Department for Education

# Evaluation of the Derby Local Area Coordination Approach

## Evaluation report

## March 2020


## Claudia Mollidor, Raynette Bierman, Charlotte Goujon, Leonardo Zanobetti, Ellis Akhurst (Ipsos MORI)

# Contents

List of figures 4
List of tables 4
Acknowledgements 5
Key messages 6
Executive summary 8
Introduction 8
The project 8
The evaluation 9
Key findings 9
Lessons and implications 11
1. Overview of the project 12
1.1. Project context 12
1.2. Project aims and intended outcomes 13
1.3. Project activities 15
1.4. Future delivery 18
2. Overview of the evaluation 19
2.1. Evaluation questions 19
2.2. Evaluation methods 19
2.3. Changes to evaluation methods 21
2.4. Limitations of the evaluation 22
2.5. Future evaluation 23
3. Key findings 24
3.1. Process findings 24
Project set-up 24
Introductions with young people 26
Supporting young people 30
3.2. Outcomes findings 34
Health, mental wellbeing and resilience 34
Relationships and support 38

Housing and living independently 39
Finances 40
Building confidence and aspirations 42
Risk-taking behaviour and other challenges 44
3.3. Sustainability 44
3.4. Value for money 45
4. Summary of key findings on 7 practice features and 7 outcomes 46
4.1. Practice features 46
4.2. Outcomes 47
5. Lessons and implications 49
Key lessons 49
Implications 52
Project legacy and sustainability 52
References 54
Appendix 1: Index of Multiple Deprivation – Derby City 55
Appendix 2: Project theory of change 56
Appendix 3: Derby outcomes star 59
Appendix 4: Survey analysis 61
Appendix 5: SSDA903 data analysis 62

# List of figures

Figure 1: Age at time of introduction ..... 27

Figure 2: Evidence summary on mental health and resilience ..... 37

Figure 3: Evidence summary on housing and living arrangements ..... 41

Figure 4: Evidence summary on education, employment and other aspirations ..... 43

Figure 5: Index of Multiple Deprivation – Derby City ..... 55

Figure 6: Original logic model for the Derby Local Area Coordination project ..... 57

Figure 7: Updated logic model for the Derby Local Area Coordination project ..... 58

Figure 8: Outcome Star for the Derby Local Area Coordination project ..... 59

# List of tables

Table 1: OC3 data returns for care leavers aged 19-21 in Derby City Council ..... 13

Table 2: Project aims and key outcomes ..... 14

Table 3: Summary of evaluation activities ..... 19

Table 4: Limitations due to health problems and disabilities ..... 35

Table 5: Feelings about health and appearance ..... 35

Table 6: sWEMWBS scores ..... 61

Table 7: SSDA903 data for all young people in Derby City Council ..... 62

Table 8: SSDA903 data for care leavers supported by Coordinators ..... 63

Table 9: SSDA903 data for care leavers declining Local Area Coordination support ..... 64

# Acknowledgements

The evaluation team would like to thank the Local Area Coordination team for their support throughout the evaluation period, with particular thanks to Neil Woodhead, Sarah Edmundson and John Parnham. Additionally, this evaluation benefitted greatly from the individuals who took the time to speak with us about their experiences having a Local Area Coordinator, for which we are very grateful.

We would also like to thank the team at DfE, especially Michelle Harrison, and Dr Ana FitzSimons from Opcit Research for many constructive conversations.

# Key messages

Local Area Coordination is an all-age support model and community-based approach that aims to empower individuals to develop their personal strengths and find solutions within their community before considering formal services. Since 2012, Derby City Council has applied Local Area Coordination in adult social care services and this innovation project involved extending the approach to support young adults who recently left care (aged 16-25), funded by the Department for Education's Children's Social Care Innovation Programme from 2017-2020.

The results of an independent outcomes and process evaluation indicate that the support of a Local Area Coordinator can benefit young people who spent time in care. Young people reflected positively about their relationship with their Coordinator, which was often perceived as more accessible and reliable than other statutory provision. They could contact their Coordinator as often as they wanted or needed to, and there was no 'end date' for their support in contrast to other support provided by the Council, including Personal Adviser (PA) support.

Evidence from the case studies also showed that the quality of these relationships contributed to outcomes for young people. For example, young people repeatedly noted the importance of having a Coordinator who supported them throughout their journey, especially regarding mental health and wellbeing challenges. The case studies showed that young people felt their Coordinator helped them gain knowledge, tools and confidence to find solutions to problems. For example, young people reported taking more control of their accommodation, living conditions and personal finance, as well as developing greater educational and employment aspirations and/or seeking these opportunities. As such, Local Area Coordination may have contributed to preventing or reducing the use of formal services, however, further evaluation including larger sample sizes and an appropriate counterfactual would provide greater insights about what may have happened if young people did not have a Coordinator.

Evidence on what worked well and challenges encountered during the delivery also highlighted recommendations for the (wider) application of Local Area Coordination to support young people leaving care, as outlined below.

1. **Set-up**: Local authorities (or other bodies) that seek to use a Local Area Coordination model should build in sufficient lead-in time from the outset to account for recruitment, training, scoping resources in the community, building networks that can facilitate introductions with young people, and setting up appropriate monitoring processes. Joint working should be encouraged to increase collaboration. For example, the development of new partnerships between the Local Area Coordination team and other internal services led to introductions to families with children in or on the edge of care.

2. **Knowledge-sharing**: Although Local Area Coordination is an all-ages model, team managers should consider whether additional resources could be introduced to support Coordinators responding to specific needs or challenges, for example, the team in Derby introduced training on trauma-informed approaches. Knowledge transfer within and between teams should be encouraged, for example, learning from professionals with experience of supporting vulnerable young people, ideally those in or leaving care. In addition to identifying resources within the community, Coordinators should also be aware of entitlements and support available to ensure care leavers, especially those who do not have or are not in touch with their PA, are well-informed – for example, about not being required to pay Council Tax.
3. **Monitoring progress and outcomes**: Local Area Coordination teams should consider how best to record progress and outcomes. This will ensure that they can capture any effects on individuals they support and the extent of the effects. Realistic expectations for the content, format and frequency of progress monitoring should be agreed and co-designed with Coordinators to balance the benefits of recording progress (e.g. success stories) with costs and administrative burden. Given the highly mobile nature of Local Area Coordination, using mobile apps or Tablets may be desirable, offering teams the opportunity to record information in real-time, in the community, without the need to be in an office. Teams could also record information about individuals who decline the offer to better understand reasons for this.
4. **Setting realistic expectations**: Commissioners and project staff should clearly define what is considered a good outcome and how this is measured, especially for young people who are often more vulnerable to adverse experiences and need to build resilience before achieving sustained positive outcomes. This should be realistic about the likely impact during a time-constrained innovation project on outcomes that take significant time and effort to result in sustained improvements. Evaluators should work closely with project teams to identify a counterfactual to better test what would have happened in the absence of young people having a Coordinator, for example, using theory-based approaches (e.g. contribution analysis) where there are challenges in identifying a suitable comparison group.
5. **Sequencing of outcomes**: Commissioners and project staff should consider how different outcomes are valued and recognise that some outcomes may be precursors to others. To avoid overambitious claims that projects will seek to improve multiple outcomes over a short period of time, project staff should identify key aims to assist evaluators in defining realistic primary and secondary outcomes.
6. **Redefining who needs support**: Policymakers and local authorities should consider how to best address the gap in service provision and expand the support offer to young people who have been in care but do not meet the statutory requirements to receive leaving care support such as a PA. Local Area Coordination offers a potential solution to support individuals who are struggling in their transition to adulthood.

# Executive summary

## Introduction

It is well-evidenced that when compared with their peers who have not been in care, many young people leaving care face serious disadvantage in their lives, including a higher risk of homelessness, unemployment and likelihood of teenage pregnancy (DfE, 2015). Led by Derby City Council, this project involved extending their provision of Local Area Coordination in adult social care services to young adults who recently left care (aged 16-25). Local Area Coordination is a community-based approach that supports the development of relationships at the individual and community levels to nurture resilience and local solutions with a focus on helping people to stay strong independently, rather than be dependent on services.[1] Derby City Council received £770,992 in 2017 as part of the Department for Education's Children's Social Care Innovation Programme. The Department commissioned Ipsos MORI to conduct an evaluation of the project, and this report sets out the findings from the evaluation.

## The project

The project was led by the Local Area Coordination team in Derby City Council, including 10 experienced Coordinators plus four new Coordinators recruited as part of the extension. The team took several steps to extend support including: (1) focusing on four wards (Alvaston, Arboretum, Derwent and Sinfin) that include deprived neighbourhoods and key destination areas for care leavers in temporary or hostel accommodation; (2) meetings with the Leaving Care team and shadowing opportunities between the two teams; and (3) being mobile in communities (rather than office-based) to scope resources for young people, for example, relevant services, organisations and networks. In early 2018, Coordinators started making introductions with care leavers.

As a person-led approach, Coordinators listened to young people to develop a shared understanding of key issues or areas to focus on, as well as the frequency and types of contact that suited them. Coordinators then provided personalised one-to-one support and advice to build young people's confidence, capacity and connections to improve their independence, resilience and support networks.

[1] A summary of the Local Area Coordination approach can be found at: https://lacnetwork.org/local-area-coordination/

## The evaluation

This evaluation adds to the evidence of 14 other independent evaluations of Local Area Coordination conducted in England and Wales [2], however, it is the first to focus specifically on young people leaving care. The outcomes and process evaluation employed a mixed-methods design including both quantitative and qualitative data collection using:

- Interviews with senior staff in the Local Area Coordination and Leaving Care teams
- Focus groups with the Local Area Coordination team
- Case studies through in-depth interviews with both care leavers and the Coordinators supporting them
- Outcome measurement surveys among care leavers
- Analysis of information collected by Coordinators (Shared Agreements and logs)
- Analysis of child-level statutory data of Derby's care leavers (OC3 data returns)

By drawing data together from multiple sources, the evaluation aimed to explore how circumstances and outcomes changed over time for young people supported by Coordinators, and the impact Coordinators had. Furthermore, using data from the survey and statutory data, the evaluation aimed to compare circumstances and outcomes with a comparison group of care leavers not receiving support from Coordinators.

## Key findings

Coordinators were introduced to 39 young people during the evaluation timeframes. Of these, 9 young people declined support and 5 were 'closed' primarily when young people had moved out of Derby and were no longer in contact. As of March 2020, 13 relationships were active, 2 were pending and 10 were inactive (meaning they had not been in contact in more than 6 weeks but this could resume). The pace of introductions was slower than expected when the bid was submitted, so the team made connections across the Council and other services to encourage introductions from multiple channels, including the Leaving Care team, Youth Offending Service team, and mental health team.

Building on the fact that Local Area Coordination is an all-ages model, qualitative evidence from Coordinators highlighted the importance of reflecting on the needs and

[2] A timeline of the 14 independent evaluations, including a synthesis of the evaluations to assess the strengths, assets and requirements of Local Area Coordination, released in 2020, can be accessed here: https://lacnetwork.org/evidence-base/

opportunities for care leavers in their respective wards. Early on, this was informed through meetings with the Leaving Care team, but Coordinators also sought specific training, for example, on trauma-informed approaches. Overall, the team felt that the principles of the approach, which are relationship-based and person-centred, resonated well and ensured support was tailored to young people's circumstances, needs and goals. Some key findings on what worked well included:

- Young people perceived their relationship with their Coordinator as different from their experiences with other statutory provision, for example, they described them as more reliable and less judgmental. Young people liked that they could drive the frequency and type of communication themselves, which gave them a better sense of agency and offered longer-term support where needed. They could contact their Coordinator as often as they wanted or needed to, and there was no 'end date' for their support in contrast to other support provided by the Council, including Personal Adviser (PA) support.
- Young people felt they could rely on their Coordinator. Key characteristics that supported the development of relationships were Coordinators being friendly and good listeners always open and accessible for a conversation, who also treated them with respect. Furthermore, young people felt valued because Coordinators did not have a pre-determined agenda, which they felt demonstrated their motivation was a genuine desire to help.
- Some young people supported by Coordinators did not have other sources of support (for example, they did not have a PA). Therefore, this support was often a key resource for them and they described their Coordinator as a 'friend' or family member, for example, 'a mum or step-mum or auntie'.

Evidence from the case studies also showed that the quality of these relationships contributed to outcomes for young people. For example, young people repeatedly noted the importance of having a Coordinator who supported them throughout their journey, especially regarding mental health and wellbeing challenges. The case studies showed that young people felt their Coordinator helped them gained knowledge, tools and confidence to find solutions to problems. For example, young people reported taking more control of their accommodation, living conditions and personal finance, as well as developing greater educational and employment aspirations and/or seeking these opportunities. The qualitative evidence demonstrated a nuanced picture for each young person, where some young people showed improvements in relatively short spaces of time, but for others, changes in outcomes were minimal or had worsened slightly due to adverse life events. Despite this, young people felt that they would have been in a worse position without support from their Coordinator.

On quantitative measures, the baseline and follow-up findings showed underlying differences between care leavers supported by Coordinators and a group of care leavers

without Coordinators (comparison group). Results indicated that the group of young people that Coordinators supported had higher levels of need and were more likely to not be in education or employment compared with the comparison group. This may relate to the fact that approximately half of the young people supported by Coordinators did not appear to have a PA or other leaving care worker. Due to small sample sizes and missing data, it was not possible to employ matching methods that would improve comparative analysis, which precluded drawing conclusions comparing outcomes in both groups. Further evaluation including a counterfactual would provide greater insights on what would have happened in the absence of Local Area Coordination, including further analysis of its impact on the use of formal services and associated cost reductions.

## Lessons and implications

The key lessons and implications are set out below.

- The evidence showed that the extension of Local Area Coordination to care leavers was successful. As such, there is scope for Derby City Council (and others) to continue to expand. For example, one unanticipated consequence of developing new partnerships during the project was the additional scope to be introduced to and support families with children in or on the edge of care.
- Findings from the evaluation emphasised the importance of strong leadership and joint working between the Local Area Coordination team, Leaving Care team and other teams to ensure a complementary approach to working and maximise the added-value that Local Area Coordination can provide to care leavers.
- The evaluation found that more could be done to develop good practice for assessing the role of Coordinators on the progress of people they support. Leadership teams and Coordinators should co-design a monitoring approach that balances the benefits of recording progress (e.g. success stories) with the costs and administrative burden for its completion.
- Evidence suggests that the flexibility and high intensity of support were critical to this approach, therefore rolling the approach out may have high costs that would need to be offset through the avoidance of unnecessary service use and/or improved life chances and outcomes to be cost-effective (the intended aim).
- The comparison group planned for this evaluation was ultimately not suitable due to differences between groups. Future evaluations should aim to identify a counterfactual to draw stronger conclusions about what would have happened in the absence of the intervention. Given potential challenges to identify an appropriate comparison group, theory-based impact approaches could also be explored. Larger sample sizes would also increase confidence in the conclusions.

# 1. Overview of the project

It is well-evidenced that when compared with their peers who have not been in care, many young people leaving care face serious disadvantage in their lives, including a higher risk of homelessness, unemployment and likelihood of teenage pregnancy (DfE, 2015). Led by Derby City Council, this project supported young adults who recently left care (aged 16-25) using the Local Area Coordination approach, funded by the Department for Education's Children's Social Care Innovation Programme (Innovation Programme hereafter). It aimed to build the capacity, confidence, connections and contribution of care leavers to improve their long-term outcomes and resilience, and reduce service demand and dependency. This chapter provides further details about the project's context, aims, and activities.

## 1.1. Project context

### Statutory data on care leavers in Derby City Council

As of April 2019, there were 237 known care leavers aged 17-21 years old in Derby City Council (DfE, 2020). Table 1 below provides summary statistics from 2016/17 to 2018/19 on six data items that local authorities must maintain records of for care leavers aged 19 to 21.[3] In 2018/19, most measures are in line with national averages for care leavers in England. A notable difference, however, is the proportion of care leavers not in education, employment or training (49% in Derby compared with 39% nationally), and the decline from previous years of those in education, employment or training (from 53% in 2017 and 61% in 2018 to 47% in 2019). Compared with statistical neighbours, some improvement could also be made in terms of care leavers in suitable accommodation (89% compared with 86% in Derby).

Some measures may be influenced if care leavers 'stay put' with their former foster carers after their 18th birthday, as this offers accommodation and ongoing support. Derby City Council has more care leavers 'staying put' (34%) compared with the national average (26%), though this has declined from 41% in 2018 and 43% in 2017 (LAIT, 2020).

Derby City Council are in touch with most care leavers, with only 4% currently not in touch compared with the national average of 7% (LAIT, 2020). More broadly, support services in Derby appear to be relatively successful, with the most recent Ofsted

[3] Local authorities are only required to stay in contact and keep records of care leavers up to their 21st birthday since not all individuals over this age will request support from the local authority. Records for care leavers 21 and over are extremely limited.

inspection of Derby's children's services (June 2017) giving an overall rating as 'good', with the 'experience and progress of care leavers' also rated 'good' (Ofsted, 2017).

**Table 1: OC3 data returns for care leavers aged 19-21 in Derby City Council**

| | 2017 | 2018 | 2019 | | |
|---|---|---|---|---|---|
| | Derby | Derby | Derby | National | Statistical neighbours[4] |
| Care leavers aged 19-21 years old (base) | 130 | 136 | 167 | NA | NA |
| Local authority not in touch | 10 (9%) | 9 (7%) | 7 (4%) | 7% | 7% |
| In suitable accommodation | 110 (87%) | 114 (86%) | 143 (86%) | 85% | 89% |
| In any education, employment or training (EET) | 70 (53%) | 83 (61%) | 78 (47%) | 52% | 50% |
| In higher education | -N/A[5] | 6 (4%) | 10 (6%) | 6% | 7% |
| Not in education, employment or training (NEET) | 50 (41%) | 43 (32%) | 82 (49%) | 39% | 48% |

Source: Local Authority Interactive Tool (LAIT, 2020)

### Local context

The Local Area Coordination team covers 10 out of 17 wards in Derby but four wards were a key focus for this project: Alvaston, Arboretum, Derwent and Sinfin. The project's funding bid notes that these wards were identified on a needs-assessed basis as they represent key destination areas for care leavers in temporary or hostel accommodation. According to the Index of Multiple Deprivation (IMD) 2019, these areas include neighbourhoods with high levels of deprivation (see Appendix 1).

## 1.2. Project aims and intended outcomes

Local Area Coordination emphasises close collaboration with each individual to develop a shared sense of purpose on what to improve. Importantly, the approach encourages individuals to seek opportunities and solutions within their communities. Through the

[4] The Local Authority Interactive Tool uses the Children's Services Statistical Neighbour Benchmarking Tool (CSSNBT). Each local authority has 10 'neighbour' local authorities with similar socio-economic characteristics. The models are intended as one method to benchmark progress. More information is available here: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/866202/Local_authority_interactive_tool_user_guide_2020.pdf

[5] Derby's data for the number of care leavers in higher education in 2017 is not available.

development of self-supporting individuals and communities that are more resilient and less reliant on services (where appropriate), Local Area Coordination aims to reduce service demand and dependency. As such, it also seeks wider system change regarding how services respond to current and future needs of individuals and communities.

In the context of this project, Table 2 outlines the key challenges often faced by care leavers, providing the rationale for the extension as set out by Derby City Council in the project's bid. It also includes the project's intended outcomes identified for the evaluation. In summary, it aimed to improve young people's:

- **Confidence** in their abilities, skills and strengths, as well as their future
- **Capacity** to find solutions to problems independently or through support within their networks
- **Connections** with their friends, family and communities
- **Contribution** to their communities, both informally and formally, including through volunteering and employment
- **Resilience** in the longer-term, therefore reducing service demand

**Table 2: Project aims and key outcomes**

| **Rationale for intervention**<br>Care leavers are more likely to experience… | **Intended outcomes**<br>Local Area Coordinators support care leavers in Derby to… |
|---|---|
| Social isolation due to more transient lifestyles and limited connections to their local community | Make connections and build social networks (family, friend and community networks) |
| Challenges adapting to independent living, including managing finances and budgeting, cooking, etc. | Improve their financial situation so they feel in control of their finances and have enough income to support themselves (and family) |
| Poor health outcomes emotionally, physically and mentally with a risk of low self-esteem, self-harm, behavioural problems and anti-social behaviour | Have improved health and wellbeing, as well as improved self-esteem to build confidence |
| Transient lifestyles brought about through insecure or temporary accommodation with the potential to lead to homelessness or custody | Have better accommodation and living arrangements that are stable, safe and appropriate |
| Low aspirations for their future and/or limited knowledge about how to achieve their aspirations | Be more confident about their future by building their capacity to work towards and achieve their goals |

| Rationale for intervention<br>Care leavers are more likely to experience… | Intended outcomes<br>Local Area Coordinators support care leavers in Derby to… |
|---|---|
| Reliance on services and/or benefits due to being unemployed or not in education or training | Have better access and take-up of education, training and employment opportunities |

Source: Ipsos MORI, based Derby City Council's funding bid

## 1.3. Project activities

### What is Local Area Coordination?

Local Area Coordination is an all-age support model originating in Western Australia. It is a community-based approach that aims to empower individuals to develop their personal strengths and find solutions within their community before considering formal services. Local Area Coordinators[6] embed themselves within a community and provide personalised one-to-one support and advice to individuals who may be isolated or rely heavily on formal services. Through a flexible and principle-driven approach, Coordinators ask people 'what would make a good life for you?' and help them to identify and develop their strengths, needs, and opportunities. As a person-led approach, individuals choose whether they want contact with a Coordinator and what they want to focus on to develop a shared sense of purpose for their relationship. Coordinators then 'walk alongside' them as they build their confidence, capacity and connections to improve their independence, resilience and support networks.[7]

When several local authorities in England and Wales adopted the model, including Derby City Council in 2012 (Derby City Council, 2020), it was primarily integrated into adult services with a focus on older adults. In Derby, it has been rolled out across 10 wards within the city, supporting more than 1,400 people since the service began.

[6] Coordinators are recruited based on values as well as their qualifications and experiences, coming from a wide variety of backgrounds, including Nursing, Midwifery, Social Work, Police, Housing, Community Care, and Children's Services/Youth Offending.

[7] A summary of the Local Area Coordination approach plus additional resources about the approach can be found at: https://lacnetwork.org/local-area-coordination/ and Derby City Council's Local Area Coordination webpage can be found at: https://www.derby.gov.uk/health-and-social-care/your-life-your-choice/independent-at-home/local-area-coordination/

### Evidence base for Local Area Coordination in England and Wales

The Local Area Coordination Network was established to support the ongoing learning and development of the model in England and Wales (LAC Network, 2020). As part of this, it also serves as a hub for collating evidence, including 14 independent academic evaluations carried out on different English and Welsh programmes. Looking across the evidence base, the Network reports consistent findings that support the aims of Local Area Coordination, including reduced service use and improved outcomes for people and communities. More information and access to the evaluations reports is available here: https://lacnetwork.org/evidence-base/

Notably, in 2015, Think Local Act Personal (TLAP) commissioned a Social Return on Investment (SROI) analysis of Derby's Local Area Coordination service. The findings suggested that for every £1 invested in the service, £4 of social value is created. The report can be accessed here: https://www.thinklocalactpersonal.org.uk/Latest/Social-Value-of-Local-Area-Coordination-in-Derby/

## How was Local Area Coordination applied to young people in Derby?

Building on a team of 10 experienced Coordinators working in 10 out of 17 wards in Derby as part of adult social services (working mostly with adults who are post-retirement), the Local Area Coordination team took several steps to extend support to young people (aged 16-25) who spent time in care. This involved:

- recruiting four new Coordinators to increase capacity and bring knowledge and experience of supporting vulnerable young people to the team - three were previously Children's Practitioners and one was from the Domestic Violence team.
- focusing on four wards (Alvaston, Arboretum, Derwent and Sinfin) that include deprived neighbourhoods and key destination areas for care leavers in temporary or hostel accommodation.
- meetings with the Leaving Care team and shadowing opportunities between the two teams to build an understanding of one another's practical roles.
- spending time in communities to scope resources for young people, for example, relevant services, organisations and networks, and making themselves more visible among young people.
- using a 'Shared Agreement' to develop a loose action plan with the young person about what they want to focus on. It was intended that this would completed for all new introductions and reviewed every 6 months to check-in and monitor progress in a structured but informal manner. For example, the Shared Agreement included an outcomes star to be asked at multiple timepoints (see Appendix 3).

In early 2018, Coordinators started making introductions with care leavers.[8] In total, Coordinators had introductions with 39 care leavers. More details on these relationships are provided in section 4 and Appendix 2 details the project's Theory of Change.

Based on available monitoring data, the project was delivered mostly as described by the project's bid. The key change to delivery was the number of care leavers supported. According to the original bid, the team anticipated supporting 20 individuals each year, reaching a total of 40 care leavers. As noted above, the team had introductions with 39 care leavers but only 30 continued to additional meetings and support, of which another 5 were closed soon after.

Another notable change related to the project's original plans to receive introductions primarily through the Leaving Care team, suggesting young people would be supported by both a Coordinator and their PA. This changed over time, partially because the Leaving Care team felt Local Area Coordination could complement the extension of statutory support for those aged 21-25. The Local Area Coordination team also developed partnerships with other internal services, which led to introductions with young people who did not currently have or had never had a PA.

## How does the approach differ from traditional leaving care services?

In England, most looked after children officially leave care at 18, though they can choose to leave as early as 16. Local authorities must appoint a Personal Adviser (PA) whose role it is to stay in touch with a care leaver and provide statutory support to facilitate their transition to adulthood and independent living. Under previous legislation, local authorities were required to support care leavers until the age of 21, or 25 if they were in education or training. PA support was extended in April 2018 so that all care leavers up to 25 can request support as and when needed (DfE, 2018).

PAs are expected to proactively keep in touch with all care leavers until they turn 21. For care leavers aged 21 or over, the duties to proactively keep in touch, assess needs and maintain pathway plans with care leavers only apply when support is requested. To ensure care leavers are aware that they can request support until they turn 25, local authorities must remind them on an annual basis.

For the context of this project, it is also important to note that the legal definition of care leavers does not cover all young people who have been in care and who may need support as they enter adulthood. Local authorities are only required to support individuals

[8] All Coordinators also continued to support (older) adults during the project. This is because Coordinators are community-based and therefore do not focus on one specific segment of the community. For example, Coordinators can support the development of networks across ages.

who experienced being in care for at least 13 weeks after their 14th birthday, including some time after their 16th birthday. As such, statutory data is not recorded for those not meeting these criteria.

Compared with statutory services for care leavers, Local Area Coordination offers an innovative approach to supporting young people. Notably, the relationship is entirely driven by the young person and whether they want to engage. Through discussions with their Coordinator, they collaboratively develop a shared understanding of key issues or areas to focus on. Unlike statutory services who have obligations and requirements in line with a pre-specified agenda (though importantly not limited to this), Local Area Coordination is person-centred, allowing young people to identify what is important to them for a good life.

**Local Area Coordination: features of innovation**

- The frequency of contact and focus are driven by the individual, with high levels of flexibility.
- Relationships can continue for as long as necessary. Young people do not 'age out' of the service.
- Coordinators are mobile in communities, not office-based.
- There is a focus on identifying and building strengths, abilities, and skills to find solutions independently before going to services.
- Coordinators seek opportunities through community connections and resources.
- Limited or no paperwork directly with individuals is required.
- Coordinators can support young people who have spent time in care but do not meet statutory definitions.

## 1.4. Future delivery

Coordinators will continue to support the care leavers introduced during this innovation project's timeframes (as needed) because individuals are always welcome to re-open discussions with their Coordinator. However, the implications associated with the end of funding for this project are discussed in section 4.

As of March 2020, Derby City Council have received additional funding to continue delivery under the Innovation Programme. At the time of writing, the Local Area Coordination team are developing delivery plans.

# 2. Overview of the evaluation

Ipsos MORI was commissioned by the Department for Education to conduct an independent evaluation of the project. This evaluation adds to the evidence of 14 other independent evaluations of Local Area Coordination conducted in England and Wales (LAC Network, 2020); however, it is the first to focus on young people leaving care.

## 2.1. Evaluation questions

The evaluation plan, approved in March 2018, set out the key evaluation questions:

- Are Local Area Coordination services for care leavers personal, flexible and accountable?
- Do care leavers supported by Coordinators:
    - expand and use personal networks,
    - have community connections, and
    - make adequate use of services?
- Do care leavers have improved access to health support?
- Are care leavers prepared and able to live independently after initial support?
- Do care leavers feel safer and have a sense of security?
- Are care leavers more confident and able to deal with their finances and have financial stability?
- Is care leaver access to education, employment and training improved?

## 2.2. Evaluation methods

The evaluation included a process strand to explore what worked well and less well when applying Local Area Coordination to young people leaving care as well as an outcomes-focused strand to assess key outcomes (including a comparison group for some data collection). A variety of methods conducted between April 2018 and March 2020 informed the evaluation. Details are provided in Table 3.

**Table 3: Summary of evaluation activities**

| Activity | Purpose | Description |
|---|---|---|
| **Analysis of monitoring data collected by Coordinators** | To understand project delivery progress and key characteristics of the cohort supported by Coordinators. | Ongoing throughout evaluation, with a final review in March 2020. Included summary data from logs and Shared Agreements, including the Derby outcomes star (see Appendix 3) |

| Activity | Purpose | Description |
|---|---|---|
| **Interviews with senior staff** | To understand the lessons learned, barriers and facilitators for extending Local Area Coordination to care leavers. | Interviews with 3 senior staff in the Local Area Coordination and Leaving Care teams took place in February 2020. |
| **Focus groups with Local Area Coordinators** | To understand staff experiences delivering Local Area Coordination and to explore staff outcomes. | Initial focus group conducted in October 2018, involving 6 Coordinators.<br>Follow-up focus group conducted in January 2020, involving 13 Coordinators, of which 10 had introductions with care leavers. |
| **Case studies with care leavers supported by Coordinators** | To understand care leavers' experiences receiving support from Coordinators plus any impacts on key outcomes (for example accommodation, health and wellbeing) and to assess change over time. | A total of 12 interviews were conducted to inform case studies of 8 young people.<br>4 young people were interviewed at 2 timepoints, first in late 2018/early 2019 and again in early 2020. 2 young people were interviewed at the first timepoint but were unavailable for follow-up, and 2 were interviewed at the second timepoint only. |
| **Interviews with Coordinators supporting care leavers** | To gain another perspective of the support provided to care leavers and any progress observed. | A total of 11 interviews were conducted with 5 Coordinators who support the case study young people. 4 were interviewed at 2 timepoints approximately 1 year apart, 1 was interviewed at the second timepoint only. In 2 cases, participants were interviewed twice to discuss support for 2 separate young people. |
| **Outcomes survey with care leavers** | To collect outcome measures for care leavers supported by Coordinators (intervention group) and those not (comparison group) and assess change over time. | Wave 1 completed in December 2018.<br>45 surveys completed (13 supported by Coordinators for some time; 32 comparison)<br>Wave 2 completed in March 2020. 16 surveys completed (6 supported by Coordinators; 10 comparison). |
| **Secondary data analysis (SSDA903 data)** | To compare key statutory measures of the intervention group with the wider care leaver population in Derby. | Analysis of individual-level SSDA903 data from 2016/17 to 2018/19 was conducted in February and March 2020. |

Source: Ipsos MORI

## 2.3. Changes to evaluation methods

The key methods for collecting data are consistent with the original evaluation plan. A small number of changes, outlined below, were made.

**Delayed fieldwork**: Data collection began later than expected to reflect that introductions happened at a slower rate than expected. This meant that only a handful of care leavers were introduced at the time the survey was due to begin. Furthermore, Coordinators sometimes preferred to wait to introduce the survey until the relationship was more established. This was due to concerns that it could have a detrimental impact if young people perceived this as an assessment, which could contradict the Local Area Coordination approach. These delays had knock-on effects for inviting care leavers to take part in interviews because the survey collected their consent for follow-up. Despite delays, most care leavers were interviewed within a few months of meeting their Coordinator (as per the evaluation plan).

**More staff interviews**: The evaluation team conducted more interviews with staff than set out in the evaluation plan, which included nine interviews with a mix of Local Area Coordinators, PAs and senior local authority staff. In the end, 11 interviews were conducted over two timepoints with five Coordinators supporting the eight individuals included in case studies (as detailed in Table 3). Further to this, focus groups with the Local Area Coordination team were conducted at two timepoints, and three senior local authority staff members were interviewed in early 2020. These changes were made to provide more case study data to improve triangulation and to capture key learning as staff adapted their approach to support young people.

**Survey changes:** The survey was originally planned to include three waves; however, this was reduced to two waves (as soon as possible following the introduction and near the end of the evaluation period) to minimise burden and align with project delays. Furthermore, it was anticipated the comparison group would only include care leavers in the seven wards where Local Area Coordination is not delivered. Instead, any care leaver who was not in contact with a Coordinator met the criteria for the comparison group.

**Increased survey incentive:** Following feedback from care leavers and staff, we increased the incentive from £5 to £10 for the first survey and £20 for the second survey.

**Cost-benefit analysis:** It was originally anticipated the evaluation would include a cost-benefit analysis. However, this was found to be infeasible due to the lack of an appropriate comparison group (see limitations below).

## 2.4. Limitations of the evaluation

The evaluation has inevitable limitations that should be considered when interpreting the findings. These relate to project changes and the appropriateness of methods.

**Small sample sizes:** As mentioned, the Local Area Coordination team supported fewer care leavers than originally expected, resulting in a smaller potential sample size for methods like the survey and secondary data analysis. This was exacerbated by challenges reaching all care leavers to invite to the survey via gatekeepers (PAs for the comparison group and Coordinators for the intervention group) and in some cases, young people choosing not to take part. Combined with changes to who Coordinators supported compared with what was originally expected (i.e. having a PA), the small sample sizes meant it was not feasible to robustly match intervention and comparison groups, meaning they were more different from one another than ideal. This was reflected in survey data, which found pre-existing differences between the groups. Those being supported by Coordinators were on average older and had slightly worse outcomes at both baseline and follow-up. This may be because the recruitment for the comparison group used PAs as gatekeepers who were more likely to be in touch with younger care leavers aged 17-21. At least seven young people supported by Coordinators were 21 or over at introduction, and several noted that they did not have a PA, the reasons for which were unclear but may have been because they did not meet the legal definition of 'care leaver'. In response to this limitation, the evaluation team placed less weight on the comparative analysis and focused on 'distance travelled' in the intervention group (though this has implications for attributing change to the intervention, see below).

**Incomplete monitoring data and statutory data:** Although the Local Area Coordination approach is careful to minimise paperwork with individuals, Coordinators are expected to log limited information following introductions and as part of the Shared Agreement, for example, the date of the introduction, who provided the introduction, and key monitoring information about their circumstances. Despite this, these records were not available for all young people that were introduced to Coordinators and data quality varied – for example, most young people did not have a revised Shared Agreement or follow-up outcomes star. Furthermore, approximately half of the young people introduced to Coordinators (who did not decline) were not recorded in statutory data returns from the last three years. In some cases, this was due to individuals being too young (under 16) while others had potentially aged out of PA support at 21 before regulations extended support to 25 and did not return. In other cases, it is possible that young people did not meet the formal definition of a 'care leaver'.

**Representativeness of views:** Although case studies provided opportunities to speak in depth with care leavers and Coordinators about the impact of Local Area Coordination, this was based on a sample of eight young people (out of 25) and the five Coordinators (out of 14) supporting them. It is possible that the experience of others not interviewed

was different to the views reflected in this report. For example, most case study young people had developed a long-term relationship with their Coordinator while other young people appeared to become 'inactive' much sooner. In response to this limitation, the evaluation team conducted additional qualitative fieldwork with the Local Area Coordination team in focus groups and senior staff interviews to gather insights across the wider group.

**Attributing outcomes to the intervention**: Given the limitations associated with comparing the intervention group with a group of care leavers without a Coordinator, the overall evaluation was limited in its ability to assess the extent to which Local Area Coordination contributed to the changes observed in the intervention group. In response to this limitation, the evaluation team incorporated questions into qualitative data collection to gather views from young people about what would have happened without out their Local Area Coordinator, drawing on theory-based approaches.

## 2.5. Future evaluation

In terms of future evaluation, the findings from this evaluation can be used by the Local Area Coordinator team to support future opportunities, both internally and externally. Furthermore, the data analyst recruited as part of the project carried out significant pieces of internal evaluation that will also support future delivery and evaluation. As noted in section 1.4, Derby City Council received additional funding to continue delivery under the Innovation Programme, which will be subject to internal monitoring and evaluation. Future evaluation should build on the findings and lessons set out in this report – for example, it should seek to address the limitations of this evaluation by having larger sample sizes and identifying an appropriate counterfactual to better understand what would happen in the absence of Local Area Coordination. Recognising the challenges encountered in identifying a suitable comparison group, future evaluations could consider employing theory-based impact evaluation approaches, such as contribution analysis or process tracing, as an alternative.

# 3. Key findings

This chapter sets out the key findings from the evaluation. It begins with findings from the process evaluation followed by the results of the outcomes evaluation.

## 3.1. Process findings

### Project set-up

Project set-up can often take longer than expected for several reasons, for example, if the project or intervention requires refining or more time is needed to recruit and train staff. Innovation projects can also require new ways of thinking that may take time to embed, especially where organisations are resistant to change (Sebba et al., 2017). This section describes what worked well to prepare Coordinators to support young people leaving care, as well as challenges encountered and areas for improvement.

#### What worked well during project set-up

Some of the common set-up challenges were mitigated by the fact that Local Area Coordination is an established all-age approach, replicated in multiple countries and locations in the UK. Derby City Council introduced Local Area Coordination in 2012 and had a team of 10 experienced Coordinators using the approach who were established in wards with knowledge of each local area's context, opportunities and needs. This provided solid foundations for the project design and the resources required to deliver it.

Key activities to extend support to young people leaving care included recruitment, meetings with and shadowing the Leaving Care team, and scoping resources for young people in communities. The team chose not to commit significant time and resource beyond these activities, emphasising that Local Area Coordination is an all-age approach with flexibility to adapt to each person's needs. Senior project managers expressed concerns that training could predispose Coordinators to work in a certain way:

> We could have put 2 weeks' worth of training on about specifically working with care leavers but then we would have all had an expectation of what a care leaver looks like, sounds like, talks like – you're pigeonholing yourself if you're not careful. But if you go in wanting to talk to a human being as another human being, you can expect all kinds of stuff to come out of that. (Senior project managers, focus group)

Several external trainings were later attended by some Coordinators, for example on trauma-informed approaches, who fed back key lessons to the wider team. Senior project managers reflected that a trauma-informed approach became an important element for

Coordinators to consider and incorporate into their values and principles when supporting young people introduced to the team:

> We need to acknowledge [any experience of trauma] and understand what the trauma meant and how it is demonstrated in how that individual connects and interacts in the world… As a system, we don't recognise the impact for someone who goes through those life experiences and is then going to be in the world. (Senior project managers)

One example provided by staff was that going into or being in the care system was either related to or in itself a traumatic incident for some young people. Both senior project managers and Coordinators reported that young people did not want to be described as a 'care leaver', which could be associated with this trauma. Coordinators felt strongly about avoiding this term, preferring to focus on the individual simply as a human being. Although evidence did not suggest more training on the issues care leavers face was necessary, Coordinators did describe ways in which supporting young people differed from their usual cohort in adult services (described later) and it may be valuable to build on and share this learning more formally.

### Challenges encountered and areas for improvement

Unlike adult services where Local Area Coordination had become established, the team needed to build links with children's services for this project. The original bid anticipated that Local Area Coordination would support the Leaving Care team, especially in the context of increasing numbers of young people leaving care, and it was originally expected that PAs in the Leaving Care team would introduce young people to Coordinators. In addition to the early meetings and shadowing, Local Area Coordination senior project managers attended PA meetings to maintain their presence. However, staff in both teams recognised challenges communicating the purpose and value of Local Area Coordination to the Leaving Care team:

> We don't think it has always translated as well as we would like it to, that is definitely something I would have done differently now, given the benefit of hindsight. (Senior project manager)

> At first, it was hard to grasp how [the teams] would fit together with statutory support vs. Local Area Coordination…It was a struggle to start with for the PA team. With hindsight, we could have done another joint session…The older the member of staff, the harder they found it to understand the concept of Local Area Coordination. (Senior team manager)

This meant that some PAs “didn’t leap at the chance of introducing” even when young people requested additional support above and beyond statutory support, while other PAs found it “hard to sell” because it was “new and slightly opaque” (Senior team manager). Furthermore, where PAs did offer Local Area Coordination to young people, there were concerns that this did not generate interest because of unresolved questions in the PA team about Local Area Coordination. Based on interviews with staff from both the Local Area Coordination and Leaving Care teams, these challenges appeared to be the combined result of insufficient understanding of Local Area Coordination and a degree of resistance or reluctance among some members of the Leaving Care team to engage with the approach.

Ultimately, evidence suggested this resulted in less joined up working between the teams.  For example, there were fewer introductions than expected through PAs, accounting for only about one-third of introductions according to monitoring data. Furthermore, interviews with senior team managers suggested that Local Area Coordination had a minimal effect on the day-to-day services of the Leaving Care team. Although one member of senior staff regularly worked from the same location as the other team, continued shadowing or co-location may have encouraged more informal conversations across the teams. Additionally, senior project managers highlighted that more engagement from senior leaders across Derby City Council may have improved joined up working and generated introductions.

As part of the project’s set-up, Coordinators spent time embedding themselves further in their communities with a focus on identifying key services, organisations and networks relevant for young people. More time was spent doing this than expected and on reflection, some staff felt this was not the most valuable use of time:

> We spent too much time searching for youth-specific community things for the young people but have found that it was unproductive because we largely knew what there already was and few young people were interested in youth-specific activities. (Senior project manager)

## Introductions with young people

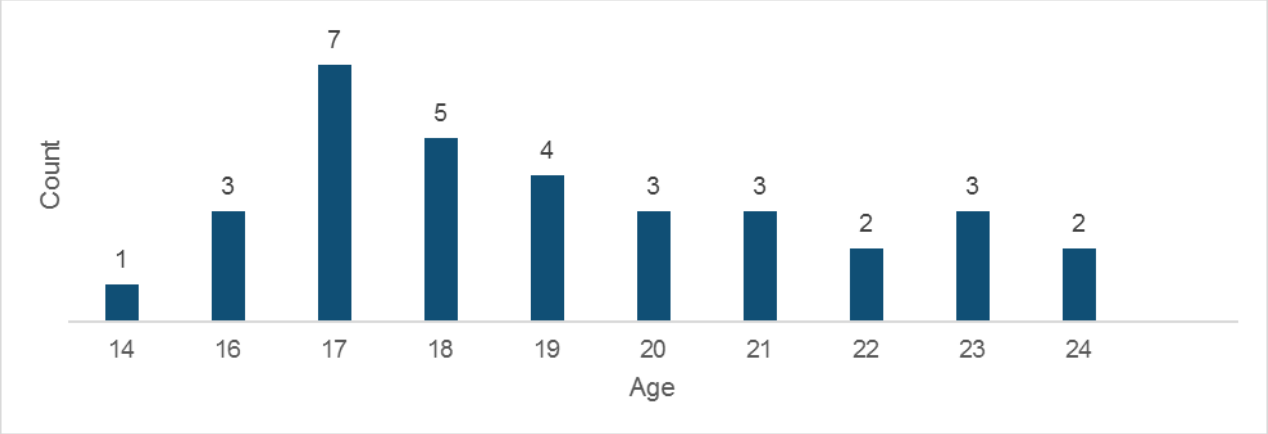
According to project monitoring information, the first introduction and meeting took place in January 2018 and the most recent in January 2020. In total, the Local Area Coordination team had introductions with 39 young people (16 in 2018, 17 in 2019, 1 in 2020). As of March 2020, this included:

- **13 currently active**, meaning the Coordinator provides ongoing support and had contact within the last month or so.

- **10 currently inactive**, meaning a previously active case but the Coordinator has not been in contact with the young person in more than 6 weeks.
- **2 pending,** meaning the Coordinator was awaiting a meeting for introductions.
- **9 declined Local Area Coordination support**. Reasons for declining support were typically not provided, but in at least one case this was because the young person was happy with the support they were already receiving.
- **5 closed,** meaning a previously active case is no longer in contact, primarily due to the young person moving out of Derby. Reasons for moving out of Derby included: leaving the country, and among those still in care and preparing to leave care, moving to a care placement outside of Derby or returning to their family.

Overall, the project supported no more than 30 young people in total during the project timeframe. The original bid set a target to support 20 young people per year for 2 years (40 individuals total), therefore the project did not achieve this target. The bid also set out targets to support 20 young people aged 16-18 and 20 young people over 18. Figure 1 below shows the ages of young people at the time of introduction (ranging from 14 -24). In line with the targets, approximately half were 16-18 and half were over 18.

**Figure 1: Age at time of introduction**




Source: Derby City Council monitoring records

### What worked well during introductions

Considering fewer introductions were made through the Leaving Care team, the Local Area Coordination team sought new avenues for introductions. According to project monitoring information, introductions were made through various channels, for example, the mental health social work team, children in care team, child protection team, residential children's homes, youth offending service, homelessness advisers, and the

Shared Lives team.[9] As awareness of Local Area Coordination grew within services for children and young people, one senior project manager highlighted an unintended but positive consequence of developing these new partnerships. A senior project manager began attending the Vulnerable Children Meetings that take place in Derby on a weekly basis, and it became apparent that there was scope for Coordinators to support parents and families with children in or on their edge of care. This led to new introductions that were outside the scope of this project and evaluation but suggest Local Area Coordination's wider potential to support families and reduce the need for more formal services, and potentially prevent children entering or staying in care.

In addition, the team sent a letter to all care leavers who had addresses on Derby's housing database, which led to three self-introductions. Finally, the team organised meals every few months where young people could meet peers and Coordinators, leading to additional introductions when new individuals came to the meals.

Coordinators noted that it was important for the first introduction to take place in a location and setting where the young person was comfortable. They were very flexible, including having face-to-face meetings in a café or in young people's homes. Others made initial contact via phone or sent contact details and flyers with relevant information to their homes before following up with a face-to-face conversation. On some occasions, PAs came along for the introductions.

The Coordinators' ability to make young people feel at ease while respecting their boundaries was mentioned as being important for the first meeting:

> The first meeting was so important for me. [My Coordinator] came round to my house and posted a message and number [on a flyer] through my door. And it was really not in my face, which I liked. Then I called [them], and [they were] appreciative when I rang [them]. [It meant a lot because] it can take a lot for me to call people as it causes me anxiety. [Then they] came over to my flat for the first meeting and just listened. (Care leaver)

During the first face-to-face meetings, Coordinators and care leavers discussed young people's current situations and how they felt about them, their expectations and aspirations for change. Young people appreciated that those discussions were held in an informal manner.

---

[9] Shared Lives supports adults over 18 in a home environment provided by Shared Lives Carers. This support can be for a few hours during the day, a weekend break or someone living in the home for a short or long period. More information is available at: https://www.derby.gov.uk/health-and-social-care/your-life-your-choice/independent-at-home/adult-placement-scheme/about-shared-lives/

Coordinators also clarified their role and the kind of support they would be able to provide, and what was outside of their remit. They reflected how it was equally important to emphasise what their role was not, for example, a social worker or PA. They also avoided placing any expectations on young people or asking anything upfront.

> I told [them] all the things that I was not, so not a social worker, I don't label myself as being a support worker, but I'm based within the community and I'm trying to help improve their lives or the things they want to change or work on. [They] contributed to the conversation. It was a free, flowing conversation, quite informal really. I did not ask [them] to do anything. It was very open ended, not pressurised. I did not have expectations and was not coming up to [their] door asking why [they] had not done things. (Coordinator, interview)

### Challenges encountered and areas for improvement

When reflecting on the process of making introductions, senior project managers noted that they could have taken more direct responsibility in being available to young people (for example, Coordinators spending more time in the building where Leaving Care services are based) and utilising other agencies, such as housing providers, more quickly.

Some young people initially felt uncomfortable about meeting a Coordinator, and were often sceptical about receiving their support:

> At first I didn't want … I hate meeting new people. But because I was going into my own living … it was more like 'come on, you need to try something new'. I don't know, I think I had a phone call with [my Coordinator] first. Then I met [them] with someone else. (Care leaver)

In focus group Coordinators linked this apprehensiveness to negative previous experiences with Council services. However, they also felt that they had an opportunity to break down that scepticism:

> The approach we use is what helps to overcome scepticism. The Local Area Coordination approach bridges the gaps, for example through subtle things such as not wearing a lanyard. It can change perspectives quickly when people see that we stand for Derby City Council and they aren't what you first thought. (Coordinator, focus group)

Staff from the Leaving Care team felt that Local Area Coordination was more appealing for older care leavers, especially those over the age of 21. They noted that younger care leavers were more likely to see the Coordinator as "just someone else from social care"

and would not want another person involved in their life, which was associated with their time in care where they were “surrounded by professionals” (Senior project managers).

A final challenge and area for improvement relates to how information about introductions was recorded. The funding bid set out intentions around data monitoring and management processes, and there was a shared internal database where Coordinators could log details about young people following introductions, as well as information from Shared Agreements. However, internal project monitoring records show this was only completed for 22 young people. Evidence from interviews and focus groups with the Local Area Coordinator team suggested this was because Coordinators introduced Shared Agreements at different times depending on the individual, the relationship, and the extent to which issues that young people wanted to focus on had been clearly identified. For example, if Shared Agreements were introduced too early, Coordinators noted concerns that young people might feel like they were being assessed, which could be detrimental to building a trusting relationship. Despite this, it appeared that there were gaps in recording information from all introductions as well as recording reasons for those declining the offer.

## Supporting young people

This section summarises what worked well once introductions were made and relationships began to form between Coordinators and young people. It also discusses several ways in which this support might be improved in the future.

### What worked well during support

Interviewed staff described Local Area Coordination as offering a professional relationship with boundaries while being reciprocal and relational, person-centred and “very human”, and flexible (Senior project manager). Both senior project managers felt that, while other services are often tailored for individuals, they can also be bound by targets and outcomes seen as indicators of success, which can influence ways of working. With other services, staff felt that “the door isn’t quite as open as it is with Local Area Coordination…We’re there when you want us there rather than if you’ve [missed your appointment], you’ve missed your chance” (Senior project manager). Importantly, Coordinators did not see Local Area Coordination as a replacement for other services but rather as an approach to working with people which could influence whether and how they engage with services.

When asked how Coordinators compared with other support they have had, some young people perceived motivations behind the role as being different: “[My Coordinator] filled a huge gap. Now I have someone there who wants to be there for me rather than someone who must be there” (Care leaver). They also noted differences in the approach:

> All my other social workers … they've done a lot of the paperwork for me, they've done a lot of the phone calls for me, a lot of the applications, but with this, you don't have that. [They] will help you get the paperwork, yeah, but there's no help in filling it out. It's all 'do it yourself'. You've just got to do it all yourself, all on your own. So, it's a lot more individual…it's making me more independent. (Care leaver)

Key characteristics reported by young people that made a good relationship were Coordinators being friendly, always open and accessible for a conversation. Young people also appreciated when their Coordinator took the time to listen to them, made them feel comfortable and respected their boundaries. For example, one young person described how this helped them open up: "I feel like I can tell her/him anything and that [they] won't judge me on it, [they'll] just try and support me in whatever way needs be".

These were perceived by both Coordinators and young people as critical to develop trust, which was then conducive to more open and engaged conversations.

> Trust is the most important thing to me in building the relationship. I have such a strong relationship with [my Coordinator] and other Coordinators … I enjoy how sincere and sympathetic they are… [My Coordinator] always makes sure I am comfortable and never forces me to do anything I don't want. (Care leaver)

> Trust in relationship comes in – the time that Coordinators can invest early on enables the building of a good relationship –… [Then] good relationships allow to have an open conversation with care leavers about taking responsibility. (Coordinator, focus group)

Presence, reliability, and stability were particularly valued by young people with mental health issues or difficult life situations. In those cases, Coordinators regularly checking up on them or attending medical appointments with them was perceived as genuine care and interest. Some young people referred to their Coordinator as being like family.

> [My Coordinator] is very open… and [they are] always there. When I need her/him, I give [them] a quick call and [they call] back or text back – I always know where I am with [them]. [They are] very present, always there and[they take] me to hospital appoinments etc. (Care leaver)

Young people also felt like their Coordinator was there because they wanted to be there, cared about the people they supported and liked their job: "I understand they have a difficult job, but I can tell they love and enjoy what they do" (Care leaver). This was corroborated by discussions with Local Area Coordinators in the focus group: "A big part

of who you are is attached to [your role as a Coordinator]. It isn't just a job – you put a lot more of yourself into it" (Coordinator, focus group).

Some young people liked the reciprocal nature of the relationship where their Coordinator shared details about their personal life and experiences. This helped young people relate to their Coordinator and better understood the advice they gave: "I enjoy learning about [my Coordinator's] own personal life so it doesn't feel one-sided and I trust [them] … [they] always give me advice from [their] life, and what [they] would do" (Care leaver).

Coordinators were flexible in terms of the channels and frequency of communications. This included phone calls, text messages, or using applications like WhatsApp. Communications via texts were sometimes frequent, including every other day or at least weekly. Face-to-face meetings varied depending on the young person's preference and needs, including every week, fortnight or month. More frequent face-to-face meetings were sometimes arranged at the care leaver's request, on an ad hoc basis.

An important feature of communication appeared to be Coordinators 'nudging' young people by checking in on them periodically:

> Sometimes we need to give some more of a nudge – and the care leavers might recognise they need a nudge. A nudge can be a text, or popping round – and if they don't want to answer the door that's fine – but we show enough of an interest so they know the Coordinators care. It's a fine line. (Coordinator, focus group)

> I am doing a lot more for myself now, but [they] do just give me that extra push. I can go all week with doing something and then I can be so lazy by the end of the week. I could stay like that but then it's just that text or something saying, 'Hi, how are you?' That just motivates you again, makes you think, 'Oh, yeah, [they are] checking up on us. There is someone there that's helping us out and we can go to [them] if we need that help'. (Care leaver)

Internally, Coordinators supported one another during team meetings and through a WhatsApp group where they could share tips or ask for advice on challenging situations.

### Challenges encountered and areas for improvement

Coordinators encountered several challenges when supporting young people. For example, it took some young people longer to understand how Coordinators are different to social workers. Coordinators felt that young people had often experienced things being done to or for them by social workers or other professionals, so it took time for young people to adjust to being enabled by Coordinators to do things for themselves.

Coordinators noted that communicating with young people was different to how they were used to working with older adults. This took some time to get used to and to set boundaries, though this differed depending on each young person's circumstances:

> There's a lot of texting and…it's more sporadic. Whereas with older people we would tend to be a bit more regular about seeing them, with young people you might see them a couple times and then they disappear for a month …, then get back in contact. It's a bit like, 'I need to see you and I need to see you now' which isn't really the approach we normally take and there has to be boundaries in place. (Coordinator, focus group)

Due to the complex nature of some young people's lives, associated with their experiences before, during and leaving care, some Coordinators found themselves spending more time supporting these young people compared with other individuals they support. Staff noted it was sometimes challenging to pull back their support to encourage more independence, in line with the principles of Local Area Coordination. Individual and group reflection helped Coordinators recognise whether they were toeing the line between being a Coordinator and a support worker. Coordinators also described adapting their approach to better support young people with mental health problems, especially in their ways to engage them and supporting them to be independent.

> [The young person] wanted me to get [their] prescription for [them]. Reliant on me, not looking at solutions for [themselves], but the job is not [them] being reliant on me … We are not going to do for you, we may take you a couple of times, it's about anxiety, but we can't do it for you. (Coordinator, interview)

Finally, there were challenges with the internal monitoring of progress and outcomes, especially within the evaluation timeframes. Shared Agreements offered the opportunity for Coordinators and young people to create an action plan and reflect on progress made against this, as well as against more general outcomes measured by the outcomes star. However, records shared with the evaluation team were only available for 22 young people at the end of the evaluation, suggesting Shared Agreements were not yet completed for some young people during the evaluation. Additionally, reviews were completed at different intervals depending on the young person to allow for progress to be made, which meant few were reviewed during the evaluation timeframe. Recognising the importance of taking a flexible and tailored approach, it is notable that there are limits to the amount of progress recorded. Improving ways to record information, both formally and informally, could support an understanding of how and when progress is achieved.

Furthermore, the process of producing a Shared Agreement was not very salient for care leavers. Interviews revealed that many young people did not recollect much beyond

informal discussions they had with their Coordinators about their aspirations and goals: “I remember doing something, but I can’t remember what it was. We wrote these things in about how I was feeling, but that’s all I can remember” (Care leaver).

## 3.2. Outcomes findings

The sections below discuss how support provided by Coordinators affected key outcomes for young people. Coordinators focused on issues that were identified as important to young people at that time. By design, this meant that Coordinators did not provide support related to all areas of need for all young people.

During the evaluation, it became clear that some outcomes were important precursors for others. For example, in cases where individuals were struggling with their mental health, this often had knock-on effects for other areas of their lives, including employment and managing finances. In addition, having unstable or unsuitable accommodation, or unstable support networks, also appeared to hinder progress in other areas of life. As such, the section below discusses outcomes in the order that roughly approximates this sequencing. It draws on evidence from the qualitative interviews and surveys with young people and Coordinators, project monitoring records and SSDA903 data. It is important to reiterate that project monitoring records were incomplete and SSDA903 data did not capture young people who are not formally defined as ‘care leavers’.

### Health, mental wellbeing and resilience

According to the available monitoring records, at least 17 young people introduced to Coordinators had one or more health problems, including 9 with mental health problems being managed by their GP or secondary mental health services. Examples of health conditions were anxiety, drug addiction and learning disabilities.

As mentioned previously, the surveys found notable baseline differences between young people who were introduced to Coordinators (intervention group) and care leavers without a Coordinator (comparison group) – meaning it is not appropriate to attribute any changes to Local Area Coordination. As shown in Table 4, both baseline and follow-up surveys showed that a greater proportion of the intervention group reported a mental health problem or disability that affected their day-to-day activities, compared with the comparison group.

**Table 4: Limitations due to health problems and disabilities**

| Question | Wave 1 | | Wave 2 | |
|---|---|---|---|---|
| **Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months? (excl 'no' and 'don't know')** | **Int.** | **Comp.** | **Int.** | **Comp.** |
| **N=** | **13** | **32** | **6** | **10** |
| **Physical health problem or disability** | | | | |
| A little | 1 | 5 | 0 | 1 |
| A lot | 1 | 2 | 2 | 1 |
| **Mental health problem or disability** | | | | |
| A little | 3 | 8 | 3 | 3 |
| A lot | 3 | 6 | 2 | 2 |
| **Learning disability** | | | | |
| A little | 2 | 5 | 3 | 4 |
| A lot | 0 | 2 | 1 | 0 |

Source: Ipsos MORI survey data

Furthermore, the intervention group were less happy with their physical health, emotional or mental health, and appearance compared with the comparison group at both timepoints (see Table 5). Finally, the intervention group showed a lower score on the Short Warwick-Edinburgh Mental Wellbeing Scale (sWEMWBS) at both baseline and follow-up (Appendix 4 provides the results).

**Table 5: Feelings about health and appearance**

| Question | Wave 1 | | Wave 2 | |
|---|---|---|---|---|
| **How happy or unhappy are you with… (average score; 1=very happy to 7=very unhappy)** | **Int.** | **Comp.** | **Int.** | **Comp.** |
| **N=** | **13** | **32** | **6** | **10** |
| Your physical health? | 4.0 | 2.8 | 2.8 | 2.6 |
| Your emotional / mental health? | 4.8 | 3.1 | 5.3 | 2.8 |
| Your appearance (the way that you look)? | 4.6 | 3.0 | 3.3 | 2.1 |
| **Do you feel able to access the right health support for you? (average score, 1=completely to 7=not at all)** | 2.8 | 2.6 | 2.3 | 1.8 |

Source: Ipsos MORI survey data

Multiple young people in interviews reported having mental health issues that significantly affected their wellbeing, confidence, and other areas of their lives. Figure 2 overleaf

depicts 2 composite case studies based on interviews with young people. In both cases, young people were struggling with their mental health when they met their Coordinator and this was impacting their day-to-day life, such as getting up and feeling motivated. Coordinators supported young people to manage their mental health as well as finding new hobbies or opportunities. Both journeys demonstrate the ups and downs typically mentioned by young people and the support Coordinators provided.

It was evident from interviews with Coordinators and young people that improvements in mental health were often dependent on wider contextual circumstances. For example, some young people talked about how their mental health was improving but then a relationship with a partner or family member broke down, or living situation worsened. These adverse events led to a decline in mental health, which had knock-on effects for progress in other areas of life. Poor mental health was repeatedly noted by both care leavers and Coordinators as a key barrier to progress. Young people's ability to progress their goals was seen as reliant on the stability of their mental health and could therefore be hindered by inconsistent or deteriorating mental health.

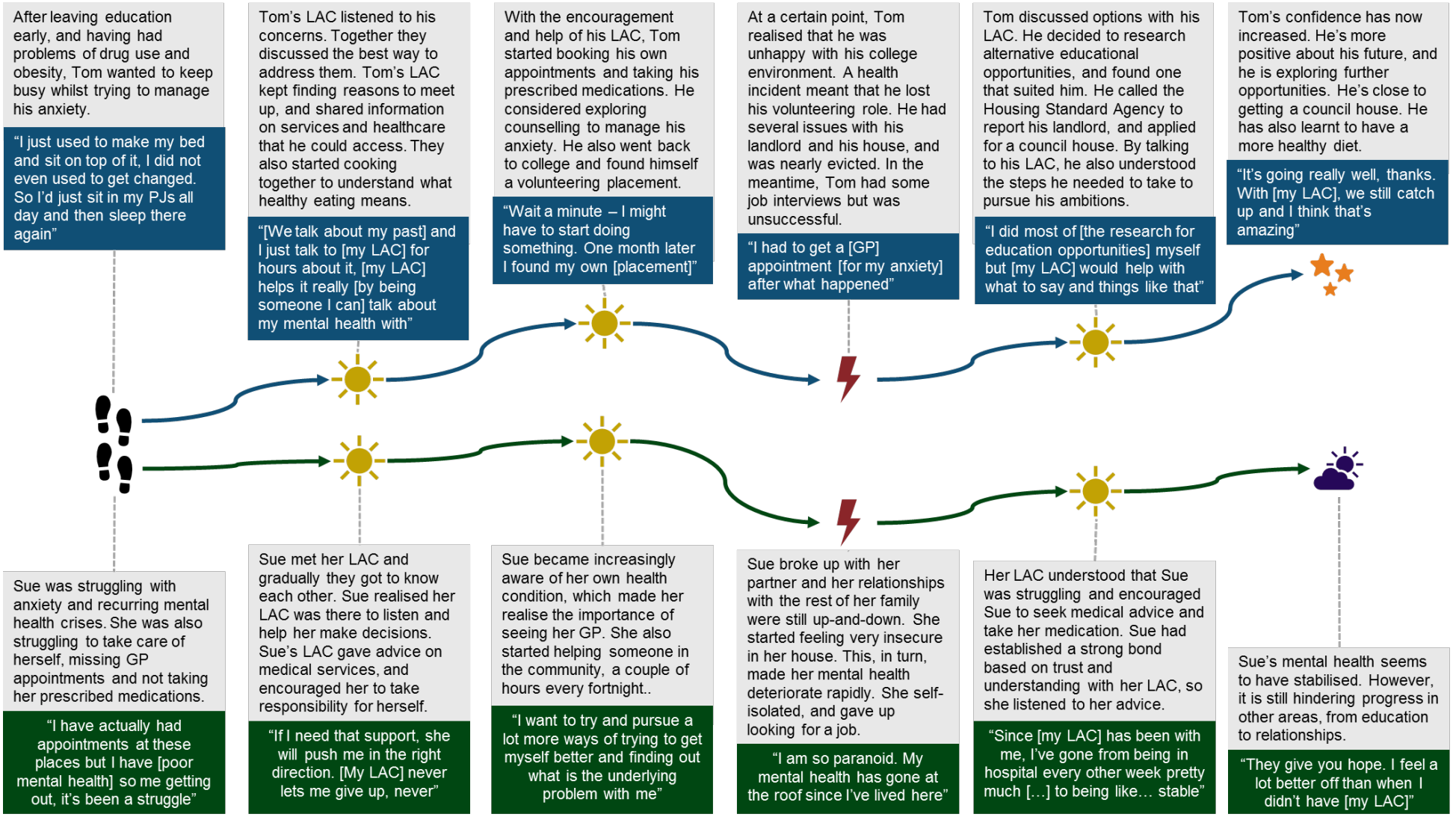
> [They have] got ambition and knowns what [they]want to do. But [they still have] got a bit more to do to put that into action. And it very much has to do with how [they feel] on the day… [Their] mental health has more of an impact on [their] decision making… if [their] mental health deteriorates, that could hinder progress because [they] would shut [themselves] off a bit, which will make it a bit more difficult for me to progress. (Coordinator, interview)

Despite these challenges, young people repeatedly noted the importance of having a Coordinator who supported them throughout their journey, especially when they were experiencing challenges that affected their mental health and wellbeing. This highlighted that, although overall outcomes may not have improved, Coordinators played an important role in mitigating additional negative consequences and supported young people's resilience.

> [My Coordinator] gave me hope. I had spent so long being depressed and I hated the world, [thinking] no one understands what I am going through. (Care leaver)

> I needed more support than social workers offered, like, I needed help getting to hospital appointments… I've enjoyed working with [my Coordinator] over past couple of months – [they] make lots of time for me, for example takes me to the doctors, checks up on me… Since working with [them], I have gone from being in hospital every week/other week to being stable. (Care leaver)

**Figure 2: Evidence summary on mental health and resilience**




Source: Ipsos MORI, based on case study interviews with young people and Coordinators

## Relationships and support

Young people typically described having a small group of people they were close to but also that they sometimes felt isolated where they lived. According to project monitoring information on presenting issues, overcoming isolation and improving community cohesion were relevant for 23 young people at introductions.

Coordinators supported young people with their existing relationships. For example, this included supporting young people to re-establish relationships with their parent(s), when they moved in with their partner, and when relationships broke down.

> If things were not great at home, it was nice to talk to [my Coordinator] and [they] would help me with how to deal with it, which I never had before, and that was really helpful. (Care leaver)

> I know that [their] relationships particularly with [their] family are quite… fraught. [They have] got a relationship with a sibling, but they do not live nearby … With [their] parent it's really difficult … it's an on and off relationship. (Coordinator, interview)

For young people with their own families, Coordinators provided support that benefited the whole family, especially where children were involved. For example, Coordinators supported young people by attending court appointments and meeting with social workers. In some cases, Coordinators helped young people to overcome trust issues with services, resulting from prior experiences in care and or interacting with those services. There have been instances where young people tended to under-report (or not report) serious issues to the police, fearing that they would not be believed, or that this would reflect badly on them and affect other aspects of their life, for example, an increased level of scrutiny on parents for the wellbeing of their children.

> But [they] had not reported [the incident] to the police. Why would you not report it? [They] had not reported it to the police because – [they] believed – the police would have informed a social worker. (Coordinator, interview)

Some young people also widened their social networks through introductions from their Coordinator. Examples included meeting people through a mutual interest, for example, gardening or knitting, or through the meals organised by the Local Area Coordination team where young people met others in their community.

> As I'm growing up and becoming less reliant on other services [social worker, mental health services] it's still nice to have someone who isn't any of those things but is still there to catch up and help you enjoy things. I didn't know about a lot of the stuff that happens in my

> area and thanks to my Local Area Coordinator I feel like there a lot of things I am interested in that are right on my doorstep. (Care leaver, open-ended survey question)

However, this was an ongoing process for some young people who struggled to build and maintain relationships: "[The young person] has said [they like] people to reach out to [them] … I said [they have] to be the one that reaches out and talked about how to connect with the community." (Coordinator, interview)

Lastly, in interviews with young people, it was noted that the relationship with the Coordinator was an important relationship. Young people described Coordinators as a 'friend' or 'a mum or step mum, or auntie'.

## Housing and living independently

Finding and maintaining suitable accommodation can bring both stability and security, allowing young people to focus on other aspects of their lives. Figure 3 below reflects the different external pressures which young people talked about facing in their accommodation, including issues with their current housing being unsuitable due to structural problems or for their child, changing circumstances such as moving in with their partner, and wider challenges with appropriate accommodation due to a low supply of local affordable housing suitable to the needs of similar young people.

Although statutory returns typically recorded accommodation as suitable (see Appendix 5), the figure also provides examples of how Coordinators supported young people to understand what they could do about their situation, such as support they could receive from the Council or help completing housing applications. For example, some care leavers sought help to deal with multiple structural problems affecting their home and Coordinators supported young people to speak to the relevant services: "[My Coordinator] got in touch with the Housing Standards for us explaining the problems … we did not even know how to go about it." (Care leaver)

For some young people, this helped them take more control of their living arrangements and they reported feeling more confident making decisions about their accommodation as a result. Several young people moved to a new house between the initial and follow-up interviews while several others were waiting to hear back from the Council. While moving helped address issues for those young people in the short-term, they also noted that they wanted to find a longer-term solution and had started discussing this with their Coordinators.

> Now [the young person] lives in a great place, [they're] happy with the accommodation. I guess it will be stable for quite a while.

> Ultimately, [they] want to get [their] own flat, but want to get a job first. (Coordinator, interview)

## Finances

Although managing money was not the primary focus for all young people interviewed, being in control of their finances appeared to support other goals, such as being in good accommodation or health. Young people mentioned struggling with debt, primarily rent arrears, and understanding the benefits system.

> Finance has always been an issue. Universal Credit is not a benefit that is comfortable to live off if you are in poverty. [The young person]'s partner has worked on and off but [they've] not been consistent. Debt has been an issue. (Coordinator, interview)

> I signposted [them] to an organisation called Sorted [because they] had got so far in with [their] debt. (Coordinator, interview)

Lacking money also had implications on wellbeing. For example, some young people experienced difficulties when trying to access basic healthcare services due to not having credit on their phone to ring the GP to book an appointment.

Young people and Coordinators worked together on budgeting and using money sensibly. This included advice on how to do the shopping, how to navigate the benefits system, and assessing the impact that work could have on benefit eligibility. Where young people had increasing amounts of debt, Coordinators helped them make a repayment plan and supported them to access relevant helplines or statutory services.

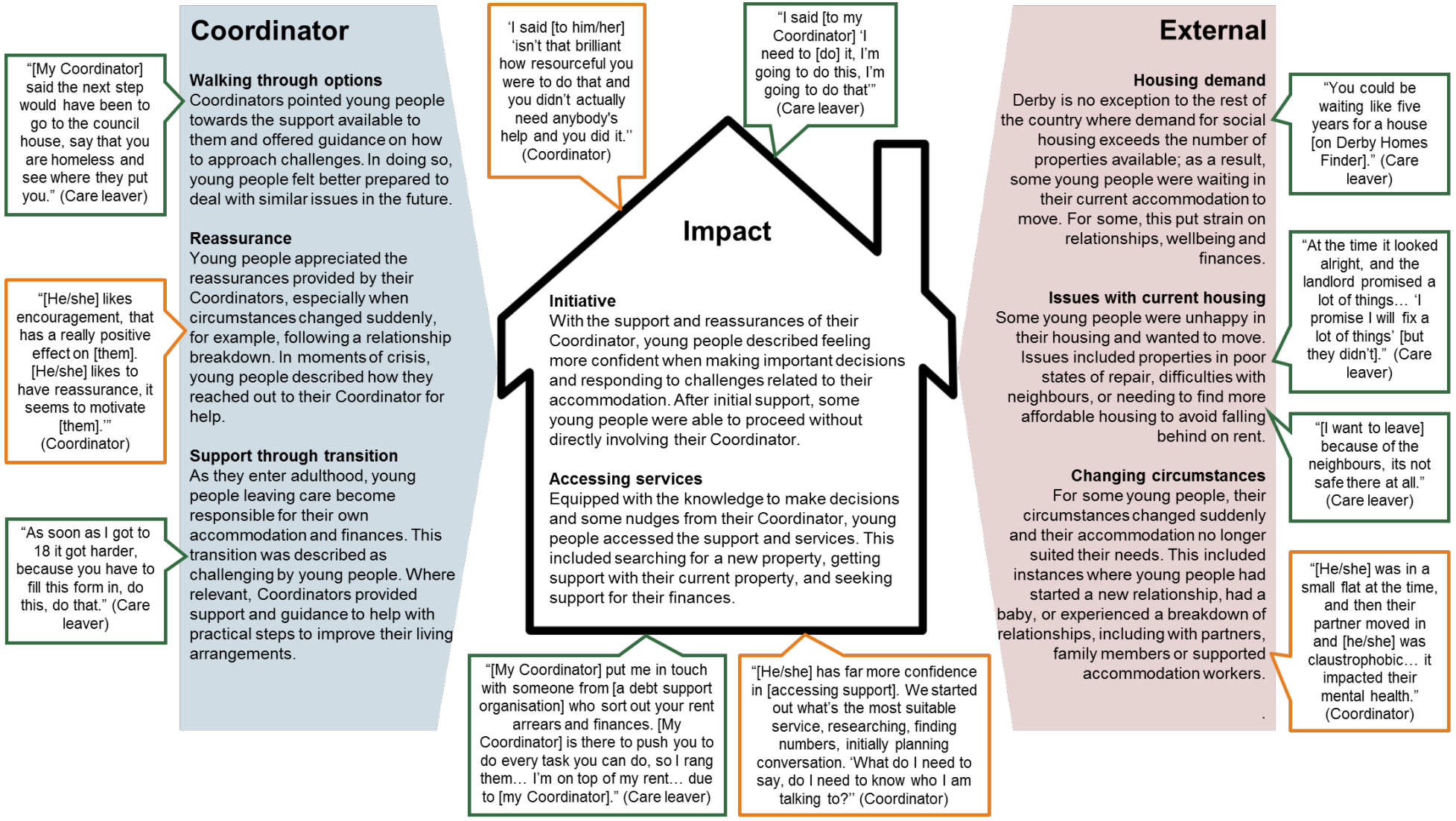
> I am paying my debt, I am on top of my rent, I'm doing everything now, due to [my Coordinator]. If it weren't for them, saying – 'Get on that Discretionary Housing Payments'…. they won't leave until I've done it, won't leave until I've accomplished that task. (Care leaver)

> [The young person's] finances seem a bit more sorted now, they can get in touch with different agencies … they say [they do not] need any more help with that. (Coordinator, interview)

In addition, Coordinators used their links within the local community to source items that young people would otherwise have struggled to purchase, for example baby-care items:

> We didn't have a pushchair or stairs gates, so [my Coordinator] went around the community, reached out to them, got me stairgates, a whole pushchair set, … brought food. (Care leaver)

**Figure 3: Evidence summary on housing and living arrangements**




Source: Ipsos MORI, based on case study interviews with young people and Coordinators

## Building confidence and aspirations

Young people often felt they did not have the knowledge or confidence to make the changes they wanted, for example, initiating an application process or telephoning a service. This was particularly the case for accommodation, health and finance services. Coordinators helped young people build their confidence and offered practical help.

> I was quite nervous [to make a phone call]. At that time, I felt quite stuck … [Without my Coordinator's help] I wouldn't have been able to speak on the phone right now. (Care leaver)

> Using my phone has been a big part. [Young people saying] 'I need to call the social worker', or bank… Part of my role has been to lend [them] my phone. (Coordinator, interview)

Coordinators and young people worked together to boost their social skills and confidence to navigate conversations and processes by themselves. Some young people showed significant progress while others were still starting off.

> [They have] far more confidence [to do that]. We started out asking what's the most suitable service, researching, finding numbers, initially planning the conversation. What do I need to say, do I need to know who I am talking to? In all that time, I have probably made only 3 phone calls for [them]. It's a balance, isn't it. Wanting to help, but how can they do it themselves when you are not there. (Coordinator, interview)

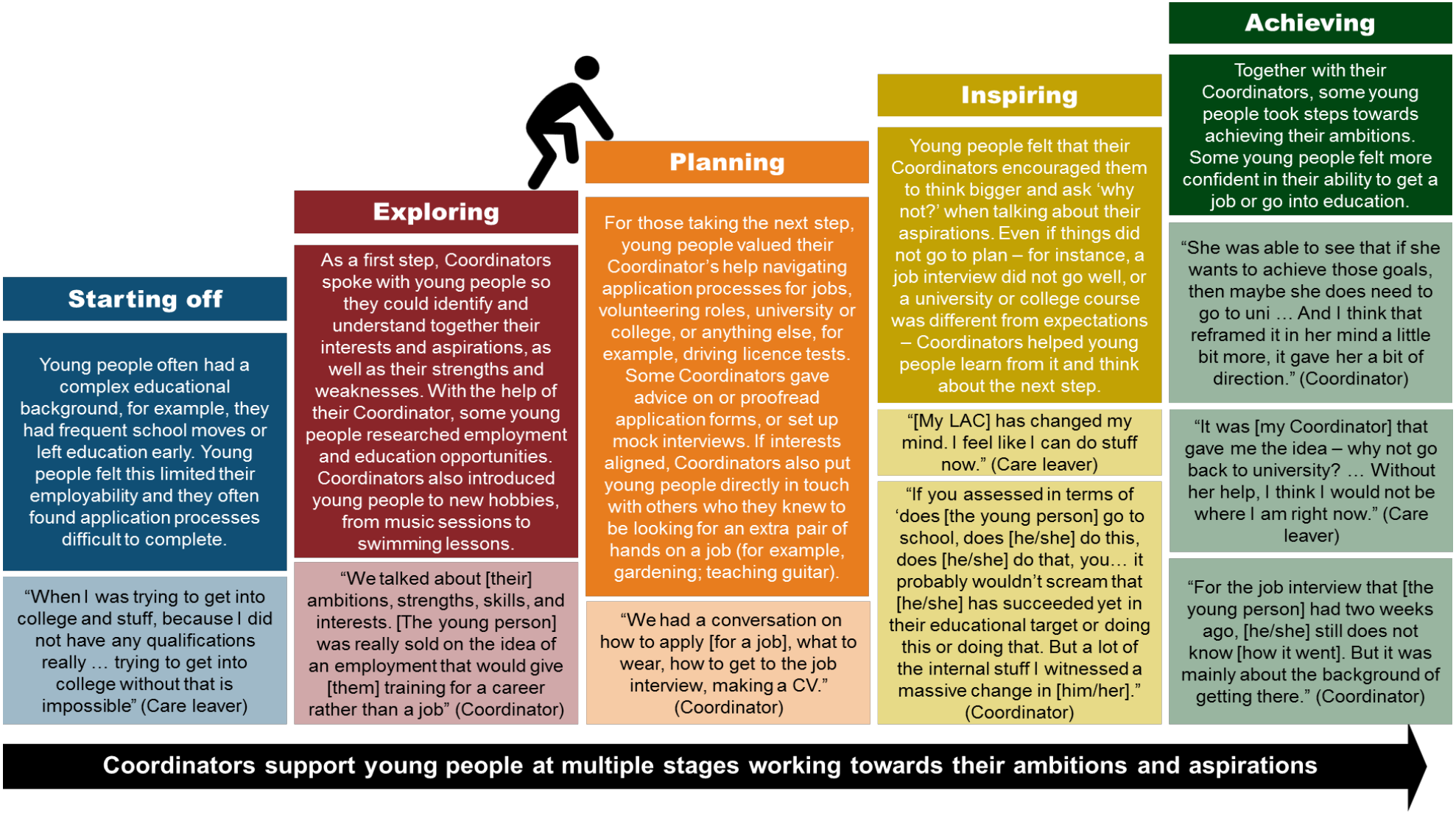
Building this confidence was typically the first step for young people to begin thinking about their goals and aspirations. Figure 4 overleaf shows how Coordinators supported young people through a series of stages to help them achieve their goals (see Appendix 5 for more details).

> I didn't know where to start before I met my Coordinator, then she helped me doing things step by step. (Care leaver, open-ended survey question)

Each young person was working towards different types of goals, and some were in later stages of achieving these goals. For example, some young people were applying to jobs or planning to go (back) to college or university, and others had already started full-time positions with the help of their Coordinator.

> [My Coordinator] made me feel confident again to the point I started full time work. (Care leaver, open-ended survey question)

**Figure 4: Evidence summary on education, employment and other aspirations**




Source: Ipsos MORI, based on case study interviews with young people and Coordinators

### Risk-taking behaviour and other challenges

None of the young people interviewed focused on risk-taking behaviours or mentioned this as a key focus with their Coordinators. However, most Coordinators explained that it came up in broader discussions around values, aspirations, wellbeing, and choices around lifestyles or relationships.

> We talked extensively about the values that [they want] to have in life, especially in the relationship with [their] partner. (Coordinator, interview)

> A lot of my work has been about risk taking, and the consequences of decisions [they] may take. (Coordinator, interview)

Some of the Coordinators indicated that they did not always feel legitimate in their role to question or challenge the young people on these choices, unless those risk-taking behaviours were particularly concerning or hindering progress on areas they were focused on with young people.

> As a Coordinator, [care leavers] may be making bad choices … but it's their choice. I don't think [the young person] told me that [they] smoke cannabis, but it was obvious to me. But I could not make [them] address it, and not appropriate to challenge it. It's [their] choice. [You have to] separate that from what your personal views could be. (Coordinator, interview)

When these issues were discussed with young people, Coordinators felt they had limited options to address them, beyond having open conversations about values, responsibilities, and supporting young people to other relevant services.

> [They] had a bit of a relapse and started smoking more – what other things can we introduce? Smoking cannabis keeps [them] calmer, but [they are] making a choice and I can say 'these are the options if you want to address it, these are the services, the people I can connect you to'. But that's the message. (Coordinator, interview)

## 3.3. Sustainability

There was a strong sense among senior stakeholders, Coordinator and young people that the need for Local Area Coordination in Derby City Council will continue after the original funding ending in March 2020. Through additional funding from the Department for Education, the programme was able to extend for another year, and it was felt that support for young people would potentially increase going forward. It was felt that a lot of

important work to implement the approach had been achieved in the past two years, and that more would be done to offer the support of a Coordinator for those over the age of 21.

For care leavers, when prompted about their need for Local Area Coordination support in the future, some thought it would be minimal, as they had acquired the confidence to live their life independently.

> I'll probably only [need my Coordinator for] this year. I believe I'm standing on my own 2 feet now. I don't really contact my leaving care worker either, I like to just get on with things by myself and I feel like I've had all the help that I need. (Care leaver)

## 3.4. Value for money

According to project staff, the costs associated with delivering the project were primarily time-related. This included the time of one of the senior project managers, 6 Coordinators and the Data Analyst role supporting internal monitoring and evaluation. There were also costs associated with the recruitment of the new Coordinators. Additional costs included expenses associated with supporting young people, including travel and mileage, phone changes, and events such as the peer networking meals.

Given the promising evidence described, the costs associated with the project may be off-set by potential costs avoided as a result of the project. These costs may relate to system-level outcomes, including changes in wider organisational functions, staff-level outcomes or outcomes for care leavers - for example, by reducing demand on formal services. Unfortunately, any assessment of value for money would be highly speculative based on available evidence and key limitations described below.

It is important to note that the Local Area Coordination team supported many young people who did not meet the requirements to be defined as a 'care leaver'. This had implications for a value for money assessment. For example, potential costs avoided would relate to other services, such as A&E or mental health services rather than statutory support for care leavers. Also, using the comparison group in the evaluation would be misleading as it only included young people supported by the Leaving Care team (and baseline differences were evident). While there is qualitative evidence that some young people have made changes to their service use, validating this was limited by the lack of historical and current data on their service use (and that of a suitable comparator group).

# 4. Summary of key findings on 7 practice features and 7 outcomes

Evidence from the Innovation Programme Round 1 Final Evaluation Report (2017) led DfE to identify 7 features of practice and 7 outcomes that successful projects seemed to have in common.[10] Here we address 6 practice features and 5 outcomes relevant to Local Area Coordination.

## 4.1. Practice features

**Strengths-based practice frameworks**: The strengths-based nature of Local Area Coordination is highlighted by the fact that Coordinators support the young person in setting their own goals based on their aspirations and skills. Qualitative work highlighted that relationships are driven by young people and progress is made at their own pace. Young people appreciate this approach and feel they can engage on their own terms, in contrast to statutory services.

**Multi-disciplinary skill sets**: Coordinators have varied professional backgrounds and expertise, rather than the team being multi-disciplinary by design. One element of the work of Coordinators is to signpost young people to specialist services and, importantly, to support them in engagement with these services. Young people in qualitative interviews reported using services they had not considered using before as a result of being supported by a Coordinator.

**Group case discussion**: The Local Area Coordination team hold fortnightly meetings alongside more informal exchanges, including a WhatsApp group used for communications. Interviews highlighted that these are important channels to discuss particular issues and seek advice from colleagues. Formative experiences are also shared with the wider team in the course of these discussions if deemed relevant. A suggestion from some Coordinators is that smaller, and more targeted groups, such as focusing on how to support young people's mental health, could be formed to improve knowledge sharing during meetings and the support offered.

**Family focus:** Although the project does not directly focus on families, care leavers reported that Coordinators, where relevant, supported their families more widely. This included support to young people's parents to engage in the community as well as their

[10] Sebba, J., Luke, N., McNeish, D., and Rees, A. (2017) *Children's Social Care Innovation Programme: Final evaluation report*, Department for Education, available here.

partners and children. Furthermore, Coordinators also provided advice on how to manage day-to-day family life and improving disrupted family relationships.

**High intensity and consistency of practitioner:** Coordinators reported having continual interactions with care leavers, either in person or via phone calls, text messages or messaging applications. This contact took place on a regular basis or ad-hoc to discuss particular issues. Care leavers stressed how they valued being able to contact their Coordinators whenever they needed, without there being 'office hours'. Although care leavers understood that Coordinators had their own family lives, they felt that Coordinators tried to help as quickly as possible. Care leavers reported appreciating the communication from Coordinators as to when they would be able to help, if they were not able to help immediately.

**Skilled direct work:** While capacity for direct work with each individual was affected by caseload, young people felt that they had the right amount of contact and support from their Coordinator. Although Coordinators were not trained social workers, they were provided with training in the Local Area Coordination approach and the team received training on extending the approach to care leavers at the start of this project, including meeting with and shadowing PAs and vice versa, and trauma-informed approaches.

## 4.2. Outcomes

**Reducing risk for young people:** In interviews Coordinators and care leavers reported speaking to each other about the potential impact of certain behaviours on the achievement of care leavers' goals and the fulfilment of their ambitions. This has helped some young people to reduce substance abuse or take more responsibility for their actions.

**Creating greater stability for people:** Qualitative evidence showed that not all care leavers had achieved stability in all aspects of their lives. One area in which Coordinators had worked well with care leavers was health, signposting to relevant medical services and supporting care leavers to act on medical advice. This was seen as a prerequisite for further achievements in other areas, such as accommodation or education, employment and training.

**Increasing wellbeing for young people:** Survey data from care leavers with Local Area Coordination support indicate that wellbeing, measured by the short Warwick Edinburgh Mental Wellbeing Scale (sWEMWBS), declined between the initial and the follow-up survey. These findings need to be read extremely cautiously due to small sample sizes, especially given that qualitative evidence showed a more nuanced picture, with young people noting that Coordinators supported their mental health and wellbeing and that they would otherwise be worse off.

**Increasing workforce stability and wellbeing:** The original funding bid anticipated working more closely with the Leaving Care team in Derby and therefore originally aimed to support the workforce as they faced increasing pressure due to an increase in the number of young people leaving care. However, there was less overlap between the teams because the Local Area Coordination team supported multiple young people who had been in care but did not meet requirements to receive Council support as a care leaver. As such, senior leaders reflected that Local Area Coordination had minimal to no impact on the day-to-day delivery of care leaver services.

**Generating better value for money:** Coordinators indicated that the support they provide is likely to reduce care leavers' need for emergency services, while promoting sustainable outcomes. The numbers of care leavers Coordinators worked with during the evaluation period was too small to provide a reliable analysis of value for money.

# 5. Lessons and implications

The evaluation of Local Area Coordination in Derby City Council offers lessons for future projects that seek to introduce Local Area Coordination to their local authority or area. It also offers views more broadly for projects that aim to improve services for young people leaving care.

## Key lessons

### Set-up

Derby City Council introduced Local Area Coordination in 2012. This meant that there was a team of experienced Coordinators who were already established in wards and understood each ward's local context, opportunities and needs. The Coordinators recruited for this project could learn Local Area Coordination principles from the wider team, while also bringing their own expertise and backgrounds working with children, young people and families. This supported the team's capacity to extend support to vulnerable young people where Coordinators were used to working with older adults. As such, other local authorities who already apply the Local Area Coordination approach should be well-placed to extend their support in similar ways. For local authorities introducing Local Area Coordination for the first time, they should anticipate a significantly longer set-up period.

**Recommendation 1:** Local authorities (or other bodies) that seek to use a Local Area Coordination support model should build in sufficient lead-in time from the outset to account for recruitment, training, scoping resources in the community, building networks that can facilitate introductions, and setting up appropriate monitoring processes. Joint working between Leaving Care and other internal services should be encouraged to increase collaboration.

### Knowledge-sharing

In Derby City, the Local Area Coordination team sits within adult social care services. To extend Local Area Coordination to young people leaving care, senior leaders recognised the importance of collaborating with the local Leaving Care team. The two teams met on several occasions during early stages of the project, including shadowing by PAs of Coordinators and vice versa. Although it was acknowledged that PAs were in a strong position to introduce young people to the Local Area Coordination team, this happened far less frequently than anticipated and this resulted in a slower pace to introductions than expected.

**Recommendation 2:** Although Local Area Coordination is an all-ages model, team managers should introduce additional resources to support Coordinators responding to specific needs or challenges, for example, the team in Derby introduced training on trauma-informed approaches. Knowledge transfer within and between teams should be encouraged, for example, learning from professionals with experience of supporting vulnerable young people, ideally those in or leaving care. In addition to identifying resources within the community, Coordinators should also be aware of entitlements and support available to care leavers, especially those who do not have a PA – for example, not being required to pay Council Tax.

## Monitoring processes

Although the funding bid set out intentions to have data monitoring and management processes, it was clear from the outset of the evaluation that recording progress and outcomes was viewed by some staff members as conflicting with the Local Area Coordination approach. Staff raised concerns that young people might feel like they were being assessed, which could be detrimental to building a trusting relationship. Although the Shared Agreements offered the opportunity for Coordinators and young people to create an action plan and reflect on progress made against this, as well as against more general outcomes measured by the outcomes star, these were completed flexibly. The original bid suggested these should be completed for all new introductions and reviewed every 6 months. In reality, these were not completed at all for some young people within the evaluation timeframe and reviews were completed variably.

**Recommendation 3:** Local Area Coordination teams should carefully consider internal approaches to recording progress and outcomes with the aim to develop an approach that capture the effects on individuals they support. Realistic expectations for the content, format and frequency of collection should be agreed and co-designed with Coordinators to balance the benefits of recording progress (e.g. success stories) with the costs and administrative burden. Given the highly mobile nature of Local Area Coordination, using mobile apps or Tablets may be desirable, offering teams the opportunity to record information in real-time, in the community, without the need of being in an office. Teams could also record information about individuals who decline the offer to better understand reasons for this.

## Setting realistic expectations

Care leavers are at greater risk of experiencing poorer life outcomes than their peers who have not spent time in care. It was clear from case studies with young people being supported by Coordinators that their journeys to better outcomes were not linear. Many made good progress but were then affected by a negative life experience, such as relationships breaking down with their partner or a family member, or significant issues

relating to their accommodation. In some cases, this slowed, stopped or even reversed their forward momentum against some outcomes. If measured solely on outcomes, this would suggest Local Area Coordination was having a limited effect. However, this does not account for what would have happened without support from a Coordinator. For example, although the circumstances of some young people were reflected in their outcomes, they felt they would have been in a worse place if they did not have the support of their Coordinator.

**Recommendation 4:** Commissioners and project staff should consider what is a good outcome and how this is measured, especially for young people who are often more vulnerable to adverse experiences and need to build resilience before achieving sustained positive outcomes. This should be realistic about the likely impact during a time-constrained innovation project on outcomes that take significant time and effort to result in sustained improvements. Evaluators should work closely with project teams to identify an appropriate counterfactual to better test what would have happened in the absence of having a Coordinator.

## Sequencing of outcomes

Following on from the point above, it was also evident in case studies with young people that some positive outcomes were necessary to create the foundations for achieving other outcomes. For example, where young people had difficulties with their mental health and wellbeing, their accommodation or living situation, or did not have a sound support system, they were often not in a position to get or maintain a job, go to college or university, or excel at independent living.

**Recommendation 5:** Commissioners and project staff should consider how different outcomes are valued and recognise that some outcomes may be precursors to others. To avoid overambitious claims that projects will seek to improve multiple outcomes, project staff should identify key aims to assist evaluators in defining realistic primary and secondary outcomes.

## Redefining who needs support

When the funding bid was developed, it appeared to focus on care leavers according to the statutory definition. However, over time, Coordinators were introduced to young people who had spent time in care as a child but may not have met the requirements to be defined as a care leaver and therefore did not receive statutory Leaving Care support. These individuals were often experiencing similar challenges as those meeting the statutory definition, but without the support of a PA. It appeared that these young people could also benefit from support during their transition to adulthood and to avoid poorer outcomes that could result in increased use of services and costs for the Council.

Combined with fewer introductions from the Leaving Care team, this meant there was less overlap and collaboration between the Leaving Care team and Local Area Coordination team than expected, and Coordinators appeared to address a gap in service provision.

**Recommendation 6:** Policymakers and local authorities ought to consider how best to address the gap in service provision and expand the support offer to young people who have been in care but do not meet the statutory requirements to receive leaving care support such as a PA. Local Area Coordination may offer a potential solution to support individuals who are struggling in their transition to adulthood.

## Implications

The above lessons had implications for both the project and the evaluation. As with similar projects in innovative changes to service delivery, more time than anticipated is often needed to implement, embed and roll-out such support.

The project may have identified a gap in service provision for young people who did not meet the statutory requirements to receive support offered to care leavers. It appeared that the Leaving Care team was not in contact with multiple young people that Coordinators met and supported and the Council did not routinely collect statutory data on them. Support offered by Coordinators may be a suitable approach to support these young people during their transition into adulthood.

Another key implication is that a lack of outcome improvement should not be interpreted as the project or intervention being unsuccessful, where an appropriate counterfactual has not been incorporated. Given the complex circumstances and how outcomes are often intertwined, the evaluation was limited by the lack of a well-matched comparison group (due to many intervention group care leavers not having had access to PA support) and small sample sizes.

Key elements such as flexibility and high intensity of support are critical to this approach, which mean rolling the approach out may have high costs that would need to be offset through the avoidance of unnecessary service use and/or improved life chances and outcomes in order to be cost-effective.

## Project legacy and sustainability

Given that Local Area Coordination is already embedded within Derby City Council, the delivery of support for care leavers introduced to Coordinators during this project will continue as Local Area Coordination ‘cases’ do not formally close.

As of March 2020, Derby City Council received additional funding to continue Local Area Coordination among care leavers under the Innovation Programme. At the time of writing, the project team are developing plans to submit to the Department for Education.

## Future development and wider application

The Local Area Coordination approach, originally from Western Australia, has been repeatedly replicated in new areas. As an all-age approach, it offers opportunities for local authorities to engage a wide range of individuals who could benefit from the support. The findings from this evaluation support its use with young people who have experienced being in care, particularly where local authorities can incorporate the lessons learned to create more joint working with Leaving Care teams, or indeed offering support to care-experienced young people who do not qualify for statutory support.

# References

Derby City Council (2020). Local Area Coordination. Available here.

DfE (2015). Care leavers' transition to adulthood. Available here.

DfE (2018). Extending Personal Adviser support to all care leavers to age 25: Statutory guidance for local authorities. Available here.

DfE (2020). Local authority tables: children looked after in England including adoption 2018 to 2019. Available here.

Ipsos MORI (2019). Evaluation of the Derby Local Area Coordination Project: Interim evaluation report. Not published.

LAC Network (2020). How do we know Local Area Coordination works? Available here.

Local Authority Interactive Tool (LAIT). Last updated 5 March 2020. Available here.

Ofsted (2017). Inspection of services for children in need of help and protection, children looked after and care leavers: Inspection date: 6 March 2017 – 30 March 2017. Available here.

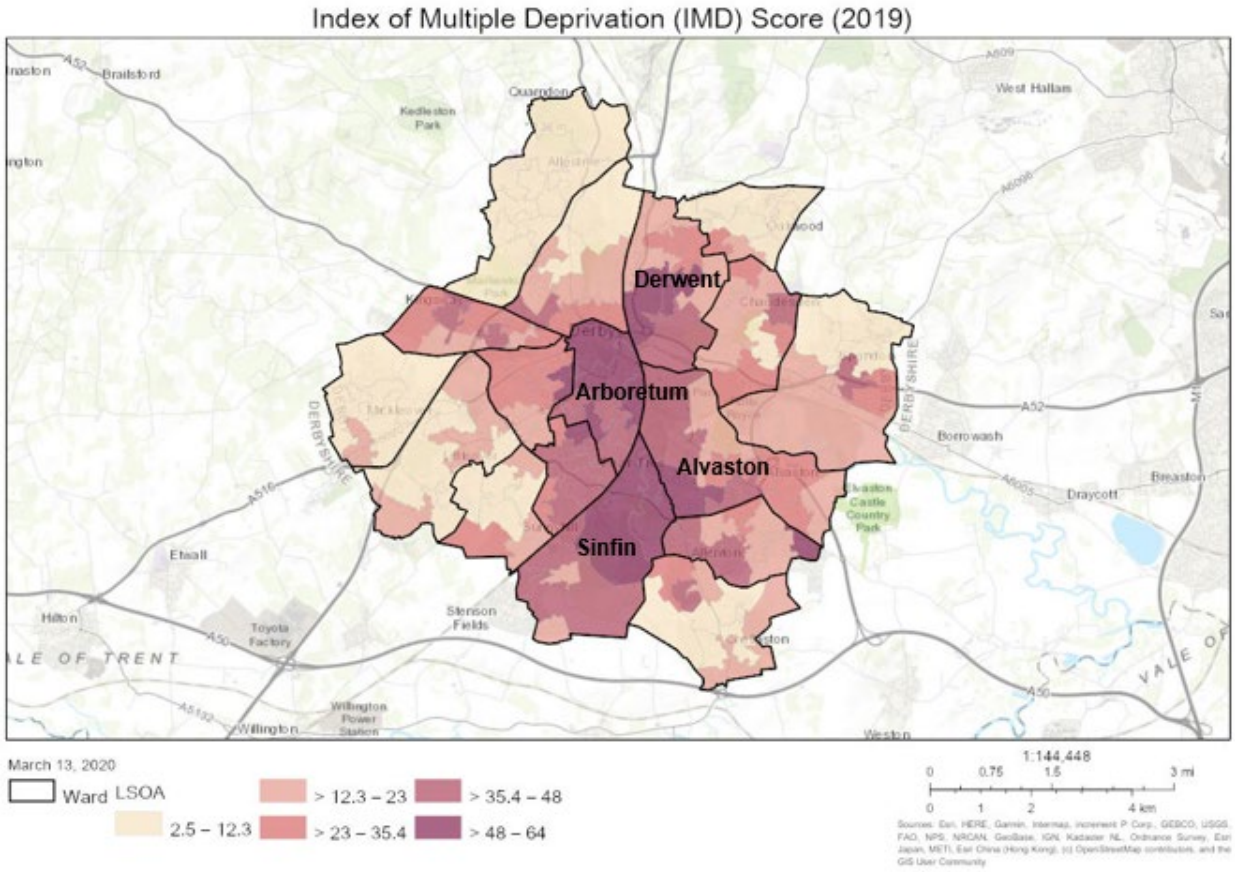
Sebba, J., Luke, N., McNeish, D., and Rees, A. (2017) Children's Social Care Innovation Programme: Final evaluation report, Department for Education. Available here.

# Appendix 1: Index of Multiple Deprivation – Derby City

The Index of Multiple Deprivation (IMD) is the official measure of relative deprivation for small areas in England.[11] It broadly defines deprivation to cover a wide range of an individual's living conditions (it involves 29 separate indicators across 7 categories).

The map below depicts the IMD scores of LSOAs in Derby, with ward boundaries. The 4 focus wards for this project (Alvaston, Arboretum, Derwent, Sinfin) are noted, which clearly show a higher proportion of LSOAs with high IMD scores compared with the rest of Derby.

**Figure 5: Index of Multiple Deprivation – Derby City**




Individual ward level reports on deprivation are available here: https://info4derby.derby.gov.uk/deprivation/report/view/f86861a9e5004b23aaca1cc3452c4c47/E05001770

[11] https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019

# Appendix 2: Project theory of change

Figure 6 below illustrates the original logic model for the Derby Local Area Coordination project from early 2017. Figure 7 below shows the updated logic model from late 2019 developed by the Local Area Coordination management team with their DfE Spring Coach. It is important to note that the updated logic model is not specific to this project working with care leavers but represents Local Area Coordination more broadly.

Care leavers are generally affected by a variety of factors including social isolation, poor mental, emotional and physical health, lack of opportunities for education, employment, and training, lack of skills for living independently, and a general lack of permanency.

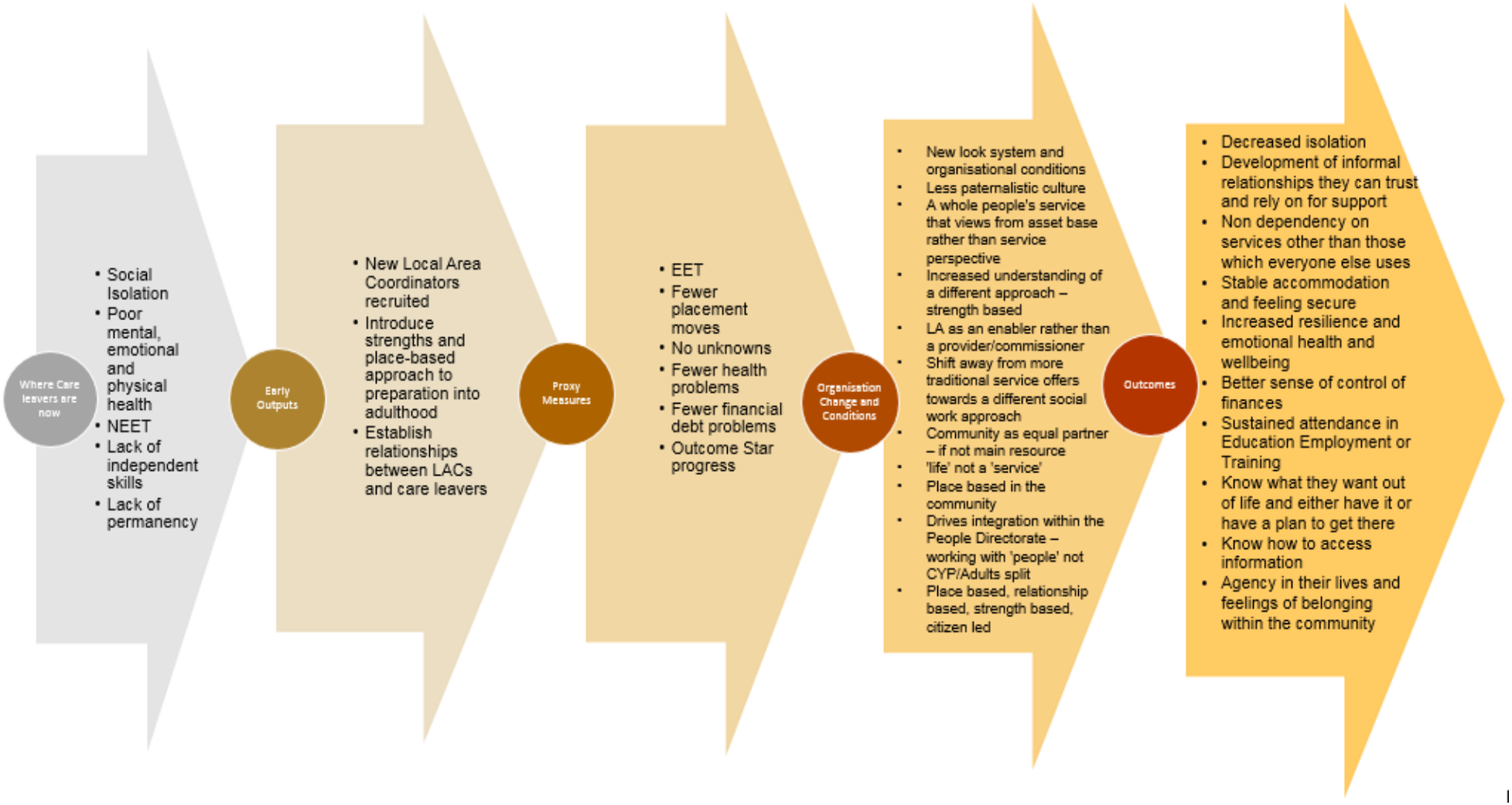
The project sought to recruit new Coordinators that could build relationships with young care leavers. Through a mix of strength- and place-based approaches, Coordinators would help prepare young care leavers to adulthood and independence.

Proxy measures can be understood as indicators that show the extent of the progress achieved through early outputs. Improvements in education, employment, and training were intended to be assessed alongside changes in the number of health problems, financial issues, and Outcome Star progress.

The activity of Coordinators is voluntary and directed by individual care leavers' needs. In general, this translates to a less traditional approach to care, with a focus shift on providing a strength- and asset-based service. For this reason, the Coordinator is seen as an enabler of capabilities as opposed to a more traditional provider of support. Ultimately, changes should be visible in terms of a more place- and relationship-based approach which allows Coordinators and care leavers to be closely embedded into the community that they are part of.

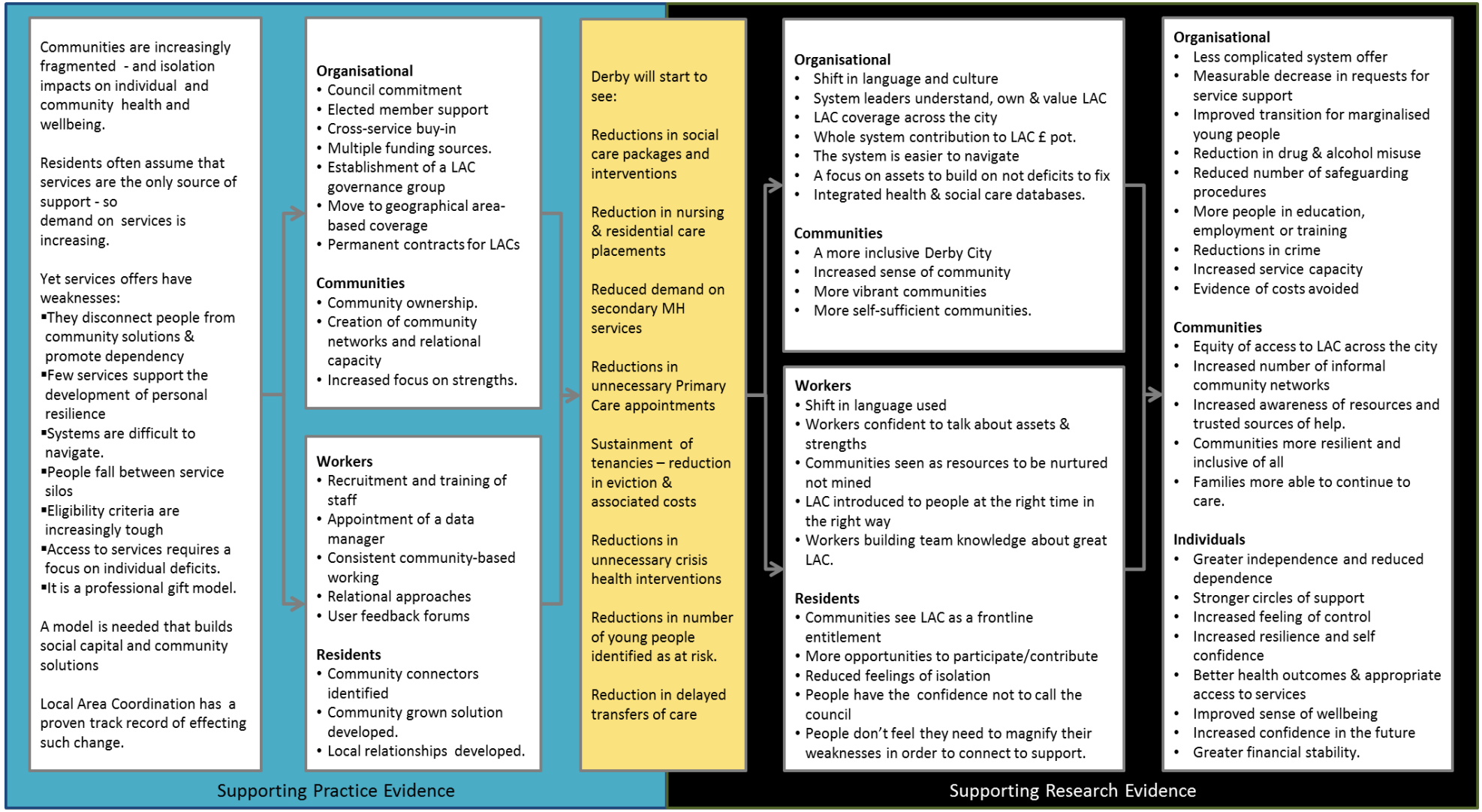
The Coordinator's support is expected to allow care leavers to achieve progress across a broad spectrum of indicators. Coordinators aim to establish informal relationships by earning the trust of care leavers. In particular, the programme seeks to contribute to reducing the isolation that care leavers face and to help them obtain the information they need in everyday life, while enabling them to be in control of their lives, reducing their dependency on other services and improving their sense of resilience, purpose in life, and belonging to the community. In addition to this, the programme also aims to contribute to ensure that care leavers can enjoy stable accommodation, thereby improving their feeling of security.

**Figure 6: Original logic model for the Derby Local Area Coordination project**




Source: The original logic model was developed by Local Area Coordination staff in collaboration with their DfE Spring Coach in 2017.

**Figure 7: Updated logic model for the Derby Local Area Coordination project**



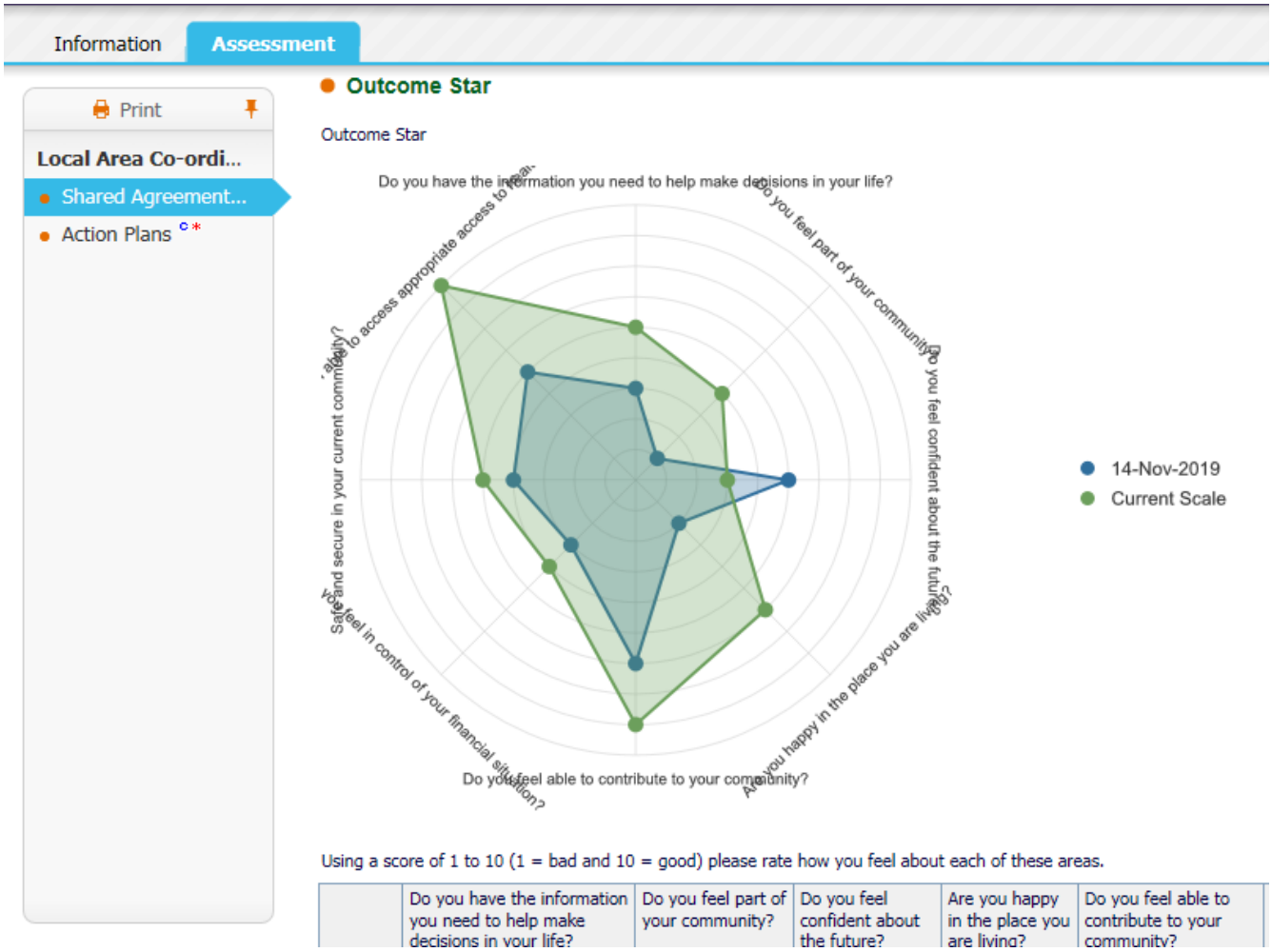

Source: This updated logic model was developed by Local Area Coordination staff in collaboration with their DfE Spring Coach in late 2019.

# Appendix 3: Derby outcomes star

The outcomes star formed part of the Shared Agreement. It was intended that Coordinators and young people would complete this following their introduction and then review it every six months. When used in this way, the outcomes star shows changes over time, for example, whether young people felt more or less in control of their financial situation compared with the last timepoint.

Figure 8 below shows a screen capture of how the outcomes star is documented on the team's internal monitoring platform.

**Figure 8: Outcome Star for the Derby Local Area Coordination project**




Source: Derby City Council – Local Area Coordination Shared Agreement

The outcomes star asks: Using a score of 1 to 10 (1=bad and 10=good) please rate how you feel about each of these areas.

1. Do you have the information you need to make decisions in your life?
2. Do you feel part of a community?

3. Do you feel confident about the future?
4. Are you happy in the place you are living?
5. Do you feel able to contribute to your community?
6. Do you feel in control of your financial situation?
7. Do you feel safe and secure in your current community?
8. Do you feel able to access appropriate health support?

# Appendix 4: Survey analysis

As noted in the main text, there were key limitations associated with the survey data collection, including: small sample sizes; high attrition at follow-up; not all young people in the intervention group completed the survey(s); and the inability to apply robust matching techniques to improve comparisons. Given these limitations, the weight of evidence for the survey data was reduced when triangulating with qualitative data and secondary data. Results related to mental health and wellbeing are in the main text and the results of the Short Warwick Edinburgh Wellbeing Scale (sWEMWBS) are below. Additional results are available on request.

The sWEMWBS is a short version of the Warwick–Edinburgh Mental Wellbeing Scale (WEMWBS)[12]. The WEMWBS was developed to enable the monitoring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing. The sWEMWBS uses seven of the WEMWBS's 14 statements about thoughts and feelings, including:

- I've been feeling optimistic about the future
- I've been feeling useful
- I've been feeling relaxed
- I've been dealing with problems well
- I've been thinking clearly
- I've been feeling close to other people
- I've been able to make up my own mind about things

Young people were asked to describe their experiences over the past two weeks. Please note the samples are not longitudinal as some young people completed one survey only.

**Table 6: sWEMWBS scores**

| **Question** | **Wave 1** | | **Wave 2** | |
|---|---|---|---|---|
| **Please select the option below that best describes your experience of each statement over the last 2 weeks.** | **Int.** | **Comp.** | **Int.** | **Comp.** |
| **N=** | **11*** | **30*** | **5** | **10** |
| sWEMWBS (converted) score | 20.7 | 22.6 | 19.2** | 23.9 |

*Could not calculate scores for 4 participants (2 from each group) due to missing answers.

**Excludes an outlier with a substantially lower score than others.

Source: Ipsos MORI survey data

[12] https://www.corc.uk.net/outcome-experience-measures/short-warwick-edinburgh-mental-wellbeing-scale/

# Appendix 5: SSDA903 data analysis

## All care leavers in Derby City Council

Using individual-level SSDA903 data provided by Derby City Council, Table 7 summarises the key characteristics of care leavers based on statutory returns from the last 3 years, including 2016/17, 2017/18 and 2018/19.

**Table 7: SSDA903 data for all young people in Derby City Council**

| | Year or statutory return | 2016/17 | 2017/18 | 2018/19 |
|---|---|---|---|---|
| | N= | 192 | 210 | 239 |
| Gender | Male | 103 | 119 | 141 |
| | Female | 89 | 91 | 98 |
| Ethnicity | White (British/Irish/other) | 137 | 146 | 169 |
| | Other | 55 | 64 | 70 |
| Motherhood status | Yes | 1 | 3 | 4 |
| Postcode | Living in Derby | 121 | 141 | 169 |
| | Out of Derby | 58 | 60 | 50 |
| | Unknown | 13 | 9 | 20 |
| Local authority in touch | In touch | 179 | 199 | 229 |
| | Not in touch (excl. in figures below) | 13 | 11 | 10 |
| EET status | Full-time EET | 102 | 105 | 100 |
| | Part-time EET | 10 | 28 | 19 |
| | NEET | 71 | 66 | 110 |
| Reasons for NEET | Illness/disability | 17 | 17 | 30 |
| | Pregnant/parenting | 16 | 13 | 9 |
| | Other circumstances | 38 | 36 | 71 |
| Suitable accommodation | Suitable | 168 | 181 | 204 |
| | Unsuitable | 15 | 18 | 25 |
| History in care | Average number of years in care | 6.1 | 5.4 | 5.0 |

Source: SSDA903 data provided by Derby City Council

## Care leavers receiving Local Area Coordination support

Of the 30 introductions made by Coordinators (excluding 9 who declined, see below), 15 young people were identifiable in the statutory data returns over the last 3 years. Table 8 summarises this data. Key points to highlight include:

- Among these 15 care leavers, more were female, despite a greater proportion of male care leavers in Derby City.
- Given the localised community approach, Coordinators did not support young people living outside of Derby. Where young people moved out of Derby, these were considered 'closed'.
- Compared with the EET status of all care leavers in Derby City, Coordinators appeared to support a higher proportion of those with a NEET status.
- Recognising the limitation of small sample sizes, it appears that this group of 15 care leavers spent more time in care compared with the average in Derby City.

Another 15 young people were introduced to Coordinators but did not appear in statutory data returns over the last 3 years. In some cases, this appeared to be due to individuals being too young while others were 21 or over. In other cases, it appeared young people may not have met the formal definition of a 'care leaver'.

**Table 8: SSDA903 data for care leavers supported by Coordinators**

| | **Year or statutory return** | **2016/17** | **2017/18** | **2018/19** |
|---|---|---|---|---|
| | **N=** | **9** | **10** | **12** |
| Relationship status with Coordinator as of March 2020 | Active | 3 | 3 | 4 |
| | Inactive | 6 | 6 | 5 |
| | Pending | 0 | 1 | 1 |
| | Closed | 0 | 0 | 2 |
| Gender | Male | 2 | 2 | 4 |
| | Female | 7 | 8 | 8 |
| Ethnicity | White (British/Irish/other) | 7 | 8 | 10 |
| | Other | 2 | 2 | 2 |
| Motherhood status | Yes | 0 | 0 | 0 |
| Postcode | Living in Derby | 7 | 9 | 12 |
| | Out of Derby | 1 | 0 | 0 |
| | Unknown | 1 | 1 | 0 |
| Local authority in touch | In touch | 8 | 10 | 12 |
| | Not in touch (excl. in figures below) | 1 | 0 | 0 |
| EET status | Full-time EET | 2 | 1 | 2 |
| | Part-time EET | 0 | 4 | 1 |
| | NEET | 6 | 5 | 9 |
| Reasons for NEET | Illness/disability | 3 | 4 | 4 |
| | Pregnant/parenting | 0 | 1 | 0 |
| | Other circumstances | 3 | 0 | 5 |
| Suitable accommodation | Suitable | 8 | 9 | 12 |

| | Year or statutory return | 2016/17 | 2017/18 | 2018/19 |
|---|---|---|---|---|
| | N= | 9 | 10 | 12 |
| | Unsuitable | 0 | 1 | 0 |
| History in care | Average number of years in care | 6.4 | 6.7 | 7 |

Source: SSDA903 data provided by Derby City Council

## Care leavers declining Local Area Coordination support

Among the 9 young people who declined support from Coordinators, data was available for 6 young people in statutory data returns over the last three years. This data is summarised in Table 9 below.

Given the small sample sizes, it is not possible to compare with those who accepted support. However, the two groups do not appear to differ from one another significantly, other than some potential differences in EET status and average time spent in care.

**Table 9: SSDA903 data for care leavers declining Local Area Coordination support**

| | Year or statutory return | 2016/17 | 2017/18 | 2018/19 |
|---|---|---|---|---|
| | N= | 2 | 3 | 6 |
| Gender | Male | 0 | 0 | 2 |
| | Female | 2 | 3 | 4 |
| Ethnicity | White (British/Irish/other) | 2 | 3 | 6 |
| | Other | 0 | 0 | 0 |
| Motherhood status | Yes | 0 | 1 | 0 |
| Postcode | Living in Derby | 2 | 3 | 5 |
| | Out of Derby | 0 | 0 | 0 |
| | Unknown | 0 | 0 | 1 |
| Local authority in touch | In touch | 2 | 3 | 6 |
| | Not in touch (excl. in figures below) | 0 | 0 | 0 |
| EET status | Full-time EET | 1 | 2 | 2 |
| | Part-time EET | 1 | 0 | 0 |
| | NEET | 0 | 1 | 4 |
| Reasons for NEET | Illness/disability | 0 | 0 | 1 |
| | Pregnant/parenting | 0 | 1 | 1 |
| | Other circumstances | 0 | 0 | 2 |
| Suitable accommodation | Suitable | 2 | 3 | 5 |
| | Unsuitable | 0 | 0 | 1 |
| History in care | Average number of years in care | 5.5 | 4.1 | 5.0 |

Source: SSDA903 data provided by Derby City Council

Department for Education

© Department for Education

**Reference: RR1022**

**ISBN: 978-1-83870-130-7**

The views expressed in this report are the authors' and do not necessarily reflect those of the Department for Education.

Any enquiries regarding this publication should be sent to us at:
CSC.Research@education.gov.uk or www.education.gov.uk/contactus