

Pilot Evaluation Report

Future Grow

April 2025 – March 2026

Executive Summary

The Future Grow pilot, delivered by Triage in partnership with Darlington Primary Care Network (PCN) from April 2025 to March 2026, tested the impact of embedding personalised employability support within primary care. The programme targeted people facing complex health, social and economic barriers, particularly those who were economically inactive, supporting them to move towards employment, training or volunteering while improving their wider health and wellbeing.

The pilot supported 104 participants, 30% above its original target, with more than half (54%) coming from Darlington's most deprived wards. Participants had been unemployed for an average of eight years, and 34% were economically inactive. Needs were often multiple and overlapping: 75% experienced mental health barriers, 49% low confidence, 38% physical health conditions, 33% financial hardship and 31% housing instability.

Through intensive one-to-one Key Worker support, participants received a combination of employability coaching, health and wellbeing support, skills development, volunteering opportunities and practical help to address barriers including housing, debt, digital exclusion and social isolation. Strong partnership working with primary care, social prescribing, mental health, MSK, local authority and voluntary sector services enabled support to be coordinated around each individual's circumstances.

The pilot delivered strong measurable outcomes, with 68% of participants progressing into employment, education/training or volunteering. 24% moved into paid employment, 29% progressed into education or training, and 15% gained volunteering experience, with some participants achieving more than one

outcome. Of those moving into employment, 81% sustained their job based on tracking completed to April 2026. Participants also reported improvements across every personal development and employability measure, including confidence, motivation, job-search skills, financial wellbeing and preparedness for work.

The programme also demonstrated a compelling potential return on investment. Delivery cost £85,891, equivalent to £826 per participant and £1,210 for each participant achieving positive progression. Based on 13 participants sustaining employment for at least six months, the report estimates an annual benefit to the UK economy of £435,500, representing £5.07 in benefit for every £1 invested, before accounting for wider potential benefits such as reduced NHS demand and improvements in health and wellbeing.

The evaluation identified important lessons for future delivery. A fixed 14-week intervention was not sufficient for some participants with more complex needs, while high demand generated waiting lists and demonstrated a wider gap in provision. Future delivery would benefit from more flexible and potentially longer support of up to six months, increased capacity, and stronger integration of mental health, wellbeing and trauma-informed pathways.

Overall, Future Grow demonstrates the value of integrating employability support with primary care and wider wellbeing services for people who may struggle to engage with mainstream provision. The combination of strong progression outcomes, improvements in confidence and wellbeing, positive stakeholder feedback and potential economic returns provides a strong case for further investment, refinement and wider adoption of the model.

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Introduction

Triage proposed the delivery of the Future Grow pilot in partnership with Darlington Primary Care Network (PCN) to support patients—including those who are economically inactive—to progress towards meaningful activity such as employment, training, or volunteering. The pilot was designed to align with the North East and North Cumbria Integrated Care Board (ICB) priorities, particularly those relating to health and wellbeing and Poverty Proofing. Triage also sought to enhance our experience of delivering support within primary care settings and to build stronger collaborative relationships with GPs, social prescribers and other healthcare professionals.

During initial conversations with key contacts at Darlington PCN, it was clear that there was a gap in support for patients transitioning from social prescribers and/or those waiting to access Talking Therapies or other mental health interventions. At that time, no employment focused support was available within the PCN offer, despite clear evidence that vocational activity can play a key role in improving health and wellbeing outcomes.

Recognising the potential value of the Future Grow pilot, the PCN supported the initiative from the outset and actively facilitated the necessary partnerships, including with GP practices within the network, Primary Health Darlington (which delivers social prescribing on behalf of the PCN), and the musculoskeletal (MSK)/pain teams. The PCN's engagement ensured that the pilot was effectively embedded within existing care pathways and accessible to the patients who would benefit most.

Triage set out to deliver support that positively impacted each person's overall health and wellbeing and to create clear routes into employment and other opportunities. The pilot aimed to reduce the effects of poverty and contribute to breaking the cycle between low income and poorer health outcomes.



The initial proposal was to engage 80 working-age individuals (aged 16–65) on a roll on/roll off basis, with referrals made through the social prescribing team across the 11 GP practices within the PCN. The target group for the pilot was unemployed residents, primarily those who were economically inactive, including individuals with mental health needs, disabilities, long-term health conditions or caring responsibilities. To be eligible, individuals needed to express a willingness to explore potential pathways into employment, training, or volunteering.

It was agreed that Triage would initially self-fund the pilot using two full-time existing Key Workers, trained and experienced in supporting people with complex barriers into employment.

Pilot success was agreed as:

- Supporting as many local residents as possible into sustainable positive outcomes including employment, training and volunteering.
- Supporting softer outcomes for those who weren't ready to progress, including signposting or the participant getting out of the house and feeling comfortable to meet in a community setting or the local Triage office.



Awareness raising and performance monitoring:

We were mindful to raise awareness and build trust with healthcare professionals who were initially unfamiliar with Triage's work and may have had concerns about potential overlap in roles. To address this, we attended regular team and social prescriber meetings to build rapport, increase visibility, streamline the referral process and strengthen understanding of the programme. In addition, we established relationships with the community mental health team,

ensuring they recognised our offer as complementary and added value, with a clear focus on enhancing, not duplicating, existing support.

Bi-monthly meetings with Darlington PCN's leadership team and Primary Health Darlington were attended by Triage's Innovation Manager and Partnerships Manager to review progress, share good news stories and lessons learned, and amend the delivery model as required.

Key figures

Triage provided support to 104 participants from April 2025 until March 2026, which was **30% ahead of target**. An additional 67 referrals were received but many of these did not meet the eligibility criteria, could not be contacted despite multiple attempts or withdrew from the pilot due to a change in circumstances.

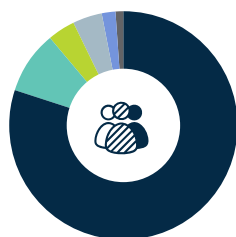
Of the participants supported:



Age range:

- 18-24-year-olds – 9%
- 24-35-year-olds – 22%
- 36-50-year-olds – 34%
- 50+ – 35%

Average age: 44

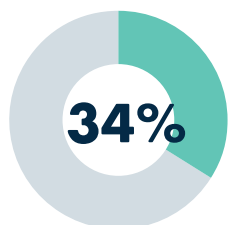


Ethnic breakdown:

- White British: 80%
- Asian / Asian British: 9%
- Black / African / Caribbean / Black British / Black African: 4%
- Mixed: 4%
- White non-European: 2%
- White European: 1%



Average length of unemployment (with a range of 6 months to 22 years)

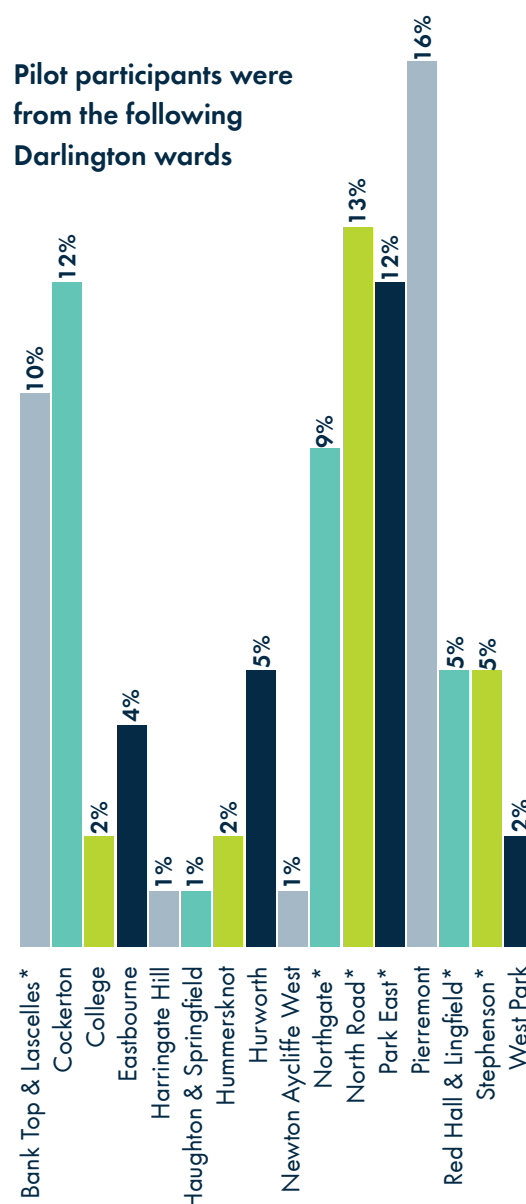


economically inactive including those not claiming or not entitled to Universal Credit

Gender breakdown:



Pilot participants were from the following Darlington wards



*These wards fall into the most deprived 10-20% nationally (based on English Indices of Deprivation 2025) for income, employment, health, education, crime, barriers to housing/ services and living environment indicators. The data above shows that Triage was able to engage and support 54% of pilot participants from the most deprived wards.

Individual needs and barriers

Main presenting health barrier:

Future Grow pilot participants had multiple, overlapping barriers and presented with more than one health barrier, including:

- **Mental health needs** (75%) including anxiety disorders, depression/low mood, PTSD/trauma, bipolar disorder, emotional instability and long-term suicidal ideation (managed) and low self-esteem, impacting confidence, motivation and the ability to engage with mainstream employability programmes.
- **Physical health needs** (38%) including chronic pain, musculoskeletal conditions (MSK), arthritis, diabetes, respiratory conditions such as COPD, emphysema, asthma, neurological conditions (e.g. epilepsy, MS), chronic fatigue, limited mobility, heart conditions.
- **Neurodivergent conditions** (18%) including autism and ADHD, with some participants requiring adapted communication and learning approaches.
- **Learning needs** (5%) including both diagnosed and undiagnosed learning disabilities, learning difficulties and/or dyslexia.



Other significant barriers included:

- **Skills, qualifications and employment history:**

73% of participants reported barriers relating to skills and employment history, including low or outdated qualifications, long gaps in employment, lack of recent references and difficulty identifying or articulating transferable skills. We found that this barrier was linked to low confidence and heightened anxiety about engaging with employers.

- **Housing instability** (31%): Almost one-third of participants cited housing as a barrier or indicated a homelessness risk and/or use of temporary accommodation, sofa surfing, unsafe housing, or reported a housing related crisis. Housing issues were treated as a core wellbeing priority, not a secondary concern. Support focused on early identification of housing risk and crisis, and practical advocacy support for participants, e.g. engaging with housing teams such as Darlington Council and partner agencies (such as 700 Club). We supported participants to attend housing appointments, submit bids, and understand housing processes, access emergency help (food, fuel, hardship support) to ease immediate pressures, as well as ensuring close multi agency working with social prescribers, the local authority, health, and voluntary services.

- **Digital exclusion:** A number of participants reported experiencing digital exclusion during their time on the pilot, including no or limited IT access (no laptop, limited phone data, shared devices), low IT skills, particularly when navigating job search websites, completing online applications, and using email confidently. This also included IT skills not meeting job requirements, difficulty engaging with online services (UC journal, GP systems, training portals), anxiety or lack of confidence using digital tools. We put in place practical interventions such as 1:1 training/support to access online applications, signposting to IT courses, and arranging for refurbished laptops for participants. Digital barriers were identified across all age groups and acted as a hidden barrier, becoming visible only once

engagement began. Significant time was taken during appointments to assist individuals with limited digital knowledge or access.

- **Financial hardship and debt:** 33% of participants frequently experienced significant financial pressure. This included debt such as rent arrears, council tax, utility bills and credit card repayments, as well as fuel poverty, food insecurity and low or unstable income. Many also reported anxieties around Universal Credit, particularly concerns about being financially worse off if they moved into work. Financial hardship was one of the most consistently recorded barriers and often intensified mental health difficulties, delayed progression, and contributed to periods of crisis.
- **Low confidence, self belief and mindset:** Low confidence affected 49% of participants. This included a lack of confidence approaching employers, fear of interviews or group settings, anxiety about change and failure, with long periods out of work impacting on personal identity. For many participants, mindset and self belief were more significant barriers than a lack of skills or experience.
- **Social isolation and limited support networks:** A substantial proportion of participants experienced social isolation, including living alone with little social contact, loss of routine following illness, trauma, or unemployment, and anxiety about leaving the home. Social isolation frequently compounded low mood and reduced confidence. In several cases, attending appointments was itself a significant achievement. A range of steps were taken to reduce isolation and support engagement. These included meeting participants in venues where they felt comfortable, adopting a less formal approach such as having a conversation whilst walking in the park, and organising or attending allotment sessions to encourage people to leave the house, participate in healthy activity and gradually build social connections in a supportive, low pressure environment.

Other significant barriers included: (continued)

- **Substance use or recovery:** 11% of participants were managing recovery from alcohol or drug dependency. This included managing relapse risk and ongoing engagement with specialist recovery services. Although numerically smaller, this group often presented with higher levels of complexity and required careful adjustment of the speed and intensity of support to suit individual needs, alongside trust building and effective multi agency coordination. In total, 73% of participants within this sub-cohort progressed to a positive destination, including 19% into employment.
- **Caring responsibilities:** 9% of participants reported significant formal or informal caring responsibilities for young children, parents or grandparents. This made it difficult for some to find time and motivation to focus on their own progression into work or training. This includes caring for parents with dementia or serious illness, caring for partners with physical or mental health needs, caring for children (including lone parents) and informal/unpaid caring roles impacting availability and wellbeing. In response, Triage adopted a flexible, person-centred approach to delivery, including offering online or telephone appointments at varied times, giving clear advance notice of appointments and enabling flexibility in attendance.
- **Criminal justice history:** A small minority of participants (6%) reported criminal justice related barriers, including spent or unspent convictions, probation restrictions, and anxiety around disclosing criminal history to employers. These concerns often acted as a significant psychological barrier to progression, even where practical options for disclosure and employment were available. Just under 50% of participants with a criminal justice history progressed into further education.

Example: T's Journey

T's journey highlights how timely, person-centred support can prevent homelessness from derailing employment. After joining the Future Grow programme facing poor mental health, low confidence, and financial barriers, T quickly secured a job with support from his Key Worker, Matty. However, when a relationship breakdown left T facing homelessness, his stability was at serious risk. Matty responded immediately, coordinating an urgent referral to the 700 Club for specialist housing support, while maintaining regular contact and emotional reassurance. Alongside this, funding for fuel to get to and from work was secured from Triage to remove travel barriers, ensuring T could sustain his 34-mile commute. Despite illness, mental health challenges, and housing

crisis, T remained in work throughout. This outcome demonstrates the impact of rapid intervention and consistent support, preventing a crisis from escalating, enabling T to stay in employment and helping him maintain stability during one of the most challenging periods of his life.

“ I can't really express how much you have helped me with everything, if it's with my CV or the support you and the team have given me, you helped sort my head out in a really good way and the CV you created has helped me get a job so thank you. ”

Feedback from T (March 2026)

Future Grow delivery

Triage Key Workers supported each individual via weekly interventions lasting up to 14 weeks. This provided adequate time to explore positive routeways and focus on soft outcomes such as improved confidence and motivation. One-to-one appointments were held face-to-face, with phone/video support sessions if participants were unable to attend a particular appointment in person. An initial in-depth diagnostic assessment took place to understand individuals' needs and circumstances, leading to the creation of an Individual Progress Plan to address barriers.

We provided support such as:



Intensive one-to-one coaching:

This enabled personalised guidance and support and helped to build trust. This was led by our Key Workers, one of which held a Level 6 Information, Advice and Guidance qualification, with extensive experience as a Careers Adviser with the National Careers Service. Support was tailored to individual communication styles, learning needs, and confidence levels, and included confidence building, personalised goal setting informed by local labour market opportunities, CV and application support, and interview preparation.

Group activities:

These were optional and in addition to participants' weekly one-to-one appointment with their Key Worker. Group sessions or activities were designed to provide a supportive environment to develop employability skills, peer support and motivation. Participants who preferred not to take part in group activity were offered the same support on a one-to-one basis.

- **Job search skills:** Raising awareness of where to search for job vacancies, including accessing the hidden jobs market via networking/utilising existing contacts and CV drops to employers.



Future Grow delivery (continued)

- **Employer connections:** Attending job fairs, with support from their Key Worker, to explore the variety of roles on offer. Insights into workplace behaviours, professionalism and performance standards were achieved, as well as encouraging conversations with employers.
- We organised for **National Careers Service** to come into our office to run small, focused group sessions on confidence building and employability to offer independent advice and guidance.
- **Life skills training:** We organised life skills sessions with an external organisation over a six-week period, focused on equipping participants with essential social, emotional and self-management skills, supporting them to navigate everyday challenges effectively.

Health and wellbeing support:

The pilot was built around intensive, personalised support for individuals furthest removed from the labour market. Health and wellbeing support was embedded throughout individual's time on the pilot. A core focus of delivery was building trust and reducing anxiety, while strengthening self belief through a combination of structured activities and responsive, relationship based support. We identified that targeted wellbeing and confidence building interventions were essential before individuals could meaningfully engage in job search activity, helping to develop readiness, resilience, and sustained progression. Some softer outcomes were based on individuals attending the Triage office rather than their more familiar GP practice.

Examples of health and wellbeing activity included:

- **Weekly check ins** exploring mood, stress, sleep, and motivation. Where an individual did not attend a face to face appointment, a telephone check in was carried out to ensure their wellbeing and to rearrange contact while encouraging them to attend future meetings.
- **Goal setting conversations** focused on small, achievable steps, led by the individual to avoid feelings of pressure or being rushed into decisions. Actions were added to progress plans and were built around what was comfortable for the participant.
- **Wellbeing coaching** through one to one appointments, supporting the development of positive routines, self care habits, stress management techniques, and coping strategies. Each session was followed up with step by step guidance emailed to individuals for ongoing reference.
- **Healthy lifestyle discussions** covering diet, exercise, sleep, stress management, and mood and how this can impact routine, focusing thinking around employment routines and the benefits of making small changes to achieve this.



Future Grow delivery (continued)



Targeted MSK support:

During the pilot, strong working relationships were established with the MSK and pain management teams in Darlington, enabling a more joined-up and targeted approach for individuals with musculoskeletal conditions. A clear referral pathway was developed, allowing Future Grow participants to access specialist, tailored MSK support aligned to their individual needs and employment goals. We supported participants to clearly articulate their goals to the MSK team, enabling clinicians to design physiotherapy programmes and exercise plans that reflected the physical demands of intended job roles. For example, one participant wanted to move into a warehouse-based role that involved manual handling – therefore, we worked on targeted interventions focused on building strength, improving mobility, and promoting safe lifting techniques to reduce the risk of injury and support long-term job sustainability. In addition, our Key Workers incorporated practical tools such as body mapping within one-to-one sessions. This enabled individuals to identify areas of pain or discomfort, understand how different tasks or activities may impact their condition, and develop strategies to manage this effectively. These discussions also supported individuals to consider reasonable adjustments and build confidence in communicating their health needs within a workplace setting.



Employment preparation:

Employer engagement was a core element of delivery, supporting individuals to build confidence, access opportunities, and engage meaningfully with recruitment processes. This included CV development, mapping transferable skills, setting realistic employment goals, preparing for job applications, and completing in depth better off in work calculations to support informed decision making.

Practical support was provided to remove barriers to participation, including assistance with travel logistics, route planning, and access to resources needed to attend training, interviews, and work opportunities. Participants were supported with mock interviews and panel style practice sessions to build confidence, improve communication skills, and increase performance in real recruitment settings.

We facilitated attendance at job fairs through both one-to-one and small group support. Individuals were actively supported on the day, with the Key Worker accompanying them around the event, encouraging conversations with employers and helping them explore available roles and progression routes. This approach was particularly effective for individuals who would otherwise avoid job fairs due to anxiety, or who might attend but struggle to engage meaningfully. The Key Worker helped to start conversations, make introductions, and reduce apprehension around employer engagement. As a direct result of this support, one individual applied for a role with Martin Brower at a fair and successfully secured employment.

Employer engagement also involved proactive contact with employers on behalf of individuals to discuss suitable vacancies. This included support to submit applications, CVs, and cover letters, while working alongside individuals to build their skills and confidence to complete these processes independently in the future.



Volunteering and community engagement:

Volunteering and community engagement were key components of the pilot, providing individuals with opportunities to build confidence, gain experience, develop networks and reduce social isolation. We supported individuals through taster sessions and warm introductions to local volunteering

Future Grow delivery (continued)

opportunities, enabling them to explore roles in a supported, low pressure way.

For example, six participants were supported to take part in weekly volunteering sessions at local allotment gardens. Activities included planting, digging, and growing vegetables, and sessions were attended as a group alongside the Key Worker. This helped encourage physical activity, build new social connections and reduce isolation.

Many participants had limited or no previous work experience, so securing relevant volunteering and work experience aligned to their employment goals was a priority. Placements were sourced based on individual preferences and aspirations, helping participants build practical skills, routine, and confidence. Opportunities included roles with British Heart Foundation, Age UK, Medequip, B&M, the Army Reserve Centre, Age Concern, The Edge Grocery Shop, We Are With You, RSPCA, Cancer Research and King's Church Food Bank.

In addition, individuals were supported to engage in wider community activity, including participation in Darlington Carnival 2025. This involved contributing to the planning process and helping to create props and outfits for the event, allowing individuals to work collaboratively, develop creativity and experience being part of a large community initiative.

Learning and skills development:

Supporting individuals to access learning and training was an important progression route for those furthest from the labour market. For many individuals, further learning felt like a more achievable and less risky step towards employment, allowing them to build confidence, skills, and routine before committing to job search activity.

Learning pathways were tailored to individual circumstances, aspirations, and readiness, with the majority of provision being accredited up to Level 3. Support included access to adult learning courses, online training platforms, and digital literacy support to develop both foundational and vocational skills. Individuals were guided through course selection and enrolment, supported to sustain engagement, and encouraged to reflect on progress and next steps. Accredited learning accessed included maths, English, digital skills and ESOL and sector specific qualifications including cyber security, lean management, warehousing, teaching assistant, retail, carpentry, counselling, CSCS training and a teaching qualification through the Open University.

In addition, individuals accessed a range of non accredited learning designed to build confidence, resilience, and employability skills. This included life skills training, resilience development, data protection training for self employment, and progression onto the Connect to Work programme. This flexible, learning led approach enabled individuals to take manageable steps towards the world of work.



Future Grow delivery (continued)

Signposting and local partnership working:

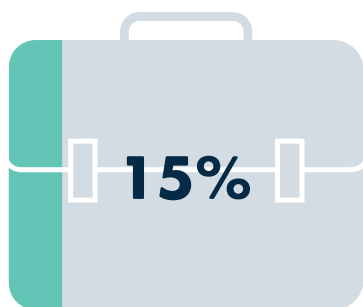
Alongside the support provided directly through the pilot, we worked in partnership with a wide range of external organisations to help individuals overcome barriers to progression. This included referrals for additional support relating to mental health, housing, debt, substance misuse and self employment, for example:

- Employment and progression support:** Jobcentre Plus, National Careers Service, Connect to Work (Darlington Council), HIYED, Berry Recruitment and other local recruitment agencies, Enterprise Made Simple (EMS) for self employment and employer led training routes.
- Health and wellbeing:** NHS Talking Therapies / Talking Changes, MIND Darlington, Tees Esk and Wear Valley NHS Foundation Trust Services (West Park, Roseberry Park), First Stop, counselling services, Samaritans, Andy's Man Club, Men's Shed, ARRS Mental Health Practitioner, First Stop, Mental Health Alliance Nurses, Hospital specialist services (including neurology, vascular, sleep clinics), MSK services, Diabetes services, Community Psychiatric Nurses.
- Financial and benefits advice:** Citizens Advice Bureau (CAB), Darlington Connect, Universal Credit and PIP support, support to complete applications for community grants and hardship support, Household Support Fund (Darlington Council), Better off calculations DWP / GOV.UK support, Council tax reduction advice, Welfare Support Officers.
- Housing and social support:** Darlington Borough Council housing services, Adult Social Care, 700 Club.
- Specialist and complementary support:** We Are With You (substance misuse), DAD (Darlington Association on Disability), Headway (brain injury support), Care for Carers/ carer support groups, Keyring, Heavy Metal Therapy, HIYED (autism and learning disability support), digital access schemes (Furbd laptop scheme).



Pilot impact

The Future Grow pilot delivered tangible, measurable outcomes, showcasing the positive impact and importance of integrating employability-focused support within primary care settings. Beyond employment, training and volunteering results, the programme achieved significant gains in participants' confidence, wellbeing and progression readiness. Some achieved multiple outcomes, which are included in the figures below. The outcomes achieved by the 104 individuals completing the pilot programme include:



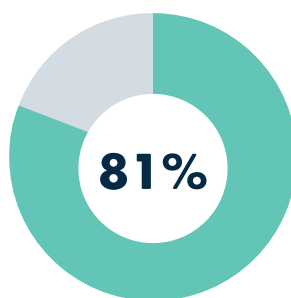
moved into paid employment

securing 20 roles in total as some participants gained more than one job. Job outcomes were achieved across a range of sectors, including retail, warehousing, customer service, cleaning, self-employment and support work. One individual secured a role as a Store Assistant; however, after a few weeks, she realised the position wasn't the right fit. With further support from Triage, she successfully moved into a more suitable role as a Transport Assistant with. Alongside this, she also began volunteering at Oxfam, a role arranged with Triage's support, which later led to an additional 10 hours of paid weekend work. In total, she secured three roles during her time on the programme, demonstrating significant progress and adaptability.

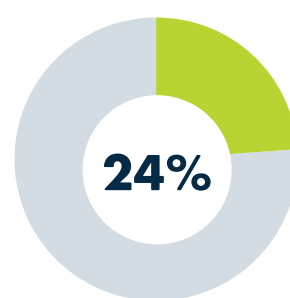


68%

achieved either an employment, volunteering or further education outcome.



sustained their job based on tracking completed by our Key Worker to April 2026.



gained valuable volunteering experience.

They report benefiting from increased structure to their day, reduced anxiety, greater confidence and communication skills, with the ability to settle more quickly in new environments. Four participants achieved both volunteering and employment outcomes.

29%

progressed onto education or training, including vocational courses, college study and various other accredited and non-accredited courses, with two individuals achieving both employment and training outcomes.

Participant feedback

Pilot participants demonstrated significant improvements in personal development and employability skills, self-measured on a scale of 1-5 at the start and end of the pilot, with all scores increasing by 1-2 points.

Progress question	Initial average score	End average score
How would you rate your overall confidence?	2	3
How motivated do you feel to better yourself?	3	4
How confident do you feel in a group setting?	2	3
How well do you feel you deal with change?	3	4
How open are you at looking at training/upskilling yourself?	3	4
How do you rate your employability skills?	3	4
How much do you know about effective job search techniques?	2	4
Do you feel confident at approaching employers?	2	3
How confident do you feel about discussing your health or wellbeing with an employer?	2	3
How prepared do you feel to start work?	3	4
How informed are you at managing / coping with your health / wellbeing?	3	4
Do you know how much better off you would be in work?	3	4
How would you describe your overall financial wellbeing?	2	4
How confident do you feel about balancing work and personal life?	2	4
How would you rate your ability to set and achieve personal goals?	2	4

Stakeholder feedback

“

The results so far and this early on are great. This cohort of patients are particularly hard to work with in relation to their health issues creating barriers to work, training and education. The team feel that Ang (Triage Key Worker) is great to work alongside, good with the patients and providing support for the team.”

Social prescribing team lead, April 2025

“

Ang has been consistently supportive and helpful, in helping patients complete applications for benefits or employment. Patients appreciate the time she allows to listen to them and the safe space she provides for them to help them move forward with their lives. I appreciate how Ang always keeps me updated, and I think she's amazing at her role. The service you provide has been invaluable, especially for my patients who were sofa surfing. One patient even told me that he wouldn't be here if I hadn't connected him with Ang, that's just how impactful her support has been.”

Social prescriber, September 2025

“

Ang couldn't have been more helpful to me and contactable! I've had really positive feedback from patients. A couple of patients were initially sceptical about what the service could offer, so during an appointment I called Ang and had her on speaker phone so the patient could hear for themselves what support she could give and this was helpful. I think everyone has felt she is easy to talk to and is trying to find tailored help to suit what each person is looking for.”

Social prescriber, September 2025

“

Triage has been fantastic at taking participants on a journey and connecting people to local opportunities. They have identified and dealt with barriers that the PCN didn't know existed.”

GP partner, December 2025

Challenges and lessons learned

Although the Future Grow Pilot achieved strong outcomes, delivery highlighted several challenges that shaped our learning and inform our recommendations for future provision.

1 Timeframes of support

- **Impact:** The pilot model offered up to 14 weeks of support per individual; however, due to the complexity of participants' needs, this timeframe was often insufficient for many to make meaningful progress. While 14 weeks was appropriate for those already closer to employment, volunteering, or training, individuals with multiple or deeper barriers required longer-term support. Demand for the service also exceeded capacity at times, resulting in waiting lists and highlighting a clear gap in provision.
- **Learning:** A fixed 14-week model does not suit all participants, particularly those with more complex needs. A more flexible approach is required, recognising that individuals are at different stages of readiness and may need extended time to stabilise, address barriers, and build confidence before progressing. The presence of waiting lists further demonstrated both the demand for this type of support and the need for increased capacity.
- **Recommendation:** Introduce a more flexible support model that allows for varying levels of engagement based on individual need. Where funding allows, extend the programme duration to up to six months for those requiring more intensive support, enabling them to address barriers before progressing. Additionally, consider increasing capacity to reduce waiting lists and ensure timely access to support.



Challenges and lessons learned (continued)

2 Mental health, anxiety and motivation

- **Impact:** Mental health challenges, particularly anxiety, significantly affected engagement, including interview attendance, participation in sessions, and confidence in social settings. Low motivation, often linked to underlying mental health needs, also impacted individuals' ability to follow through on actions and remain committed, leading to inconsistent engagement and slower progress.
- **Learning:** It became clear that many participants were not ready for immediate job search or employer engagement. Instead, they required a period of confidence-building and support, sometimes over several weeks, before feeling able to take next steps. This reinforced the need for a more flexible, staged approach based on individual readiness.
- **Recommendation:** Embed mental health and wellbeing support within the programme, alongside employability coaching. Introduce a phased delivery model that prioritises confidence, resilience, and social skills development before progressing to job search activity, ensuring participants are better prepared for sustained outcomes.

3 Trauma-related disengagement/non enrolment:

- **Impact:** Despite initial engagement, people affected by trauma were unable to sustain participation, highlighting the fragility of progress when underlying issues aren't addressed. A high number of referrals were not suitable for the pilot, as many individuals did not feel they were ready to take the initial steps to move into employment, volunteering, or further education. In some cases, participants initially expressed interest but later changed their minds once support began, which reduced the number of individuals we were able to successfully progress.
- **Learning:** Employability alone cannot resolve deep-rooted trauma; without embedded therapeutic pathways, disengagement risk remains high. We gradually increased Triage's presence in the community, including within clinical settings, to promote engagement and raise awareness of the programme. We gradually introduced an initial light-touch meeting with individuals before enrolment to assess readiness and commitment.
- **Recommendation:** Subject to funding, future delivery should build in extended engagement timeframes and build referral routes to specialist trauma support, ensuring participants have access to clinical or therapeutic interventions alongside employability coaching.



Case studies

M's journey: From self-doubt to securing employment

After joining the Future Grow pilot in March 2025, M set out to improve his confidence, develop his skills, and secure meaningful employment.

Before joining the programme, M had been out of work since 2023. Despite completing online courses and attending several interviews, he struggled to secure a role. Feelings of anxiety and low confidence held him back, making it difficult to showcase his strengths and take the next step forward.

With consistent support from his Triage Key Worker, M began to rebuild his confidence. He received guidance around interview preparation, including what to expect, how to present himself, and how to approach common questions. This personalised support helped him feel more prepared and focused when opportunities arose.

As his confidence grew, so did his skills. M developed stronger IT and administrative abilities and became more comfortable interacting with others, something that had previously been a challenge. He began to feel more positive about his future and motivated to keep progressing.

His hard work paid off when a work trial at the Post Office led to an offer of employment. Now working 21 hours per week, M is enjoying the variety in his role, particularly interacting with customers and being part of a team. Being back in work has given him a renewed sense of purpose, routine and self-worth.

Looking ahead, M has big ambitions. He hopes to complete teacher training in the future and even dreams of opening his own record shop. For now, he is focused on becoming more self-sufficient, building his independence and enjoying the positive momentum he has created.

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Case studies (continued)

D's journey to full-time success:

With the right support at the right time, D's journey has resulted in stable, full-time employment.

D began with a simple coffee shop conversation with Triage, where he shared the challenges he was facing, including health issues, financial pressures and a lack of direction. At this stage, his confidence was low and the process of finding work felt overwhelming.

Through consistent support from Triage, including regular calls, messages and face-to-face meetings, D began to rebuild confidence and explore new opportunities. Practical help with CV writing, job applications, and interview preparation enabled him to take his first meaningful steps towards employment.

As progress continued, Triage provided access to additional support such as IT training and a free laptop, helping to overcome digital barriers and improve job search skills. Attending a local job fair with his Triage Key Worker proved to be a turning point, supported by holding conversations with a local employer which led to an interview opportunity.

With continued encouragement and preparation from Triage, D approached the interview with increased confidence and secured a full-time role.

Now in stable employment, D has gained not only a job, but also renewed confidence, independence, and a sense of purpose. D's journey demonstrates the powerful impact of tailored support, persistence and belief in what's possible.

S's journey: Overcoming barriers with Triage support

When S first engaged with Triage, she was facing significant challenges, including anxiety, chronic pain and ongoing financial strain caused by long hours in unsuitable work.

From the outset, Triage took a personalised and holistic approach. Building trust was key, through regular contact including calls, voice notes and informal meetings. Communication was adapted to meet her needs, using accessible methods to overcome a hearing impairment and ensure she could fully engage.

Practical support played a vital role in S's progress. Triage worked with S to create an up-to-date CV and cover letter, supported job applications, and helped identify roles that better suited her health needs. Over time, S secured a job with fewer hours that was more manageable and aligned with her circumstances.

At the same time, Triage provided wider support beyond employment. We assisted with a PIP reassessment, connected S to pain management services and linked her with disability support for home adaptations and mobility needs. These interventions helped to remove barriers that had previously limited her independence.

The results have been life changing. S received a substantial PIP back payment, easing financial pressures, and began making progress toward greater stability and independence. Alongside this, engagement with support groups and services has created a stronger foundation for ongoing wellbeing.

This journey demonstrates the power of looking beyond employment alone. With Triage's continued encouragement and light-touch support, S is now in a more positive position—financially, physically and emotionally and is building a more stable and sustainable future.

Case studies (continued)

E's journey: The positive impact of volunteering

Triage began supporting E in April 2025. E had a learning difficulty resulting from a childhood brain injury, and although she had strong family support, she was keen to develop her independence. Upon referral, E had no previous work experience and did not have a CV, but she showed a clear interest in animals.

To support her goals, Triage supported E to create her first CV and provided practical support to help her feel more confident and prepared. This led to E securing a voluntary role at an animal rescue shop. With tailored preparation around communication, confidence, and workplace expectations, E quickly settled into the role. She excelled across a range of tasks including sorting, pricing, and merchandising stock, and particularly enjoyed working in the toy section. E volunteered three days per week, building valuable skills in customer service, organisation and time management.

Alongside her placement, Triage helped E to take part in a range of community activities to build her confidence and social connections, including attending an art group at Darlington Hippodrome, where she enjoyed diamond art and made new friends. Her work was even selected for an exhibition, which was a proud achievement.

Overall, E has made excellent progress – growing in confidence, developing new skills, and becoming more socially active. She is now much better prepared for future opportunities and continues to take positive steps towards independence.

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Conclusion

The Future Grow pilot has demonstrated clear and measurable success in supporting individuals with complex and overlapping barriers to take meaningful steps towards employment, training, and volunteering. By embedding employability support within primary care settings, the programme effectively reached individuals who are often disengaged from traditional services, providing tailored, holistic support that addressed both practical and wellbeing needs.

The outcomes achieved, including 68% progressing into employment, training, or volunteering, alongside significant improvements in confidence, motivation, and wellbeing, highlight the value of this integrated approach. The pilot also strengthened partnership working across health, social prescribing, and community services, creating a more joined-up system of support for patients.

However, the pilot also highlighted key areas for development. The complexity of need across the participant group reinforces the importance of flexible delivery models, extended timeframes and embedded mental health and trauma-informed support to enable sustained engagement and progression. Demand for the service further evidences a clear gap in provision and the need for increased capacity.

Overall, Future Grow has proven to be an impactful and responsive model that not only supports individuals towards economic activity but also contributes to wider health and wellbeing outcomes, aligning strongly with ICB priorities. With further investment and refinement, there is significant opportunity to scale and embed this approach more widely, supporting more individuals to overcome barriers, improve their quality of life and achieve long-term, sustainable change.



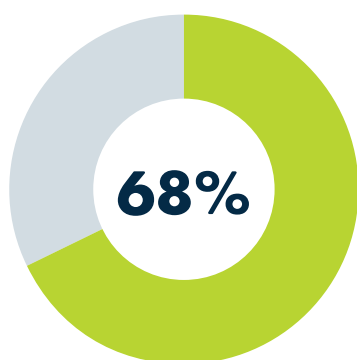
Return on Investment

The Future Grow pilot, providing intensive support to 104 participants, cost Triage £85,891 to deliver. **We would like to thank Darlington PCN** for their contribution of £37,807 to cover the cost of the pilot in the second six months of delivery.

The total cost equates to:

£826
per participant

who received support from Triage, including health and wellbeing support, support to overcome complex barriers, confidence building and employability skills.



(71 participants) achieved positive progression to paid employment, training or further education and/or volunteering at a cost of **£1,210** each. This includes **13 participants sustaining employment for at least six months.**

**An estimated
£12,500
per year in
fiscal benefit**

can be attributed to each additional person moved into sustained employment.

This is consistent with DWP's July 2026 Connect to Work Social Cost Benefit Analysis, which models current Universal Credit arrangements, wage rates and working hours. Wider societal benefits, including additional economic output and improvements in health and wellbeing, are approximately

**£21,000
per annum
per additional
person in work**

Therefore, on a basic level, Triage's pilot, costing

£85,891 has benefited the UK economy by £435,500 per annum based on 13 participants entering sustained employment – a savings/benefit ratio of £5.07 for every £1 spent.

However, with the length of unemployment being eight years on average amongst the participant group and some 71 participants becoming engaged in employment, training or volunteering activity, the wider positive financial impact of the pilot, including on reduced NHS use and societal benefits, will be much greater.

Why are Triage delivering Impact Pilots?

From 2023-2026, Triage chose to invest in a dedicated team to deliver Impact Pilots, enabling testing of 'what works' for key priority groups who need additional support to access employment or progress to other positive destinations. Pilots enabled us to be flexible and creative, outside of some of the parameters of our other contracted provision.

Each pilot was carefully designed, monitored and evaluated, with participant feedback built in, enabling us to tweak the delivery model to best meet individual needs. Each pilot aligned with the ambitions of the Government and devolved authorities to provide tailored interventions to support the achievement of an 80% employment target.

Our other pilots have supported:

- Inmates within a prison setting and ex-offenders
- Older jobseekers aged 50+
- People with disabilities via a supported employment model
- NEET young people in Wakefield
- Young people seeking to enter the tech sector

Further information

For more information, including outcomes from our other pilots, please contact:

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