledge, on the job training and case discussion, and the collegiality provided by delivery in an office environment, mean that even for those delivering phone advice, CABx should base work planning on the assumption that remote client contact will be delivered from advisers who are office based.

Appendix

Aide Memoire for New Remote Clients

Consent/ Reassurance

- Project is looking at people's experience of using Parkhead CAB's remote advice services.
- It will be used to help CABx across the country plan their services.
- If there are any questions you don't want to answer, just say, and we move to the next.
- You can pause or end the interview at any time.
- Your name will not go into the final report, and there will be no details that could identify you to another person in the report. No one apart from the research team will know that you have spoken to us.
- The interview will be deleted from our systems once the project has been concluded.

Opening Questions.

- Age
- Family status
- Employment status/ recent employment history interviewee and partner
- How would you describe your health?
- How is the health of other people in your family?
- Do you rent/ own your home? Or live with someone else/ in another setting?
- If you rent, who from?

Problems at Time of Referral.

- Why did you seek help from the CAB?
 - Benefits issues.
 - Money management/ setting a budget.
 - Debt/ paying essential bills.
 - Housing problems
 - Employment
 - Other.
- Talk about those issues.
- Were these long term problems, or had something happened to trigger them?

Engaging with the CAB

- How did you hear about the CAB's service?
 - Friend.
 - Family.
 - Poster/ leaflet.
 - Organisation working with you.
 - Online search/ someone else going on line
 - Always known/ seen in passing
- What made you decide to make contact?
- Could you have made contact sooner/ do you wish you had made contact sooner?

- If so, what stopped you?

First contact.

- How did you make first contact with the CAB?
- What were your feelings about making contact by phone/ remotely?
- If you had to leave a message, how quickly were you contacted back?
- Tell us about the person that you spoke to the first time.
- What did they do for you?
- What did they talk about with you?
- What were they like?
- Did they establish a relationship with you?
- How did you feel during/ after the call?
- (If concerns mentioned above) Did that initial person deal with any concerns you had?
- What did you agree to do next?

Follow Up/ First Appointment.

- Tell me about the help and advice you were provided with to deal with your problems, including:
 - The tasks the CAB has carried out to help you.
 - The ways in which you have been in contact.
 - Who has initiated that contact.
 - Whether contact has been by appointment.
 - The number of times you have been in contact with the CAB this time.
- Has it always been the same person that you have dealt with?
- Have you had help with more than one issue?

Feelings about service.

- What did you think about the service that you got from the CAB?
- What was good about it/ different about it/ worked well?
- Was there anything that wasn't good about it?
- Did remote delivery impact on the service/ your experience in any way?

Impact of Advice.

- What was the impact of the resolution of your immediate problems?
 - On the practical issue with which you approached the CAB.
 - On your health and wellbeing.
 - On the rest of your life.
- Do you feel better able to cope with the issues you are facing now/ do you feel in control of that issues/ those issues?
- Would you cope if you hit further problems/ what would you do if you hit further problems?
- Did remote delivery of the service affect the impact of it in any way?

Additionality- Impact

- Would you have been able to deal with these problems yourself with the same outcome?
- Explore reasons for answer.
- What would you have done if you hadn't accessed the service?
- What would have happened to you/ your family if you hadn't accessed the service?

Comparisons/ Last Questions

- What's your general view of the service?
- How does the service compare to any other:
 - **Remote advice** service that you have used in the past?
 - **Remote** service that you have used in the past?
 - **Face to face advice** service that you have used in the past?
 - **Face to face** service that you have used in the past?
- Would you use the service again?
- In the future, once the Covid pandemic has passed and we are in normal circumstances, would you prefer to access face to face or remote CAB services?
- Do you have any suggestions about the way that the service could be improved in the future?
- Any last thing that you would like to say?

Aide Memoire for Continuing Clients Group

Consent/ Reassurance

- Project is looking at people's experience of using Parkhead CAB's remote advice services.
- It will be used to help CABx across the country plan their services.
- If there are any questions you don't want to answer, just say, and we move to the next.
- You can pause or end the interview at any time.
- Your name will not go into the final report, and there will be no details that could identify you to another person in the report. No one apart from the research team will know that you have spoken to us.
- The interview will be deleted from our systems once the project has been concluded.

Opening Questions.

- Age
- Family status
- Employment status/ recent employment history interviewee and partner
- How would you describe your health?
- How is the health of other people in your family?
- Do you rent/ own your home? Or live with someone else/ in another setting?
- If you rent, who from?

Confirmatory Question

- Did your engagement with the CAB on your current issues start before lockdown?

Problems when client had first engagement with CAB

- Why did you seek help from the CAB?
 - Benefits issues.
 - Money management/ setting a budget.
 - Debt/ paying essential bills.
 - Housing problems
 - Employment
 - Other.
- Talk about those issues.
- Were these long term problems, or had something happened to trigger them?
- What made you decide to make contact?
- Could you have made contact / Do you wish you had made contact sooner?
- If so, what stopped you?

Making contact the first time

- How did you make first contact with the CAB?
- How did you feel about contact?
- Tell us about the person that you spoke to face to face the first time.
- What did they do for you?
- What did they talk about with you?
- What were they like?
- (If concerns mentioned above) Did that initial person deal with any concerns you had?
- What did you agree to do next with the person you spoke to?

Face to face advice

- Tell me about the face to face help and advice you were provided with to deal with your problems.
- How many times did you meet face to face with the CAB?
- Did they keep in touch apart from that?
- Was it always the same person that you dealt with?
- What did you think about the face to face service that you got from the CAB?
- What was good about it/ different about it/ worked well?
- Was there anything that wasn't good about it?

Continued Engagement by phone

- Did you phone the CAB or did they phone you?
- If you phoned the CAB – how did you feel about this?
- Did you speak to the same person who had been dealing with your case?
- What further advice did they provide?
- How did you feel during/ after the call?
- What did you think about the service from the CAB on the telephone?
- What was good about it/ different about it/ worked well?
- Was there anything that wasn't good about it?

- How has the experience of accessing the service over the phone differed from accessing it face to face?
- Do you think accessing the service remotely rather than face to face affected the advice that the CAB could give you?

Impact of Advice.

- What was the impact of the advice on your situation?
 - On the practical issue with which you approached the CAB.
 - On your health and wellbeing.
 - On the rest of your life.
- Do you feel better able to cope with the issues you are facing now/ do you feel in control of that issues/ those issues?
- Would you cope if you hit further problems/ what would you do if you hit further problems?
- Has accessing the service remotely impacted on the success of dealing with your issue?

Additionality- Impact

- Would you have been able to deal with these problems yourself with the same outcome? Explore reasons for answer.
- What would you have done if you hadn't accessed the service?
- What would have happened to you/ your family if you hadn't accessed the service?

Comparisons? Last Questions

- Have you ever accessed other advice services remotely before?
- If so, how does the service, both remote and face to face, you had from the CAB compare to those?
- Have you ever accessed other services remotely before?
- Is so, how does the service, both remote and face to face, you had from the CAB compare to those?
- What's your general view of the service you got this time?
- Would you use the service again?
- In the future, in normal times would you prefer to access face to face or remote CAB services?
- Do you have any suggestions about the way that the remote service could be improved?
- Any last thing that you would like to say??

Aide Memoire for Previous Clients Accessing the Service Remotely

Consent/ Reassurance

- Project is looking at people's experience of using Parkhead CAB's remote advice services.
- It will be used to help CABx across the country plan their services.
- If there are any questions you don't want to answer, just say, and we move to the next.
- You can pause or end the interview at any time.

- Your name will not go into the final report, and there will be no details that could identify you to another person in the report. No one apart from the research team will know that you have spoken to us.
- The interview will be deleted from our systems once the project has been concluded.

Opening Questions.

- Age
- Family status
- Employment status/ recent employment history interviewee and partner
- How would you describe your health?
- How is the health of other people in your family?
- Do you rent/ own your home? Or live with someone else/ in another setting?
- If you rent, who from?

Problems at Time of Referral.

- Why did you recently seek help from the CAB?
 - Benefits issues.
 - Money management/ setting a budget.
 - Debt/ paying essential bills.
 - Housing problems
 - Employment
 - Other.
- Talk about those issues.
- Were these long term problems, or had something happened to trigger them?

Engaging with the CAB

- What made you decide to make contact this time?
- Could you have made contact / Do you wish you had made contact sooner?
- If so, what stopped you?

Making contact this time.

- How did you make first contact with the CAB?
- What were your feelings about making contact by phone/ remotely?
- If you had to leave a message, how quickly were you contacted back?
- Did it feel different making contact remotely compared to seeking help face to face?
- Was it easier to make contact because you have already used the CAB service?

Quality of first contact this time

- Tell us about the person that you spoke to this time.
- What did they do for you?
- What did they talk about with you?
- What were they like?
- How did you feel during/ after the call?
- (If concerns mentioned above) Did that initial person deal with any concerns you had?
- What did you agree to do next?

- How did this compare to your first face to face contact with the service?

Follow Up/ first appointment.

- Tell me about the help and advice you were provided with to deal with your problems, including:
 - The tasks the CAB has carried out to help you.
 - The ways in which you have been in contact.
 - Who has initiated that contact.
 - Whether contact has been by appointment.
 - The number of times you have been in contact with the CAB this time.
- Has it always been the same person that you have dealt with?
- Have you had help with more than one issue from the CAB this time round?
- If so, who helped you with those other issues?
- The last time you accessed the CAB, did you get any advice remotely?
- Did accessing the service remotely rather than face to face affect the advice that the CAB could give you?

Feelings about service.

- What did you think about the service from the CAB this time round?
- What was good about it/ different about it/ worked well?
- Was there anything that wasn't good about it?
- Has the experience of accessing the service remotely differed from accessing it face to face?

Impact of Advice.

- What was the impact of advice on your situation?
 - On the practical issue with which you approached the CAB.
 - On your health and wellbeing.
 - On the rest of your life.
- Do you feel better able to cope with the issues you are facing now/ do you feel in control of that issue/ those issues?
- Would you cope if you hit further problems/ what would you do if you hit further problems?
- Was the remote service as successful in dealing with your issue as the face to face service?

Additionality- Impact

- Would you have been able to deal with these problems yourself with the same outcome? Explore reasons for answer.
- What would you have done if you hadn't accessed the service?
- What would have happened to you/ your family if you hadn't accessed the service?

Comparisons? Last Questions

- Have you ever accessed other advice services remotely before?
- If so, how does the service, both remote and face to face, you had from the CAB compare to those services?
- Have you ever accessed other services remotely before?

- Is so, how does the service, both remote and face to face, you had from the CAB compare to those?
- What's your general view of the service you got this time?
- Would you use the service again?
- In the future would you prefer to access face to face or remote CAB services?
- Do you have any suggestions about the way that the remote service could be improved?
- Any last thing that you would like to say?

Aide Memoire for Vulnerable Clients

Consent/ Reassurance

- Project is looking at people's experience of using Parkhead CAB's remote advice services.
- It will be used to help CABx across the country plan their services.
- If there are any questions you don't want to answer, just say, and we move to the next.
- You can pause or end the interview at any time.
- Your name will not go into the final report, and there will be no details that could identify you to another person in the report. No one apart from the research team will know that you have spoken to us.
- The interview will be deleted from our systems once the project has been concluded.

Opening Questions.

- Age
- Family status
- Employment status/ recent employment history interviewee and partner
- How would you describe your health?
- How is the health of other people in your family?
- Do you rent/ own your home? Or live with someone else/ in another setting?
- If you rent, who from?

Problems at Time of Referral.

- Why did you seek help from the CAB?
 - Benefits issues.
 - Money management/ setting a budget.
 - Debt/ paying essential bills.
 - Housing problems
 - Employment
 - Other.
- Talk about those issues.
- Were these long term problems, or had something happened to trigger them?

Engaging with the CAB

- How did you hear about the CAB's service?
 - Friend/ Family.

- Poster/ leaflet.
- Organisation working with you.
- Online search
- Always known.
- What made you decide to make contact?
- Could you have made contact / Do you wish you had made contact sooner?
- If so, what stopped you?

First contact.

- How did you make first contact with the CAB?
- Did you need someone to come along with you that first time/ did someone come along with you that first time?
- Tell us about the person that you spoke to the first time.
- What did they do for you?
- What did they talk about with you?
- What were they like?
- (If concerns mentioned above) Did that initial person deal with any concerns you had?
- What did you agree to do next with the person you spoke to?
- Would you have been prepared to access the service through the phone/ by email?
- Explore reasons for answer.

Delivery of Service.

- Tell me about the help and advice you were provided with to deal with your problems, what the adviser did for you.
- How many times did you meet face to face with the CAB?
- Did they keep in touch apart from that?
- Has it always been the same person that you have dealt with?
- Have you had help with more than one issue?

Feelings about service.

- What did you think about the service that you got from the CAB?
- What was good about it/ different about it/ worked well?
- Was there anything that wasn't good about it?
- If you were to get support remotely rather than face to face, would that have made a difference to how you felt about the service?

Impact of Advice.

- What was the impact of the resolution of your immediate problems?
 - On the practical issue with which you approached the CAB.
 - On your health and wellbeing.
 - On the rest of your life.
- Do you feel better able to cope with the issues you are facing now/ do you feel in control of that issue/ those issues?
- Would you cope if you hit further problems/ what would you do if you hit further problems?

Additionality- Impact

- Thinking about the problems that you highlighted above.
- Would you have been able to deal with these problems yourself with the same outcome?
- Explore reasons for answer.
- What would you have done if you hadn't accessed the service?
- What would have happened to you/ your family if you hadn't been referred/ hadn't accessed the service?

Comparisons.

- What's your general view of the service?
- Have you ever accessed other advice services remotely before?
- If so, how does the face to face service you had from the CAB compare to those?
- Have you ever accessed other services remotely before?
- Is so, how does the face to face service you had from the CAB compare to those?
- Would you use the CAB service again?
- Would you be prepared to use the CAB service again if it was only available remotely?
- If yes, would you prefer that?
- Do you have any suggestions about the way that the service could be improved in the future?
- Any last thing that you would like to say about the issues we've talked about?

Advice Workers Aide Memoire

Scene Setting Questions

- Describe role prior to Covid.
- Describe the current work being done in terms of:
 - Initial engagement.
 - Delivery of advice.

Clients and Issues

- Explore changes to client base.
 - Any groups of clients seeing more of?
 - Any groups of clients seeing fewer of?
 - Groups of clients that are staying the same?
 - Concerns about clients being missed?
- Explore issues that clients presenting with.
 - Any issues seeing more of?
 - Any issues seeing less of?
 - Issues that are staying the same?
 - Concern about people not coming forward with particular issues.

Initial engagement

- Clarify this section is about both first contact and diagnostic appointment.

- Clarify that this is about getting people to engage to the first appointment, establishing a relationship, and drawing information from clients.
- Prompt on each of those aspects of work.
- Explore how this has changed, focusing on:
 - Aspects of this that have got worse/ been challenging, in particular if 'diagnosis' has got more difficult.
 - What losses there have been in terms of not being able to physically see clients.
 - Particular groups of people with whom engagement has become more difficult.
 - How those challenges have been dealt with/ what learning there has been.
 - Any aspects where there has been no change/ where things have got better.

Ongoing Engagement

- Clarify that this is about all the practical work done with people after diagnostic appointment, or at diagnostic appointment when that resolves the issues, about maintaining relationships with clients, and about opening up broader conversations.
- Prompt around each of those aspects of work, focusing on.
- Explore:
 - Aspects that have got worse/ been challenging.
 - What losses there have been in terms of not being able to physically see clients.
 - Whether they feel that there has been an impact in terms of being able to deliver a holistic service.
 - Particular groups of people with whom engagement has become more difficult.
 - How those challenges have been dealt with/ what learning there has been.
 - Any aspects where there has been no change/ things have got better.

Reflections on Personal Challenges.

- Reflections on how it has felt to deliver advice in this way.
 - What has been challenging about it, professionally and personally.
 - How have those challenges been mitigated/ met.
 - What has not changed about the personal challenges.
 - What has been better about delivering advice.
- Has involvement in advice work been as satisfying?

Future Shape of Advice Services.

- What have you learnt about the way you work over the last few weeks?
- If you had a blank sheet of paper post Covid, how would you design the channel mix for advice services?
 - What would you retain from the way that services have been delivered over the last few weeks?

- How would you ensure that the new channel mix ensured equal access to services and effective delivery of services to all groups?

Any further comments?

Managers' Aide Memoire

Scene Setting Questions

- Describe work done by the bureau prior to Covid.
 - Specialisms and projects.
 - Locations/ outreach.
 - Partnerships.
- Describe the current work being done:
 - Specialisms and projects.
 - Locations/ outreach.
 - Partnerships.
- Practical challenges involved in getting things up and running.

Clients and Issues

- Explore changes to client base.
 - Any groups of clients seeing more of?
 - Any groups of clients seeing fewer of?
 - Groups of clients that are staying the same?
 - Concerns about clients being missed?
- Explore issues that clients are presenting with.
 - Any issues seeing more of?
 - Any issues seeing less of?
 - Issues that are staying the same?
 - Concern about people not coming forward with particular issues.

Initial engagement

- Clarify that this is to reflect on feedback from frontline advisers.
- Clarify this section is about both first contact and diagnostic appointment.
- Clarify that this is about getting people to engage to the first appointment, establishing a relationship, and drawing information from clients.
- Prompt on each of those aspects of work.
- Explore:
 - Aspects of this that have got worse/ been challenging.
 - Whether there has been an impact in the ability of advisers to diagnose/ identify client issues.
 - Particular groups of people with whom engagement has become more difficult.
 - How those challenges have been dealt with/ how have helped frontline advisers deal with those challenges.
 - Any aspects where there has been no change/ where things have got better.

- What learning there has been.
- Aspects of delivery where expectations have been confirmed.
- Aspects of delivery where expectations have been confounded.

Ongoing Engagement

- Clarify that this is to reflect on feedback from frontline advisers.
- Clarify that this is about all the practical work done with people after diagnostic appointment, or at diagnostic appointment when that resolves the issues, about maintaining relationships with clients, and about opening up broader conversations.
- Prompt around each of those aspects of work.
- Explore:
 - Aspects of this that have got worse/ been challenging.
 - Particular groups of people with whom engagement has become more difficult.
 - What losses there have been in terms of not being able to physically see clients.
 - Whether they feel that there has been an impact in terms of being able to deliver a holistic service.
 - How those challenges have been dealt with/ how have helped frontline advisers deal with those challenges.
 - Any aspects where there has been no change/ where things have got better.
 - What learning there has been.
 - Aspects of delivery where expectations have been confirmed.
 - Aspects of delivery where expectations have been confounded.

Reflections on Personal Challenges.

- Reflections on what advisers have been saying about how it has felt to deliver advice in this way.
 - What they say they have found challenging about it, professionally and personally.
 - How they have met those emotional challenges/ mitigated them.
 - How you have been able to support them in that.
 - What they say has not changed about those personal challenges.
 - What they say has been better about delivering advice.
- Has involvement in advice work been as satisfying?

Reflections on Management Challenges

- Whether it has been more difficult to support advisers in their work.
- Whether it has been more difficult to quality assure the work done by advisers.

Future Shape of Advice Services.

- What have you learnt about the way the CAB works over the last few weeks?
- If you had a blank sheet of paper post Covid, how would you design the channel mix for advice services?
 - What would you retain from the way that services have been delivered over the last few weeks?
 - How would you ensure that the new channel mix ensured equal access to services and effective delivery of services to all groups?
- Do you have concerns about the delivery of services going forward?

Any further comments?