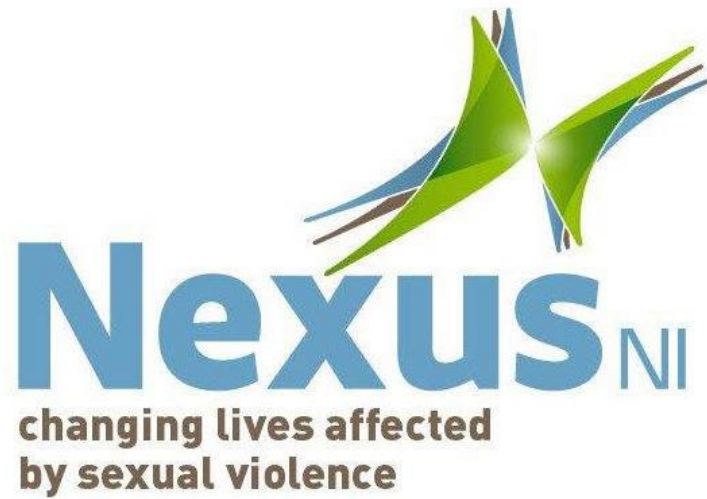


Gauge



Nexus NI SROI Evaluation 2017-18

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Executive Summary

This report presents a Social Return on Investment (SROI) analysis of the adult counselling services delivered by Nexus NI during the period April 2017 to March 2018.

Nexus NI offer counselling at three regional offices (Belfast, L/Derry and Enniskillen) and at various outreach centres throughout Northern Ireland. Waiting lists vary depending on the office or outreach centre. Counselling at Nexus is offered free to those who have been affected by sexual violence.

“We stand with victims of sexual violence and we want to break the silence. We’re here to help anyone affected by sexual violence. We understand the trauma it leaves behind and the impact it can have. We want all victims to know it was not their fault, they are not alone, and that there is strength in coming forward and seeking help. We are here, and you can get in touch today”

Nexus NI website

In 2013, Nexus was one of the first organisations in Northern Ireland to use the Social Return on Investment (SROI) model to measure the impact of their work for all of their stakeholder groups. The subsequent years has seen the organisation significantly expand its service portfolio impacting on a much wider and diverse stakeholder base and delivering increasing social return on investment for funders.

The 2013 analysis concluded that for every £1 invested in Nexus NI’s counselling service, £14.50 of social value was returned with the second study in 2016 finding that this return had increased to £16 for each £1 invested. This upward trend has continued in 2017/18, for the period 1st April 2017 to 31st March 2018 with **the £1,004,602 invested in the period generating £20,327,191 of social value. (See full Impact Map in Appendix 1)** The study’s results were extrapolated over a five-year period, in line with SROI standard methodology. This produced a ratio of social return of **£20 for every £1** invested in the service which is broken down by the various stakeholders in Figure 1.

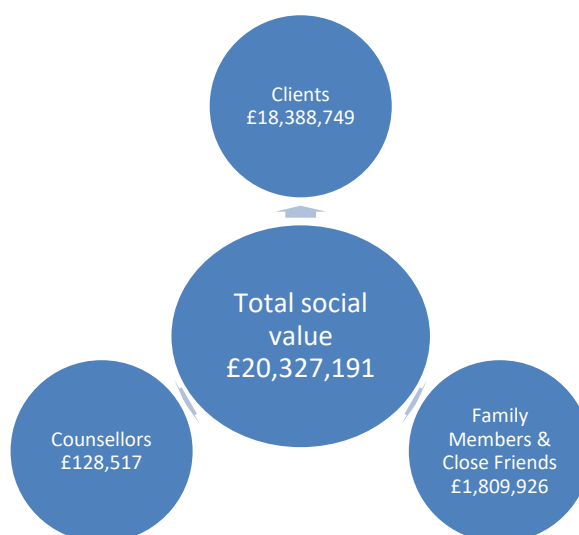


Figure 1 Nexus NI stakeholders' social value

This ratio represents an increase of **£4 for every £1** from 2015/16 and enhances the evidence base underpinning the impact of the Nexus NI Counselling services for their stakeholders. This increased return can be attributed to the increase in the number of people completing counselling annually in 2017/18¹ and the key outcomes from the service experienced by stakeholders which are summarised below.

In summary Nexus NI are delivering counselling services to a client base that is increasing annually by 20% with the same level of resources that were available to the organisation two years ago and continue to deliver life changing outcomes to clients.

Stakeholder	Proposed impact
Clients	Improved relationships & social networks, enhanced capacity to function & contribute to society, reduction in anxiety, improvement in self – worth, increased confidence & sense of well-being, loss of personal shame, enhanced empowerment & sense of achievement
Family Members	Encouraged to access counselling assistance, Improved family relationships
Counsellors	Increased competence and knowledge

Table 1 Nexus NI Stakeholder outcomes

¹ Increased from 450 in 2015/16 to 740 in 2017/17

1. Introduction

Counselling is a form of therapy. It offers a safe, confidential place to talk about life and anything that may be confusing, painful or uncomfortable. It allows people to talk with someone who is trained to listen attentively and to help improve how people feel about themselves. Counselling at Nexus NI is a very personal process and all of their counsellors will adapt their styles to meet individual needs. Just as all clients are individuals, all counsellors are too, they can use different techniques and have different specialisms but all are committed to helping those affected by sexual violence.

Sometimes it is necessary to talk about painful feelings or difficult decisions, so clients may go through a period of feeling worse than when they started. However, therapy should enable clients to feel better in the long-run. Nexus NI adhere to the British Association for Counselling & Psychotherapy (BACP) Ethical Framework for the Counselling Professions and Professional Conduct Procedure' and are a BACP Accredited Service (BACP Ref. No. 101852)

The counselling journey is different for each client but for everyone it starts with an initial assessment, This is the first meeting with a Nexus counsellor. At this meeting the counsellor will talk to the client about counselling and discuss their needs. They will ask questions about their life and experiences and will help the client to decide if counselling is right for them at this time in their life.

Once the client has decided when and where they are able to attend counselling, they will most likely be put on a waiting list for counselling. This waiting time depends on where the client can go for counselling, when they can attend and what demand the service is currently experiencing. At the first counselling session the client will meet the counsellor and will meet the same counsellor every week for up to 18 weeks for 50 minutes. The counselling will be reviewed after every six sessions so that the client can process how they are progressing. Nexus counselling is available to anyone who has been affected by sexual violence at any time in their life.

1.1 Background to Study

Understanding how services and programmes impact upon clients and other stakeholder groups and finding ways of valuing this change and expressing this value in tangible ways is now essential for third sector organisation to such an extent that it is embedded in the performance management and business planning cycles of many such organisations. In August 2018, Nexus NI commissioned Gauge NI to undertake a Social Return on Investment study on the value of Nexus' adult counselling service for the period 1st April 2017 to 31st March 2018.

This represents the third SROI that Nexus had undertaken on its counselling services in recent years with the first in 2013 concluding that for every £1 invested in Nexus NI's counselling service, £14.50 of social value was returned with the second such study in 2016 finding that this return had increased to £16 for each £1 invested. In the two years since Gauge undertook the 2016 SROI Study, Nexus has seen a substantial increase in referrals of over 20%². Table 2 provides additional insight into the 2017/18 Nexus Adult counselling delivery.

² 1863 referrals in 2017/18

Nexus NI Counselling	2017/18 Outputs
Counselling sessions offered	17776
Counselling Sessions delivered	14964
Clients completing counselling	632
Clients not completing	204
Total Referrals	1893
Total Referrals – Male	430
Total Referrals - Female	1463
Referral Age Range 11-16	41
Referral Age Range 16-24	420
Referral Age Range 25-49	1087
Referral Age Range 50-75	345
Referral Age Range 75+	3

Table 2 – Key Outputs Nexus Adult Counselling Service 2017/18

Nexus has also seen the number of people seeking help after being raped or sexually assaulted go up reflecting the positive impact the Rowan Centre, established in 2013, has had in enabling people to be immediately sign posted to access the therapeutic support that they need. The numbers of men coming forward to seek support from Nexus is steadily growing, increasing by 25% in the past two years.

Funding from the Health & Social Care Board (HSCB) accounted for in excess of 90% of counselling sessions for adults (over 16 years old) in 2017/18. However HSCB funding has remained at the same level for the past five years. Nexus received some additional fixed term funding from Trusts & Foundations which, together with increase efficiencies, helped to deal with the ongoing and substantial increase in referrals in 2017/18, though waiting lists and times continue to increase as a result of this challenging funding environment.

2. SROI Study

The following section provides a comprehensive insight into the principles, stages and materiality concepts associated with SROI.

Principles of SROI

SROI is an approach to understanding and managing the value of the social, economic and environmental outcomes created by an activity or an organisation. It is based on a set of principles that are applied within a framework to structure thinking and understanding. It's a story not a number. The story should show how organisations understand the value created, manage it and can prove it. SROI is based on the following seven principles:

Principle	Details
1. Involve stakeholders	Understand the way in which the organisation creates change through a dialogue with stakeholders
2. Understand what changes	Acknowledge and articulate all the values, objectives and stakeholders of the organisation before agreeing which aspects of the organisation are to be included in the scope; and determine what must be included in the account in order that stakeholders can make reasonable decisions
3. Value what matters	Use financial proxies for indicators to include the values of those excluded from markets in same terms as used in markets
4. Only include what is material	Articulate clearly how activities create change and evaluate this through the evidence gathered
5. Do not over-claim	Make comparisons of performance and impact using appropriate benchmarks, targets and external standards
6. Be transparent	Demonstrate the basis on which the findings may be considered accurate and honest and that they will be reported to and discussed with stakeholders
7. Verify the result	Ensure appropriate independent verification of the account

Table 3: Principles of SROI

Stages of SROI

Carrying out an SROI analysis involves six stages:

Stage	Details
1. Establishing scope and identifying key stakeholders	It is important to have clear boundaries about what your SROI analysis will cover, who will be involved in the process, and how.
2. Mapping outcomes.	Through engaging with your stakeholders, you will develop an impact map, or theory of change, which shows the relationship between inputs, outputs, and outcomes
3. Evidencing outcomes and giving them a value	This stage involves finding data to show whether outcomes have happened and then valuing them
4. Establishing impact	Having collected evidence on outcomes and monetised them, those aspects of change that would have happened anyway or are a result of other factors are eliminated from consideration
5. Calculating the SROI	This stage involves adding up all the benefits, subtracting any negatives, and comparing the result to the investment. This is also where the sensitivity of the results can be tested.
6. Reporting, using, and embedding	Easily forgotten, this vital last step involves sharing findings with stakeholders and responding to them, embedding good outcomes processes, and verifying the report

Table 4: Stages of SROI

Materiality

In evaluating the social impact of the selected services, the value being saved or created can be viewed in terms of how narrow these are to selected services. Some impacts will be very narrow and likely to confer tangible savings for an organisation over a short timeframe whilst others will be far less immediate.

2.1 Methodology and approach

SROI analyses assigns a monetary value to the social and environmental benefit that has been created by an organisation by identifying indicators of value which can be allocated a financial proxy. Comparing this value to the investment required to achieve that impact produces an SROI ratio. It takes standard financial measures of economic return a step further by capturing social as well as financial value.

A key principle in SROI is 'Involve Stakeholders' to assess if and how they are affected by the intervention or service. The stakeholders identified and the proposed impact for them is then tested throughout the research and stakeholder engagement phases. Following the stages of the SROI process, the identified outcomes are evidenced through research and data collection to shape the SROI Impact Map. This SROI analysis has been a collaborative effort between the Gauge NI evaluation consultant, the staff working at Nexus NI and identified stakeholders including participants, parents, volunteers and employers. The following steps summarise the approach that was taken to complete the 2017/1 Nexus NI adult counselling service SROI Study.

1. The scope, purpose and duration of the Study subject was agreed with Nexus NI to be the impact of the adult counselling service delivered to clients between 1st April 2017 and 31st March 2018.
2. All stakeholders deemed to be material (relevant) to the Study were identified through discussion. The groups identified as relevant, because of the ways in which they experience change as a result of counselling are:
 - ❖ Clients
 - ❖ Family / close friends of clients
 - ❖ Counsellors
 - ❖ Funders of the service (the six Health Trusts throughout Northern Ireland)
3. Clients and counsellors were consulted to establish the change they had experienced. Family members and close friends were not consulted due to the sensitivities that would be involved.
4. The changes that individuals experienced (referred to as 'outcomes'), what contributed to these changes, and how the changes could be evidenced (or indicated), were mapped. This mapping exercise created Nexus NI's adult counselling service's "Impact Map, 2017/18 (Appendix 1).
5. Each change (or outcome) was evidenced by one or more 'indicator' (a measure of if and how we can be sure the change took place). Each indicator was assigned a financial proxy, a monetary value to signify the value of the change (or outcome) to the stakeholder.
6. The social values calculated using financial proxies were then discounted. The discounting process helps to ensure that the calculated values reflected all of the factors that may have influenced the outcomes. i.e. it recognises that influences beyond Nexus NI counselling may contribute to outcomes.

The methodology deployed for this study included a desk top analysis of all 2017/18 Nexus Adult Counselling data, focus group and individual telephone discussions with a sample of clients, questionnaire survey of clients & counsellors and telephone interviews with a sample of partners & stakeholders.

3. Engagement with Stakeholders

3.1 Clients

The scope of this study was from April 2017 to March 2018 and during this period Nexus helped 740 adult clients complete the counselling process. It is these 740 individuals who are the subject of this SROI Study³ as some started and completed their counselling programme within this timeframe.

Focus Group

The particular sensitivities of the client group meant that considerable thought was given to appropriate means of client engagement. The Gauge consultant was able to conduct a focus group with a group of two clients who had recently completed counselling and who had all progressed to undertake the STEPS personal development training programme. The focus group provided perceptive insights into the ways in which participants had been impacted by the counselling sessions.

The focus group discussion enabled the consultant to identify the most significant areas of change experienced by clients as a result of going through counselling, which was augmented by telephone discussions with a further nine clients. A list of the questions used in the focus group can be found at Appendix 2.

Analysis of SROI Survey to Clients Completing Counselling

The themes that emerged from the focus group were incorporated into an SROI questionnaire which was then circulated to clients who had completed their counselling sessions in 2017/18. However the response rate to the questionnaire from clients was low and was therefore of limited value in establishing the percentage of individuals who had experienced certain outcomes. This questionnaire can be accessed via <https://www.surveymzmo.com/s3/4617682/Evaluation-of-Nexus-Counselling-Service-2017-18-Client-Survey>

Analysis of Data Collected by Nexus NI

Nexus administer a questionnaire of 34 questions (known as 'CORE') to all clients before, at intervals during, and at the end of counselling. Several of the outcomes of the 'distanced travelled' by clients between completing their first and final CORE questionnaires were used as evidence for many of the outcomes that we identified. (Please refer to Appendix 3 for a copy of the CORE 34 questions) Furthermore, CORE pre and post counselling therapy assessment forms are completed for each client. Many of the themes from these pre and post counselling forms were also used as additional evidence of outcomes clients achieved over the course of their counselling. (See Appendix 4 for a copy of the Pre and Post Counselling Therapy Assessment Forms)

³ This represents an increase of 290 clients from the 2015/16 SROI study sample

3.2 Family Members

It was not possible to engage directly with family members of clients because of the sensitivities associated with the counselling clients who attend counselling for sexual abuse or rape, often after a long journey of building the confidence to do so. Family members may or may not be aware of their experiences, or of their decision to undertake counselling. It was therefore deemed that it would not be appropriate to ask clients for contact with family members.

Discussion at the focus group and the questionnaire completed by counselling clients helped to uncover the value of the change in clients to their family members and to the overall family unit. The key change that emerged from the questionnaires and from the focus groups with respect to family members was the change in the nature of relationships and personal interactions, after the client had undertaken counselling.

3.3 Counsellors

Nexus had 60 counsellors in the year 2017/18⁴. An electronic questionnaire survey <https://www.surveymzmo.com/s3/4606966/Evaluation-of-the-Nexus-Counselling-Service-2017-18> was completed by 25 counsellors comprising a representative sample of sessional, part-time and full-time counsellors and individuals from across all of the regions of Northern Ireland. The purpose of the telephone interviews with counsellors was to ascertain the extent to which counsellors experienced change (professionally and personally) as a result of the counselling they undertake with Nexus clients.

Limitations of the Stakeholder Engagement

The limitations placed on access to clients once their counselling sessions are complete makes it difficult to establish how long-term each of the outcomes and changes brought about as a result of the counselling may last. For some, the change may be permanent, for others the change may be temporary, with individuals struggling to maintain lifestyle changes into the future. Estimations of how long-term the impact of each outcome may be for clients have been made in the impact map.

It is important that we emphasise that these are estimations, and Nexus NI may consider methods for tracking samples of their clients in future years which could be integrated with the CORE assessment tool. This would enable Nexus to learn more about the longer-term change for clients who have used their services.

Responses to the client questionnaire were low resulting in a small sample of users to underpin the findings. We were also unable to engage with funders of the service on the impact Nexus NI adult counselling service delivers for them.

⁴ Increased from 42 in 2015/16

4. Impact

This section will examine the impact of Nexus NI services describing the outcomes achieved for each stakeholder group.

4.1 Clients

The main beneficiaries of the Nexus Adult Counselling Service Group are those directly supported i.e. the clients. The research evidence for participant impact was derived from the CORE 34 questions, focus group discussions, questionnaires and telephone interviews. The total valued outcomes for participants is proposed at **£18,388,749**.

One of the dominant themes to emerge from the consultation with clients was how effective the Nexus counselling was in alleviating the shame and guilt that they had been experiencing for many years. Clients felt empowered to understand that many of their thoughts and behaviours in the past were a manifestation of the impact of the abuse/rape they had experienced. This unlocked new, perspectives, energy and strength enabling the achievement of the many positive outcomes that are included in the SROI Impact Map. *“The Counsellor made me feel that what I was going through was normal for someone that had experienced what I had, with this realisation, I was able to cast aside the feelings that I had that it was all my fault and I was a bad mother. With each week of counselling, I improved and began to think positively. At the end of the programme, I had turned my life around and felt ready to return to work”*

The vast majority of the clients consulted had not been or were not in receipt of other counselling or support services which bears testimony to the unique experience and expertise that Nexus can offer to victims of rape and sexual abuse. This has enabled us to assign a high attribution rate in the SROI calculation to the Nexus Counselling for the outcomes achieved *“The change and turnaround in my life is 100% down to the Nexus Counsellor”*

Many of the contributors are now sustaining and developing in their family relationships, education, training and employment and are giving something back through volunteering. We have included a number of quotations from clients which bring to life the extent of the change experienced through Nexus Counselling.

“Without the counsellor, I would be dead, she has given me the tools to cope and basically rebuild myself again. The big breakthrough for me was understanding that it was not my fault and what I was experiencing was normal.”

“I wouldn’t have cared if I had died, I had no purpose and was burdened with guilt and shame. Nexus changed everything for me. The first couple of sessions were so difficult and I knew this would be the case. Gradually with each week, my mindset, feelings and outlook changed and by the end of the counselling, I felt that I could cope and be a mother and have a life.”

“Nexus had the capacity to give me the tools to address all aspects of my life, not just the trauma, the counselling made me feel like a human being again, Nexus is 100% contributing to my change, no other service has worked for me.”

“I had pushed everything away deep into my mind, for years I was neglecting myself and overwhelmed with guilt and shame, I was at breaking point and my GP suggested Nexus. It was life changing for me and my family.”

“Through the Nexus counselling I became more resilient, I am not afraid anymore, I follow the coping strategies. Nexus have been able to unpick so many things in my life that I just could not manage.”

“The darkness has gone away as a result of the Nexus counselling and I have been introduced to other people who have gone through what I have. We laugh together and sometimes cry together.”

“The counselling has given me the tools to take control of my life, I was suicidal and now I know how to cope and get on with my family. I had no other support or service.”

“The counsellor facilitated conversations about my trauma which I thought that I could never have. I got the strength to tell my parents and to confront my attacker.”

“I had a lot of trauma to deal with from my childhood which has shaped my adult life, 30 years of pain, guilt and anguish have been discussed in my counselling and I can't believe the change it has made for me. I am just finished a few months and know there will be challenges but I feel I have the tools to cope, all given to me by Nexus ”

“Nexus has made a massive difference to my life, I am a lot more confident and I don't feel alone. The group has made me aware that there are other people that have went through what I have. I am in the STEPS programme and I am getting so much from giving something back”

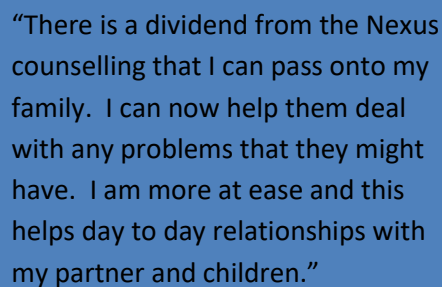
4.1.1 Factors contributing to the identified changes in participants

Discussions with clients helped to identify which elements of the Nexus services they felt were most significant in contributing to the outcomes and impact. The following can be noted as most important factors to client change:

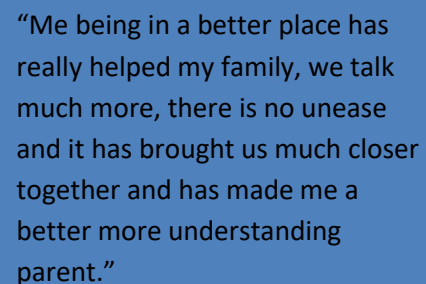
- The professionalism of the counsellors and their specialist expertise in supporting people who have experienced rape and sexual violence.
- Dealing with all aspects of life and not exclusively the trauma
- Increasing empowerment – Nexus providing the tools to sustain change and improvements with the emphasis on the client to use them.
- Focus on sustaining the change through changing attitudes, approach and mindset
- Individual tailored provision- Counsellor works on the client’s level ensuring that the client has ownership and control of each session.
- Getting to the core of the trauma and not avoiding or evading this.
- Identifying coping strategies to deal with ‘the triggers’
- Empathy of the counsellors “They understand what I am feeling, they get it”

4.2 Family

Family were the second group in terms of SROI benefit realising **£1,809,926** of the overall value. The key change that emerged with respect to outcomes for family members from the consultation with clients was the extent to which Nexus counselling interventions improved family relationships and understanding. This change may be understood as an ‘unintended outcome’ of the counselling, derived from their improved understanding of how to form and engage in normal relationships with family and close friends. Without the opportunity to consult directly with family members, we have included the following quotations from clients to help understand better the impact for family members



“There is a dividend from the Nexus counselling that I can pass onto my family. I can now help them deal with any problems that they might have. I am more at ease and this helps day to day relationships with my partner and children.”



“Me being in a better place has really helped my family, we talk much more, there is no unease and it has brought us much closer together and has made me a better more understanding parent.”

4.3 Counsellors

Nexus employed 60 counsellors in 2017/18 in full time, part-time and sessional roles. Twenty- five counsellors completed an on-line questionnaire designed to measure the changes in the lives of counsellors as a result of their work with Nexus. Questions posed included why they have chosen this profession and Nexus, how they deal with the trauma they encounter, self care, continuous

professional development, impact on family and the change experienced by clients. Through the responses, we are able to evidence significantly increased competence and skill as a counsellor which we have included in the SROI calculations realising a total of £128,517 in social value. We have also included a set of quotations which succinctly captures the impact for the counsellors.

“I love the job I do, and I particularly enjoy working for Nexus as they provide an invaluable space for people to express their thoughts, feelings and experiences in a safe environment.”

“I love my work and get great job satisfaction. Nexus are a great organisation to work for and I get great support from my line manager, clinical supervisor and counsellor coordinator plus valuable peer support and training.”

“I have grown as a counsellor and in my understanding and knowledge of the devastating effect sexual violence has on people's lives and how the counselling process aids the healing process. I have been very privileged to have clients trust me enough to share so much of themselves. I have also gained personal development and knowledge which has enabled me to cope better with my own healing and emotional issues.”

“I benefit from being part of the solution. Being a counsellor for Nexus increases my compassion and empathy for those dealing daily with incredible burdens. I am humbled and more selfless than I believe I would otherwise be.”

“I feel with the Nexus training I'm better equipped with knowledge to help and support my clients. I've developed in self-awareness, boundary setting and accept not everyone I work with is ready to move forward and embrace healing.”

“I have been on many training courses in my 15 years at Nexus NI and have continued to grow professionally and gain knowledge and understanding as a counsellor, trainer and supervisor”.

“Health & well-being has improved in as much as I take better care of myself both physically and mentally as I feel very strongly that any shortcomings in your self-care would have a detrimental impact on your ability to work within this area.

“I am more sensitive to the extent of csa/sexual violence in our society and am now regularly voicing my opinion on consent, treatment of victims, squashing myths etc as I think these conversations are important. I no longer shy away from what is seen as difficult or taboo subjects”

“Coping with the emotional impact of the abuse on their lives and their relationships. Improved self-esteem and confidence and learning to take better care of themselves. To have more hope in the future . Let go of negative emotions like guilt and self-blame, be more forgiving of themselves and others.”

“Self esteem is a massive issue for our clients. When they discover a positive impact on this, it has a roll on effect to everything ...family employment relationships etc.”

4.4 Partners & Collaborators

Nexus NI have representation on all of the key strategic policy forums in the sector, these include All Party Groups on domestic and sexual violence, sexual health and suicide prevention. They are also represented on each of the five domestic and sexual violence partnerships in Northern Ireland, are a member of the advisory panel for the independent review of criminal justice led by Sir John Gillen and sit on the stakeholder advisory group for the government strategy for tackling domestic and sexual violence.

Key partner agencies & organisations, include, Department of Justice, Department of Health, Police Service Northern Ireland, Relate, Women’s Aid Foundation, Probation Board Northern Ireland and the Rowan Centre. This evaluation conducted telephone interviews with a sample of partner organisations to assess the impact of working collaboratively with Nexus NI. The following are the key findings from these consultations.

- Nexus NI are the biggest referral pathway from the Rowan Centre which is the regional Sexual Assault Referral Centre (SARC) for Northern Ireland, in addition, Nexus also provide specialist training to staff at the Rowan.
- Nexus is recognized as the only third sector provider of specialist counselling services for people who have experienced rape or sexual assault.
- Nexus services deliver good value for money and equivalent services are not available through HSCT’s.

- Nexus bring the perspective of those who have experienced rape or sexual assault to the various working groups, steering committees and advisory panels that it has representation on. This is a valuable resource for policy planning and development and ensures that the voice of the victim is prominent.
- Nexus supports can be critically important in supporting clients through PSNI investigations.
- The impact of Nexus support has triggered a move towards counselling services being introduced much earlier for victims reporting to the Rowan Centre.
- Nexus have been instrumental in supporting males who have experienced rape and sexual assault which has contributed an increase in the number of males in Northern Ireland reporting such abuse

4.5 Theory of Change

The Theory of Change is central to SROI, as it “tells the story” of how the organisation or programme of activity utilises its inputs to produce outputs which, in turn, create outcomes – and how stakeholders experience the changes these outcomes bring about.

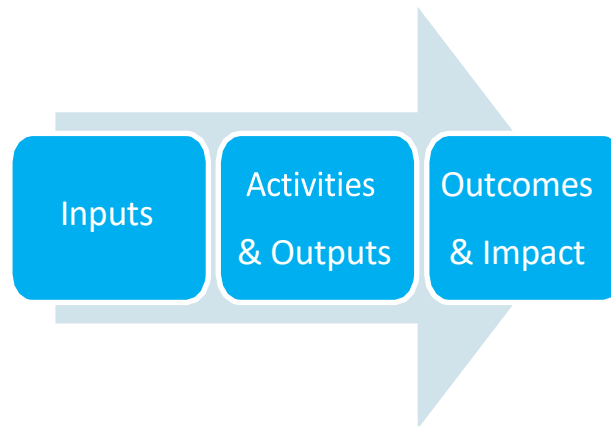


Figure 2: Theory of Change

This study presents the inputs, outputs and outcomes and the links between each, in a way that the overall theory of how Nexus counselling services creates change for each stakeholder is unveiled. Consultation and research with each stakeholder group through the study period helped to build an understanding of what changes were experienced, and how. Whilst all stakeholders experienced change, some were more significant than others.

The Theory of Change for Nexus NI adult counselling clients is concerned with understanding and articulating:

- the defining characteristics of clients' lives before they entered counselling;
- the defining characteristics of clients' lives once they have completed counselling i.e. what if anything has changed;
- how that change came about i.e. what it was about the counselling process that contributed to change.

Feedback from focus groups and analysis of survey data were all used to build an understanding of the journey of change, which is summarised below in Figure 3

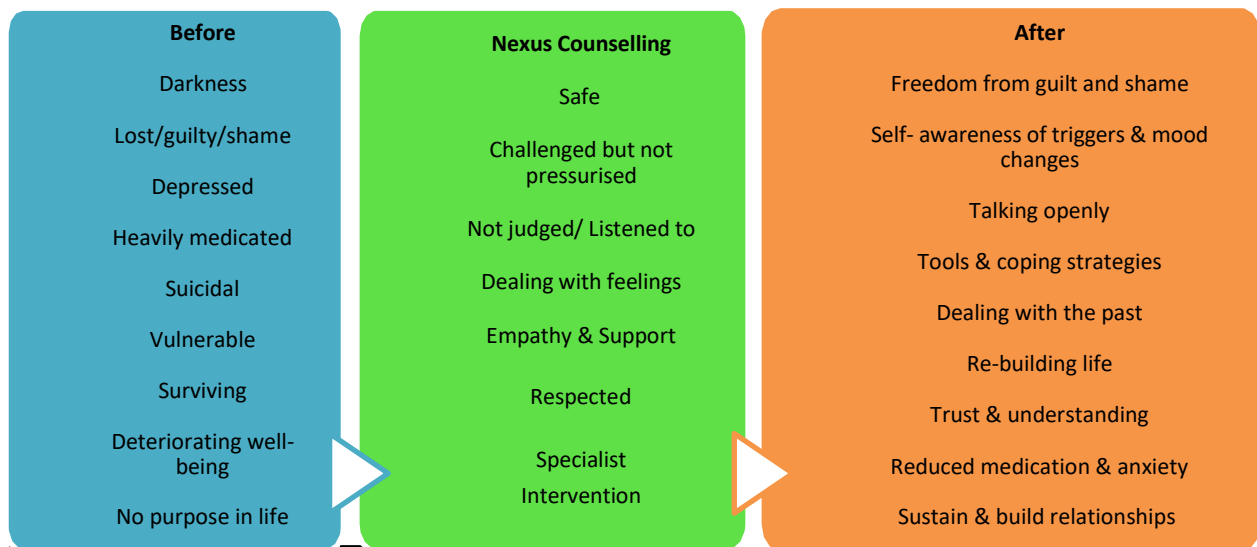


Figure 3: Nexus Clients – Journey of Change

5. SROI Results

The following narrative is offered as a description of the social impact of Nexus adult counselling services to underpin the SROI figure in the Impact Map and to provide a rationale for the data and financial values used. A SROI ratio of **£20: £1** has been calculated based on the data provided and the financial proxies utilised in the Impact Map. This is based on a Total Present Value of **£20,327,191** against an investment (input) of **£1,004,602** in 2017/18.

5.1 Verifying the result

In order to help verify the calculation of social value a series of discount factors are applied.

5.2 Discounting

It is necessary to “discount” the values generated by each of the financial proxies in order to ensure a realistic and credible figure is utilised. The following methods are most commonly used with the SROI model:

Deadweight: An assessment of how much of each of the outcomes would have happened anyway, without the intervention of Nexus counselling providing them i.e. that the participant user would have taken action to alter behaviour.

Displacement: An assessment of how much of each of the outcomes displaced other activities or outcomes that would otherwise have occurred. For example, that the work of Nexus counselling displaced that of similar projects or activities such as that provided by other providers such as Care Call or Lifeline

Attribution: An assessment of how much of each of the outcomes was generated by the contributions of other organisations or people e.g. referral sources, family members etc. For example, it is possible that parents and family can have an impact on the development of independent behaviours of the clients.

Drop-off: In future years, beyond the initial year of service delivery, the amount of each outcome that can be directly attributed to the project will be greatly reduced as it becomes more influenced by other factors and the original intervention impact diminishes. Coupled with the discount rate of 3.5% suggested by HM Treasury guidance this ensures credibility of forecasting social value.

5.3 Outputs

As a result of the investment, Nexus counselling services generated social value for stakeholders as per Table 5 below:

Group	Impact Value	% of Impact
Client's	£18,388,749	90.46%
Improved relationships & social networks		
Enhanced capacity to function & contribute to society		
Reduction in anxiety		
Increased confidence & sense of well-being		
Improvement in self – worth		
loss of personal shame,		
Enhanced empowerment & sense of achievement		
Family	£1,809,926	8.9%
Encouraged to access counselling assistance		
Improved family relationships		
Counsellors	£128,517	0.63%
Increased competence & skills		
Total	£20,327,191	100%

Table 5: SROI values per stakeholder

Appendix 1 Impact Map

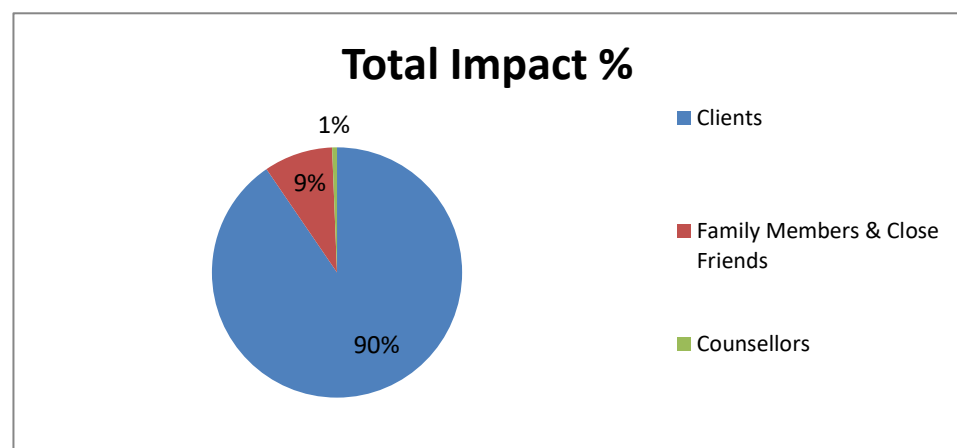
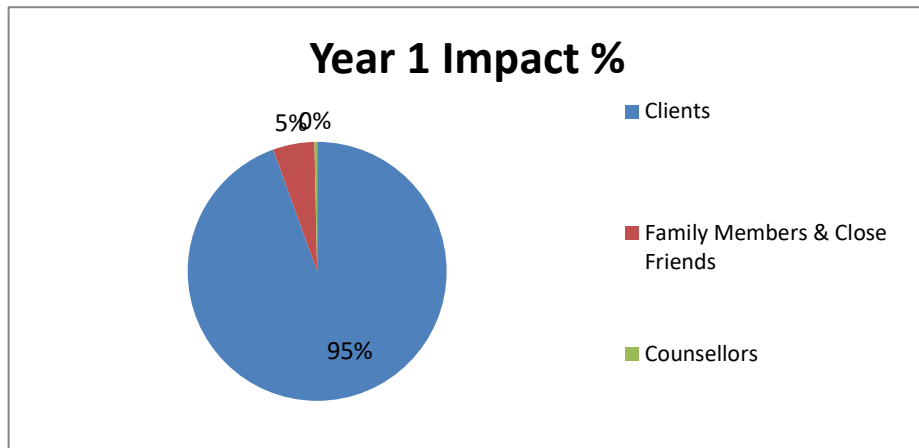
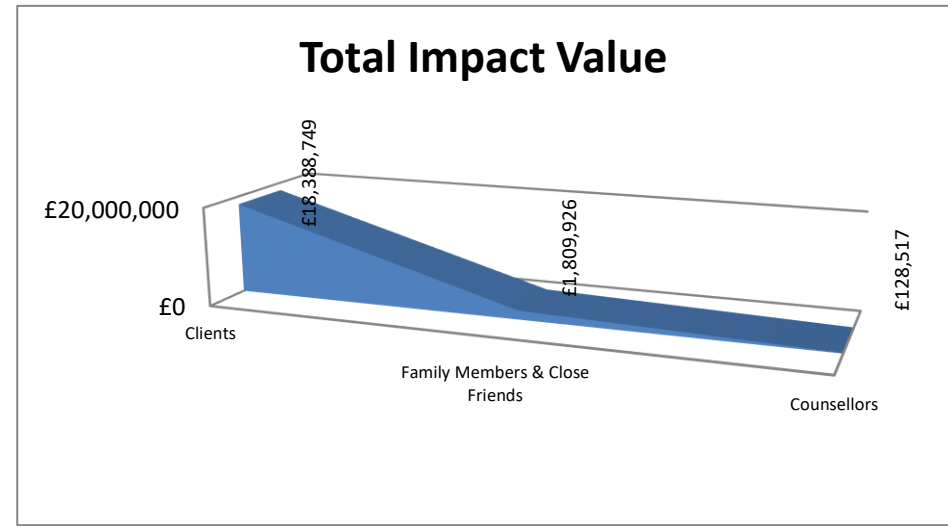
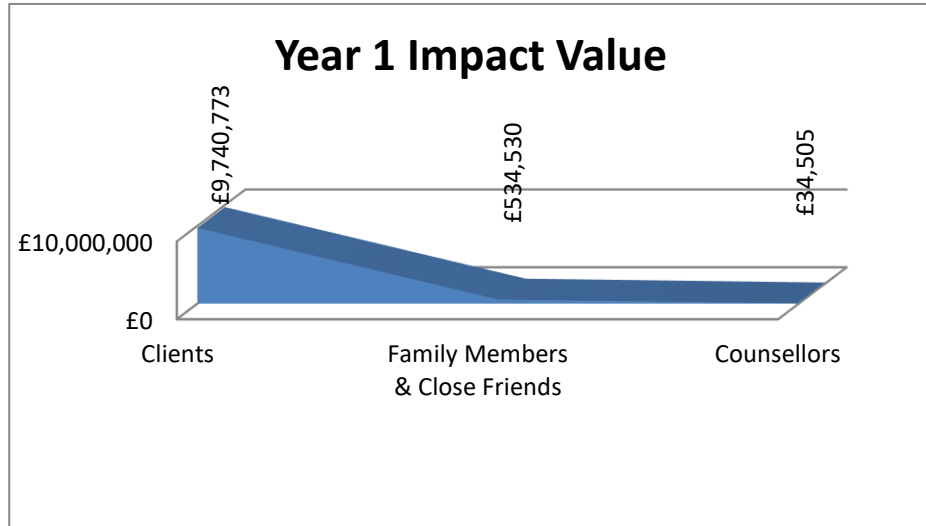
Stakeholders	The outcomes		Deadweight	Displacement	Attribution	Drop Off	Impact	Calculating Social Return							
	Description	Value						%	%	%	%	Discount rate (%)	Year 1 (after activity)	Year 2	Year 3
Who do we have an effect on? Who has an effect on us?	How would you describe the change?		What would have happened without the activity?	What activity did you displace?	Who else contributed to the change?	Does the outcome drop off in future years?	Quantity times financial proxy, less deadweight, displacement and attribution								
CLIENTS	1.1		£0	5%	2%	40%	15%	£0		£0.00	£0.00	£0.00	£0.00	£0.00	
	2.1	(Re)entering employment or making significant progress towards employment	£807,525	5%	2%	40%	15%	£427,988.25	4.15%	£427,988.25	£363,790.01	£309,221.51	£262,838.28	£223,412.54	
	2.2	Progressing within current job, taking on additional hours or moving into role	£1,049,180	5%	2%	40%	15%	£556,065	5.39%	£556,065.40	£472,655.59	£401,757.25	£341,493.66	£290,269.61	
	2.3	Taking up a course of vocational study	£60,525	5%	2%	40%	15%	£32,078	0.31%	£32,078.25	£27,266.51	£23,176.54	£19,700.06	£16,745.05	
	2.4	Taking up adult education classes	£142,506	5%	2%	40%	15%	£75,528	0.73%	£75,528.18	£64,198.95	£54,569.11	£46,383.74	£39,426.18	
	2.5	Participating for the first time or increasing participation in voluntary work	£353,550	5%	2%	40%	15%	£187,382	1.82%	£187,381.50	£159,274.28	£135,383.13	£115,075.66	£97,814.31	
	3.1	Clients report reduction in anxiety	£2,297,750	5%	2%	40%	15%	£1,217,808	11.81%	£1,217,807.50	£1,035,136.38	£879,865.92	£747,886.03	£635,703.13	
	4.1	Reduction in self harm instances	£108,585	5%	2%	40%	15%	£57,550	0.56%	£57,550.05	£48,917.54	£41,579.91	£35,342.92	£30,041.49	
	4.2	Reduction in eating disorders	£486,750	5%	2%	40%	15%	£257,978	2.50%	£257,977.50	£219,280.88	£186,388.74	£158,430.43	£134,665.87	
	4.3	Improvements with respect to alcohol / drugs addiction	£218,304	5%	2%	40%	15%	£115,701	1.12%	£115,701.12	£98,345.95	£83,594.06	£71,054.95	£60,396.71	
	4.4	Reduction in suicidal plans	£12,061,700	5%	10%	35%	100%	£6,030,850	58.50%	£6,030,850.00	£0.00	£0.00	£0.00	£0.00	
	5.1	Socialising & engaging in leisure activities/ hobbies	£980,000	5%	2%	40%	15%	£519,400	5.04%	£519,400.00	£441,490.00	£375,266.50	£318,976.53	£271,130.05	
	5.2	Engaging in physical activity	£495,180	5%	2%	40%	15%	£262,445.40	2.55%	£262,445.40	£223,078.59	£189,616.80	£161,174.28	£136,998.14	
	6	Loss of personal blame	£0	5%	2%	40%	15%	£0	0.00%	£0.00	£0.00	£0.00	£0.00	£0.00	
	7	Sense of achievement	£0	5%	2%	40%	15%	£0	0.00%	£0.00	£0.00	£0.00	£0.00	£0.00	
	FAMILY MEMBERS	8.1	Referrals of family or friends reported by clients	£616,680	5%	2%	40%	15%	£326,840.40	3.17%	£326,840.40	£277,814.34	£236,142.19	£200,720.86	£170,612.73
		9.1	9.1 Family & close friends benefit from improved ability to maintain & commit to healthy relationships	£483,000	15%	2%	40%	15%	£207,690	2.01%	£207,690.00	£176,536.50	£150,056.03	£127,547.62	£108,415.48
9.2		9.2 Family & close friends benefit from learning about boundaries, appropriate relationships & handling conflict	£0	15%	2%	40%	15%	£0	0.00%	£0.00	£0.00	£0.00	£0.00	£0.00	
COUNSELLORS	10	10. Counsellors become more skilled	£71,885	10%	2%	40%	10%	£34,505	0.33%	£34,504.80	£31,054.32	£27,948.89	£25,154.00	£22,638.60	
Total			£20,233,120					£10,309,808.37	100.00%	£10,309,808.35	£3,638,839.84	£3,094,566.58	£2,631,779.04	£2,238,269.88	

The work of Nexus adults counselling services generate a social value of approximately 1: 20 over a five year period

Present Value	£10,309,808.35	£3,638,839.84	£3,094,566.58	£2,631,779.04	£2,238,269.88
Total Present Value					£20,327,191.73
Net Present Value					£19,322,589.13
Social Return £ per £					£20.23 per £1
Per annum					19.23 NPV

Group	Y1 Impact value	%
Clients	£9,740,773	94.48%
Family Members & Close Friends	£534,530	5.18%
Counsellors	£34,505	0.33%
Total	£10,309,808	100%

Group	Total Impact value	%
Clients	£18,388,749	90.46%
Family Members & Close Friends	£1,809,926	8.90%
Counsellors	£128,517	0.63%
Total	£20,327,192	100%



Appendix 2 – Client Focus Group Questions

Nexus Client Consultation

- Describe what life was like before attending the Nexus counselling.
- How did you find out about Nexus?
- What, if any changes, has the counselling introduced to your life
- Positive impacts / changes
- Negative impacts / changes
- Key words that describe the change(s) you may have experienced
- How others would describe the change in you (family members, friends, colleagues)
- How others (family etc) have been impacted by the changes in you
- The value of any change(s) in you:
- What was it about the Nexus counselling that was effective?
- What was it about the Nexus counselling that was **not** effective?
- Are there ways that the counselling could have had more impact?
- Other things that have contributed to change within you (in addition to the counselling)?
- What did you have to invest (financially and in other ways) to engage with counselling

1. Has your employment status changed since starting the counselling (for example, starting work or progressing within work)?

2. Has your involvement in courses of study (e.g. night classes) changed since you started counselling? If so, please provide details)

3. Has your engagement in social and recreational activities changed since you started counselling? (If it has changed, could you estimate how many more or less hours you are spending on activities per month?)

4. Has your involvement in volunteering or community work changed since you started counselling? If so, please provide some details of this change).

5. Have you had the opportunity to pass on to others anything you have learnt from the counselling? For example, have you been involved in safeguarding someone else within *your* family or community against abuse? Have you encouraged anyone else to seek help?

6. What has it cost you to attend the counselling (bus fares, child care costs etc)?

Appendix 3 – CORE 34 Questions

NEXUS CORE Questionnaire - 1ST ONGOING, EVERY 6 WEEKS & THE LAST PLANNED SESSION

1st name of client _____

Counsellor _____

Client Ref _____

Date _____

Session No. _____

Stage Completed 1st therapy session During therapy Final Session

It is important to record a response to each question. Please answer how you have felt **OVER THE LAST WEEK**.

Over the last week	Not at all	Only occasionally	Some times	Often	Most or all of the time	Office use only	
1. I have felt terribly alone and isolated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F
2. I have felt tense, anxious or nervous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P
3. I have felt I have someone to turn to for support when needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F
4. I have felt OK about myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	W
5. I have felt totally lacking in energy and enthusiasm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P
6. I have been physically violent to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
7. I have felt able to cope when things go wrong	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F
8. I have been troubled by aches, pains or other physical problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P
9. I have thought of hurting myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
10. Talking to people has felt too much for me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F
11. Tension & anxiety have prevented me doing important things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P
12. I have been happy with the things I have done	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F
13. I have been disturbed by unwanted thoughts & feelings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P
14. I have felt like crying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	W
15. I have felt panic or terror	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P
16. I made plans to end my life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
17. I have felt overwhelmed by my problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	W
18. I have had difficulty getting to sleep or staying asleep	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P
19. I have felt warmth or affection for someone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F
20. My problems have been impossible to put to one side.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P
21. I have been able to do most things I needed to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F
22. I have threatened or intimidated another person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
23. I have felt despairing or hopeless	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P
24. I have thought it would be better if I were dead	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R
25. I have felt criticised by other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F
26. I have thought I have no friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F
27. I have felt unhappy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P

28. Unwanted images or memories have been distressing me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P
29. I have been irritable when with other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F
30. I have thought I am to blame for my problems & difficulties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P
31. I have felt optimistic about my future	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	W
32. I have achieved the things I wanted to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F
33. I have felt humiliated or shamed by other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F
34. I have hurt myself physically or taken dangerous risks with my health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R

Appendix 4 – Pre and Post Counselling Therapy Assessment Forms

- Explain assessment process – this is not a counselling session
- Explain limits of confidentiality and permission form signed at start

Counsellor Name _____ Date _____

Client Ref. No. _____ Client First Name _____

Age _____ Male Female Undisclosed

Ethnic Origin White Other (please state) _____

Any special requirements

Relationships

Married Separated Divorced Single Partner Civil Partnership Other

Dependents and Ages

Relationships/support (tick as many boxes as appropriate)

- | | |
|--|---|
| <input type="checkbox"/> Living alone (not including dependents) | <input type="checkbox"/> Full time carer(of disabled/elderly etc) |
| <input type="checkbox"/> Living with partner | <input type="checkbox"/> Living in shared accommodation (ie lodgings) |
| <input type="checkbox"/> Caring for children under 5 years | <input type="checkbox"/> Living in temporary accommodation ie hostel |
| <input type="checkbox"/> Caring for children over 5 years | <input type="checkbox"/> Living in institution/hospital |
| <input type="checkbox"/> Living with parents/guardian | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Living with other relatives/Friends | |

Safety Contact

First Name _____ Relationship _____ Mobile _____

Is the safety contact aware that client is attending Nexus NI and the reason? Yes No

GP Details

Name	Phone	Address	
Education: Primary/Secondary/Further Education – any issues?			
Employment	1. Full time paid (+ 30 hrs) <input type="checkbox"/>	2. Part time paid <input type="checkbox"/>	3. Receiving benefit/incapacity <input type="checkbox"/>
	4. Unemployed <input type="checkbox"/>	5. Full time student <input type="checkbox"/>	6. Part time student <input type="checkbox"/>
	7. Retired <input type="checkbox"/>	8. House person <input type="checkbox"/>	9. Other <input type="checkbox"/>
Employment Issues			

--

Medical History

Current /previous use of services for psychological problems

(tick as many boxes as appropriate)

		Current	Less 1 Year	+ 1 Year
Primary	GP or member primary care team (practice nurse)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Secondary	In primary care setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	In community setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	In hospital setting on sessional basis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Day care services (ie day hospital)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Hospital admission (up to 10 days)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specialist	Hospital admission (more than 10 days)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Psychotherapy/Psychological treatments from specialist team (sessional)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Attendance at day therapeutic programme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	Inpatient treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Counsellor ie voluntary, religious, educational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Details

--

3rd party information requested from

GP Psychiatrist Other (give details) _____

Is the client currently prescribed medication to help with their psychological problem(s)? Yes No

If yes please indicate type of medication

Anti-psychotics (neuroleptics/major tranquilizers) Anti-depressants Anxiolytics/Hypnotics Other

Use of alcohol and non- prescribed drugs – note any concerns
--

Current or previous physical problems. If relevant please state including any relevant medication (ie for asthma, diabetes)

Identified Problems/ Concerns by counsellor (tick time when current issue presented)

Severity rate 0-4 (0= no difficulty 4 = severe difficulty)	Less than 6 months	6-12 months	More than 12 months	Recurring/ continuous
Depression				
Anxiety/Stress				
Psychosis				
Personality Problems				
Cognitive/Learning				
Eating Disorder				
Physical Problems				
Addictions				
Trauma/abuse				
Bereavement/loss				
Self Esteem				
Interpersonal/relationships				
Living/Welfare				
Work/Academic				
Other (specify below				

RISK	None	Mild	Moderate	Severe
Suicide	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Harm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Harm to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal/Forensic – do not use				

Details of concerns and action taken

Birth Family: Parents/brothers/sisters. Any issues?

Current and past relationship issues?

Explore presenting issues:
What do you hope to achieve and change through counselling?
Why decide to seek counselling now?

Are client goals realistic Yes/No (If No give reason)

Is client able to engage in counselling at this time Yes/No (If no give reasons)

Referred to

Abuse type Child Sexual Abuse Sexual Assault Rape Combination

Was this reported and resulting actions?

Is there are present or pending court proceedings? Yes No

If Yes give details

Check preferences for location, times etc

Any additional information

Discussed donations Yes No Agreed weekly donation £ _____

Counsellor signature _____ Date _____

TREATMENT PLAN

Accepted for counselling Yes No

3rd party requested Yes No

Unsuitable for counselling Yes No If no referred to

CHECK LIST

Confidentiality and its limitations explained Yes No

Emergency contact and donation information card given Yes No

Permission form signed & ticked on Ecom (If no contact manager) Yes No

Information leaflet given to client Yes No

Permission to share ie third party Yes No

GP's name, address and phone number obtained Yes No

Safety contract – person to be contacted in emergency obtained Yes No

After Ai information completed on Client Management System Yes No