





SOCIAL RESEARCH NUMBER: 75/2017 PUBLICATION DATE: 07/12/2017

# EVALUATION OF COMMUNITIES FOR WORK

# Stage 2: Process and Outputs Evaluation Summary Report

#### 1. Introduction

- 1.1 In September 2016, the Welsh Government (WG) appointed OB3, Dateb, People and Work and the Institute for Employment Studies to undertake an evaluation of its Communities for Work (CfW) initiative.
- 1.2 CfW is designed to respond to the Welsh Government's Tackling Poverty Action Plan 2013 by supporting long term unemployed and economically inactive adults and 16-24 year olds not in employment education or training (NEET) to increase their employability and to move into or closer to employment. Over a five year period to 2020, CfW aims to support 47,500 people living in the 52 Communities First (CF) cluster areas across Wales. CfW is jointly funded by the WG, the Department for Work and Pensions (DWP) and the European Social Fund (ESF).
- 1.3 CfW is delivered at a local level by teams comprising specialist youth and adult mentors, employment advisers and triage support workers, who all work in community settings such as Integrated Children's Centres and CF premises. Mentors and advisers seek to engage participants, to understand the factors that hinder them from working and to agree personal action plans, determined by their individual needs. Participants are then helped to access relevant support, training, job search activities and work experience opportunities. Those with more complex barriers and deemed to be more than 12 months away from employment are supported by adult and youth mentors (as appropriate), whilst those deemed to be slightly closer to employment are supported by specialist employment advisers. Triage support workers provide mentors and advisers with case management support.
- 1.4 Whilst all CfW staff work in community settings, mentors and triage support workers are employed by Lead Delivery Bodies (LDBs), whilst advisers are seconded from the DWP.

# 2. Research aims and methodology

- 2.1 The three aims of the evaluation are to:
  - elucidate the theory of change for CfW and develop the logic model underpinning the programme
  - assess how the programme has been set up and how it is being operated
  - provide an indication of its overall effectiveness.
- 2.2 The evaluation is being undertaken in three stages between October 2016 and January 2018. The work commenced with the elucidation of a theory of change and logic model for the CfW initiative and this formed the basis of the Stage 1 report, published in April 2017. This is a summary of the Stage 2 report, which draws upon the theory of change in assessing how the programme has been set up and is being implemented. A third and final report will be published in early 2018, exploring progress made against targets and the effects of CfW upon participants.
- 2.3 The research that led to the production of the Stage 2 report involved:
  - undertaking an on-line survey of 161 CfW front line delivery staff
  - conducting face to face interviews with 40 operational managers across the Welsh Government, the DWP and LDBs
  - undertaking a package of qualitative fieldwork in 19 out of 52 CF cluster areas. Within each selected cluster, the fieldwork undertaken included:
    - interviews with cluster managers and front line delivery teams comprising triage workers, DWP advisers, adult mentors and youth mentors. In all, 141 individuals contributed to this element of the fieldwork
    - telephone discussions with 10 training providers
    - telephone/face-to-face discussions with 10 referral agencies and/or third sector bodies that have engaged with CfW
    - telephone interviews with 14 employers who have engaged with CfW
    - o one-to-one interviews with 115 programme participants
    - o reviewing a random sample of 163 participant portfolios
    - o reviewing cluster progress reports for each of the 19 selected clusters
    - drafting internal cluster and participant 'case study' papers which triangulated the evidence gathered from the various individuals interviewed and documents reviewed
  - synthesising the findings of the fieldwork undertaken
  - reviewing the database of participants
  - preparing and peer reviewing the Stage 2 Process and Outputs Evaluation report.

# 3. Key findings

#### Programme development and launch

- 3.1 CfW was developed by the Welsh Government in close cooperation with the DWP, building upon the Communities First platform whilst drawing upon lessons learnt from the implementation of initiatives such as the DWP's Want to Work and the Welsh Government's Lift programme.
- 3.2 The development of CfW broke new ground in that it brought together diverse organisations in ways and on a scale not previously seen. Whilst this allowed the leverage of a significant level of ESF support, the ambition and magnitude of the programme has made integration challenging.
- 3.3 It was intended that CfW would be rolled out on an incremental basis between April 2015 and April 2016. In practice, however, the programme took longer to implement than envisaged, not least because it took longer than expected for the 18 LDBs involved in CfW's delivery to prepare themselves operationally to adopt the programme. CfW is, nevertheless, now fully operational in all but four clusters, albeit that some are still at the early stages of implementation.
- 3.4 The Welsh Government CfW team issued Operational Guidance for the programme setting out the roles to be played by front line delivery staff, programme eligibility criteria, evidence and monitoring requirements, marketing and publicity arrangements and key processes such as how to access training and support from a Barriers Fund. CfW front line delivery staff (triage workers, advisers and mentors) generally felt the Operational Guidance to be clear and comprehensive, albeit that some thought there might be scope for refreshing aspects in light of experience, given that CfW has now been running for over a year.
- 3.5 Alongside the Operational Guidance, the Welsh Government devised a participant portfolio designed to capture participants' personal details, their employment history, their qualifications/certifications and participants' job goals and aspirations. The portfolio document is also designed to capture details of discussions between participants and their advisers or mentors as well as information about activities undertaken by participants (e.g. training or volunteering/work placements) and any outcomes they achieve (e.g. qualifications, entering employment or undertaking jobsearch upon leaving CfW).
- 3.6 Front line delivery staff generally found the participant portfolio easy to complete and regarded it as a useful tool for capturing participant information and recording the progress they make. Whilst still mostly positive, delivery staff were a little more mixed in their views of the utility of the participant portfolio as a tool for action planning and performance management. It was thought that there might be scope to improve the participant portfolio and to develop it as an electronic resource.
- 3.7 Each LDB and the DWP is required to record and submit data about participants and the outcomes they achieve to the Welsh Government. However, Data Protection regulations prevent LDBs and DWP from easily sharing participant data between

them and this was seen by some front line delivery staff as a hindrance, particularly in terms of LDB' staff's inability to use DWP databases to identify potential clients.

#### Staff skills

- 3.8 The job descriptions relating to all front line delivery roles emphasise the need for close team working between triage support workers, advisers and mentors. Beyond this, triage support workers' job descriptions have a primarily administrative focus whilst those of advisers and mentors emphasise understanding the needs of and supporting target client groups, as well as working collaboratively with other agencies.
- 3.9 There was high degree of overlap in the requirements set out in front line staff's job descriptions/person specifications and the skills which front line staff feel they need to do their jobs well. CfW staff did not generally feel that they needed training in these areas, suggesting that the workforce possesses the necessary skills.
- 3.10 CfW staff do, nevertheless, receive a reasonable amount of training, though advisers (as DWP employees) tend to receive more training than do mentors and triage workers (as LDB employees), via the DWP's 'route way' programme. It was thought that further training/ information on issues such as welfare benefits and local labour markets would be beneficial, as would more awareness raising sessions on themes such as mental health, substance misuse and cognitive and learning conditions.

#### **CfW and Communities First**

- 3.11 It was envisaged that CfW would build upon the foundations laid by CF, capitalising upon an existing infrastructure and tapping into established relationships to provide holistic packages of support that meet the needs of individual participants. Our research would suggest some variation in the degree to which CfW is aligned with day to day service delivery in CF clusters: in general, CfW staff employed by LDBs have integrated well with wider CF arrangements, but the integration of DWP staff has often been weaker.
- 3.12 Factors which it was thought facilitated the integration of CfW and CF services were: co-location, a mutual focus on clients' best interests, regular joint meetings, cross referral between the two programmes, easy access to training and other support via CF, established relationships with CF staff and strong leadership and management. Factors which were thought to hinder close working between CfW and CF teams were often the converse of those that were thought to engender cooperation.
- 3.13 There was some concern that the closure of CF could compromise the implementation of CfW, as a result of the erosion of connections and local knowledge, the loss of premises in target communities, the loss of accessible training provision and other support services and the loss of a key referral route into CfW.

#### Referral into CfW

- 3.14 The routes by which participants most commonly come to be involved with CfW are referrals from Jobcentre Plus (JCP), engagement work done by CfW staff, word of mouth from other clients and referrals from CF. Advisers' clients are more likely to have been referred by JCP, whereas mentors are more likely to attract clients as a result of engagement work they do or as a result of referrals from CF.
- 3.15 CfW teams have actively sought to engage with key partnerships and organisations in their areas (e.g. Careers Wales, Youth Engagement and Progression Framework teams and third sector organisations) in order to raise awareness of the services and support available. Referrals from these other local sources have thus far been fewer than had been anticipated, however. More broadly, efforts to 'market' CfW have been fairly limited to date and variable from one cluster to another. This means that the CfW programme may not be as visible as it could be.

#### Holistic and integrated support in trusted, less formal settings

- 3.16 A key assumption underpinning the design of CfW was that programme staff would offer holistic packages of support, often involving multi-agency effort, in developing individuals' employability skills and in moving them towards employment. Whilst CfW teams do engage partner agencies to help participants in addressing particular barriers to work, the extent to which this happens varies from one cluster to another and also between individual members of CfW teams.
- 3.17 Examples of the kinds of support agencies to which CfW staff had referred participants included social services, mental health organisations, drug and alcohol misuse agencies, disability support agencies, housing and homelessness support services, furniture schemes, Women's Aid, family information services, welfare advice services, Citizens Advice, food banks, learning providers and CF. On the whole, front line staff found support services in their areas accessible though in some areas, accessing mental health services can be more difficult, simply because of the very high levels of demand upon services and the consequent prioritisation of those services upon the most severe cases.
- 3.18 As well as support agencies, CfW operates alongside a number of other interventions, the ambitions of which overlap with those of CfW e.g. Lift and various ESF funded initiatives. Whilst managers seek to ensure that CfW operates seamlessly with other interventions, some perceive there to be an element of duplication and competition between CfW and certain other interventions.
- 3.19 A key feature of the design of the CfW programme is that services are delivered in less formal settings which are accessible and well used for a broad range of activities within the communities where target participants live. Whilst this has generally worked well, the facilities available to CfW staff have been better in some areas than others, with a lack of private meeting spaces within community venues being a recurring theme.

#### Integration of CfW team

- 3.20 The CfW programme is managed and implemented by representatives from the Welsh Government, DWP and LDBs. In designing the programme, it was assumed that staff from these different organisations could work together effectively to deliver a seamless service. Whilst there are examples of close cooperation between front line staff employed by LDBs and the DWP, bringing together staff from these different organisations and traditions to work as one team has proved challenging in a number of areas.
- 3.21 Factors which were thought to facilitate effective team working across organisational divides were thought to include trust, effective and regular communication, colocation, a mutual focus on clients' interests, effective leadership helping to engender a feeling of belonging to one team and respect for each other's skills and attributes. It was also thought that clarity on job roles and effective systems to follow were helpful in fostering a team spirit.
- 3.22 One of the main factors making it difficult for CfW team members to work well together was the fact that advisers and mentors have been set separate targets for participant engagement and, more crucially, for outcomes. It was argued that the competition to which these separate targets can give rise could be overcome by the allocation of cluster targets, which might also help to engender a stronger team spirit.

#### First contact triage and case-loading

- 3.23 There has been and remains a degree of confusion surrounding the first contract triage process and, allied to that, the role of the triage worker. Triage is approached in a slightly different way in each area, with marked variations in the extent to which triage workers, advisers and mentors are involved in the first contact triage process (i.e. conducting eligibility checks and initial needs assessments with clients and assigning them to the most appropriate form of support).
- 3.24 A majority of front line delivery staff felt that the triage process, regardless of how it is undertaken, is effective in allocating individuals to the optimal form of support for them, though views of the process' effectiveness varied between triage workers, mentors and advisers.
- 3.25 The size of the caseloads carried by advisers and mentors varied, but in general youth mentors' caseloads were a little lower than those of adult mentors or advisers. Across the board, the caseloads of longer serving staff members tended to be slightly higher than those of individuals who were newer to their jobs.

#### Action planning and advisory support

3.26 Advisers and mentors tend to be guided by the participant portfolio in building up a picture of clients' situations and understanding the barriers that make it difficult for them to find and sustain work. Clients often face multiple and sometimes interconnecting barriers, ranging from attitudinal or psychological barriers (e.g. mental health issues, lack of self-confidence, unrealistic expectations etc.) to more practical difficulties (e.g. a lack of effective job search skills, drug and alcohol misuse

- problems, a lack of skills/qualifications, transport barriers etc.). The sheer range and complexity of the barriers faced by many participants suggests that the programme is, by and large, reaching those it was intended to help.
- 3.27 Once participants' support needs have been assessed, adviser and mentors typically work with clients to identify small steps that will help them move closer to being work ready. This step by step approach is intended to reassure participants that they can manage and to allow them to feel that it is possible for them to progress. In reality, action planning with participants tends to be a fluid process, recognising that the barriers participants face can get in the way and that progress will not always be linear.
- 3.28 The nature of the support provided varies, depending upon individuals' needs and, indeed, each adviser or mentor's personal styles. On the whole, however, advisers tend to focus upon job preparation and job-search, whilst mentors, who work with individuals who have more complex needs and who are further away from the labour market, tend to focus upon building clients' resilience and skills. Mentors generally also make more use than advisers of external agencies to support their clients.
- 3.29 Participants were overwhelmingly positive about their advisers/mentors and it was clear that the continuity of support possible under CfW allowed high levels of trust to develop between participants and their advisers/mentors. This contributed in part to there being less referral of clients between mentors and advisers (and vice versa) that had been envisaged at the programme design stage.

## **Training**

- 3.30 CfW participants are able to capitalise upon training opportunities to develop their skills and thus, increase their employability. Training is delivered by mainstream providers, CF and a training provider procured by the Welsh Government to deliver courses specifically to meet the needs of CfW participants.
- 3.31 CF represents an important (if not the main) source of training in most areas, with courses tending to be of short duration, delivered very locally and to have a strong emphasis on employability. Courses of this nature were seen to help to build participants' confidence and motivation as well as providing them with basic certification required for many roles. CfW staff generally found training provision available from CF easy to source, relevant to participants' needs and of good quality. There was widespread concern among CfW staff that the closure of the CF programme could have serious implications for the availability of accessible, fairly low level employment related training in their areas.
- 3.32 The provider retained by the Welsh Government to deliver training specifically designed for CfW struggled to cope with the volume of training requested during the first 12 months of the contract. This led to front line delivery staff being rather less positive about the availability, accessibility and relevance of courses delivered by the retained training provider. However, it is expected that an electronic booking system (EBS) developed by the training provider and launched fully in April 2017 should help to balance supply with demand more effectively and there is room for optimism that the situation should improve over the coming few months.

#### **Barriers Fund**

- 3.33 The Barriers Fund is intended as a fund of last resort to help support participants to meet costs or purchase essential items, without which they would be unable to take up a job or participate in an agreed activity. It is most commonly used to meet travel expenses and to buy work appropriate clothing for participants.
- 3.34 The take up of Barriers Fund support has been lower than expected, partly due to a perception among front line delivery staff that the Fund is difficult to access. However, where the Barriers Fund is accessed, it is generally considered essential to helping participants get over the final hurdle(s) to work.

#### Initial outputs and outcomes

- 3.35 The number of participants who had engaged with the programme as at February 2017 is broadly in line with profiles, but falls considerably short of the numbers necessary to achieve the programme's overall engagement targets, assuming a straight line recruitment profile across the programme's five year life-span. Whilst it would seem reasonable to expect recruitment levels to build up as CfW gathers momentum (and in the wake of welfare reforms), it seems that meeting the programme's overall output targets is likely to prove challenging.
- 3.36 The number of participants progressing into employment was broadly in line with profiles, with the exception of young people who are NEET, with a considerably higher number than profiled achieving job outcomes. Again, however, the outcomes achieved fall some way short of the numbers necessary to achieve the programme's overall job outcome targets by 2020, assuming a straight line outcome profile across the programme's life-span.

#### Recommendations

- 3.37 The report concludes by making 19 recommendations relating to:
  - 1 The co-location of advisers with triage workers and mentors.
  - 2 The development of contingency plans to deal with the potential impact of the closure of CF upon CfW.
  - 3 The adoption of cluster (rather than individual/separate LDB and DWP) targets.
  - 4 Strengthening arrangements for working with local JCP teams.
  - 5 Drawing up plans for engagement with other partners and potential referral sources.
  - 6 Developing an internet presence for CfW.
  - 7 Seeking opportunities for simplification following the closure of CF and discussing with WEFO whether eligibility criteria might be relaxed.
  - 8 Developing a joint DWP/LDB position on triage.

- 9 Reviewing the triage worker's role.
- 10 Keeping advisers and mentors' caseloads under review to ensure that clients are progressing.
- 11 Planning how to minimise and mitigate the impact of the closure of CF upon the availability of local training provision.
- 12 Continuing to monitor the performance of the Welsh Government's retained training provider, paying particular attention to the effectiveness of the EBS and to the take up of training provision.
- 13 Ensuring that front line delivery staff are conversant with the EBS and how it works.
- 14 Encouraging cluster teams to work with nearby clusters to bring together groups of participants for particular courses.
- 15 Reviewing the guidance and application process for the Barriers Fund.
- 16 Reviewing the Operational Guidance with a view to refreshing the document.
- 17 Reviewing the participant portfolio and consider developing an e-portfolio.
- 18 Ensuring regional staff events continue to provide briefings on welfare benefits and on key aspects of operational practice.
- 19 Devising or commissioning training for CfW staff on key themes, tying such training in to the DWP's existing route-ways programme where possible.

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Mae'r ddogfen yma hefyd ar gael yn Gymraeg

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